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**“Nothing About Us,
Without Us”**

**Testimony of Friends of Recovery New York
(FOR-NY)**

**Senate Finance and Assembly Ways & Means
Joint Hearing on Mental Hygiene**

February 6, 2017

Presented by:

**Stephanie M. Campbell, MA, MS, MSW
Policy Director
Friends of Recovery New York
(FOR-NY)**

I am Stephanie Campbell and as the Director of Policy for Friends of Recovery New York and I am honored to be invited to today's hearing to discuss how we can address the public health crisis of addiction in New York State.

Friends of Recovery New York represents the voice of individuals and families living in recovery from addiction, families who have lost a family member or people who have been otherwise impacted by addiction. The stigma and shame that surrounds addiction has prevented millions of individuals and family members from seeking help. FOR-NY is dedicated to breaking down the barriers created by stigma that result in discrimination and policies that block or interfere with recovery: access to addiction treatment, healthcare; housing, education and employment.

I am also Stephanie Campbell, a person in long-term recovery. What that means is that I have not used alcohol or drugs for over 16 years. Recovery has given me the opportunity to be a mother of two beautiful girls – one who is in her last year at Sarah Lawrence College studying in Japan – and a teenager in her junior year of high school. Recovery has allowed me to be a partner, an employee, and a taxpayer instead of a tax drain. It's allowed me to save the state of New York millions of dollars because someone made an investment in my recovery. As a result I went from being a homeless street kid in New York City, to having a master's degree from Columbia University and an MSW from New York University. Instead of bouncing from jails to institutions, I now advocate on behalf of individuals and families impacted by addiction.

As you know, heroin use and prescription opioid abuse are having devastating effects on public health and safety in New York State. The Centers for Disease Control and Prevention recently announced that drug overdoses now surpass automobile accidents as the leading cause of injury-related deaths for Americans between the ages of 25-64.

The most devastating consequences are seen in the tens of thousands of lives that are lost each year as a result of substance misuse. Alcohol misuse contributes to 88,000 deaths in the United States each year; 1 in 10 deaths among working adults are due to alcohol misuse. In addition, in 2015 drug overdoses accounted for 52,404 deaths – including 33,091 people who died from a drug overdose involving some type of opioid, including prescription pain relievers and heroin—more than in any previous year on record.

Here in New York State, we've seen a 20.4% increase in overdose deaths from 2014-2015. At a FOR-NY Recovery Talks, Bridget Brennan – New York's Special Prosecutor – noted that while heroin overdose deaths afflict white neighborhoods as never before, in New York City the worst damage is found in communities that have suffered the longest. The highest rate of heroin overdose deaths is Hunts Point/Mott Haven in the Bronx, where the problem is not new.

In contrast, a Staten Island community, once untouched by heroin, is second highest.

Addiction does not discriminate. It knows no bounds of race, ethnicity, creed, sexual orientation, gender identity, religion, or lack of religion. It impacts those from Park Avenue, to Park Bench.

As this epidemic is multifaceted, so must be our response.

As a member of the recovery community, I know that my voice and experience is invaluable – because I've found an effective solution to my battle with addiction. That solution came from my peers, who shared their experience, strength and hope with me in places that were safe. Places like the St. Marks Clubhouse – an early RCOC that had mutual aid meetings almost around the clock, and a safe place for homeless youth to get a sandwich or connect with safe adults for recovery service and support.

Unfortunately, thousands of people have not been able to access recovery because there simply are not enough dollars and resources for recovery support and services for individuals and families. And while countless hearings have been going on across the state, recommendations calling for the same resounding need of additional dollars to the NYS Budget appear to have been ignored. Little is being done to address the overwhelming evidence that shows that community based recovery services and peer supports are needed to help individuals with addiction build and sustain their recovery.

Given this urgency, I call on our leaders in the Legislature and the Governor's office, to take immediate actions to address the current addiction crisis in New York State. We must see an IMMEDIATE increase in funding to the NYS 2107 OASAS budget by a minimum of \$46.25 million that will be an investment in Recovery. That money would fund recovery community organizations (RCOs) and recovery community outreach centers (RCOCs). It would fund the implementation of recovery coaches and family support navigators in every county across the state. And it would help individuals and families across NYS who are not accessing critical life-saving treatment get the help they need.

Right now we have an army of people with lived experience – individuals in recovery, family members in recovery, and families who have lost someone to addiction – ready, willing and able to provide the recovery infrastructure desperately needed in their communities across the state. Infrastructure similar to what is being provided in places like the Brooklyn Community Recovery Center, a community responsive, peer driven support center that provides recovery services. They facilitate referrals, mobilize resources, and link individuals to community social supports that assist people in their recovery from addiction, as well as other recovery issues.

But they and thousands of individuals and family members impacted by addiction need your investment to do so.

We see that solutions to the addiction crisis lie in increased funding, and legislation and policies that sustain recovery, and support health and civic engagement for individuals and families affected by addiction. I've sat in the same rooms as you, in numerous hearings across the state. In each of these hearings, we've heard the same thing – there simply is not enough dollars and resources being invested in the solution of recovery. The end result is that people who get out of treatment are not getting the community services and supports they need to keep from relapsing back into active use. And too often, they die.

We need to act NOW...before another family in Buffalo, or Brooklyn, or any other community in the great state of New York, lose another loved one to the chronic, treatable disease of addiction.

As a matter of policy, it is:

- Time to STOP Investing in the PROBLEM- Active Addiction and
- Time to START Investing in the SOLUTION- Addiction Recovery:

FOR-NY RECOVERY ADVOCACY DAY 2017 BUDGET RECOMMENDATIONS

\$45.25 MILLION INVESTMENT IN RECOVERY SUPPORT SERVICES INFRASTRUCTURE NEEDED NOW!

Despite recent improvements a glaring omission still remains in the treatment to recovery continuum; a lack of recovery support services following primary treatment. Friends of Recovery - New York (FOR-NY) asks for the immediate investment of \$45.25 million to build a strong statewide network of local recovery support services for individuals, and families focused on minimizing relapse and maximizing the chances for sustained recovery. Use of peer advocates, recovery coaches and family support navigators must be broadly integrated at the local community level.

A Recovery Community and Outreach Center (RCOC) in Every County = \$16.8 Million - Recovery Community and Outreach Centers are committed to supporting a person's efforts to bolster recovery and prevent relapse, and when this occurs, the aim is a quick return to recovery. As a testament to this need, OASAS received more than 70 Letters of Intent for local RCOCs across the state in response to an RFP issued last year. With 12 RCOCs currently funded, we are asking for the remaining counties including all five NYC boroughs to receive their fair share.

A Recovery Community Organization (RCO) in Every County = \$6.2 Million - Recovery Community Organizations are independent non-profits, led and governed by people in recovery, as well as their family members, friends and allies who mobilize resources within and outside of the recovery community to make it possible for people with the chronic disease of addiction to find and sustain long-term recovery. Each organization has a mission that reflects the particular issues and concerns of its local community. Each RCO will operate at \$100,000.

A Recovery Youth Clubhouse in Every County = \$13.25 Million - Recovery Youth Clubhouses (YCHs) offer a supportive, empowering setting to youth that promotes recovery and wellness while assisting young people in maintain their recovery. Physical activity, sports, nutrition, healthy living, recreation, community service, skill development and educational supports are among the many services that are provided to young people.

Peer Advocates and Recovery Coaches in Every County = \$4.5 Million - Peer Advocates and Recovery Coaches are highly effective persons with lived experience in addiction and recovery

who are trained to serve as mentors and guides. Coaches and Advocates typically work with individuals and families seeking recovery to help remove barriers, assist in navigating systems and connecting to needed resources, all of which result in reduced relapse and improved recovery outcomes. We propose two full-time Recovery Coaches for each RCO or RCOC in every county at \$35,000 each.

Family Support Navigators in Every County = \$4.5 Million - Family Support Navigators will be located in existing, neutral, non-clinical settings, including community-based resource centers, RCOC's and directly attached to local RCO's (\$35,000 per navigator with two per county) to provide information, referrals, insurance navigation, treatment options, recovery support services, family education, and family recovery support – for the family unit as the primary client.

Recovery Community and Outreach Centers (RCOCs)	\$16.8 million
Recovery Community Organizations (RCOs)	\$6.2 million
Recovery Youth Clubhouses (YCHs)	\$13.25 million
Peer Advocates and Recovery Coaches	\$4.5 million
Family Support Recovery Navigators	\$4.5million
Total ---	\$45.25 million

Commitment to Partnership for Success

Money alone cannot solve this problem. Thousands of people in recovery, their families and families who have lost family members stand ready to partner with you to do anything they can to end this crisis and support recovery in their community. They will contribute millions of dollars in volunteer service, raise local funds and mobilize their local communities to create and sustain a culture of recovery. But, they cannot do their job without the \$45.25 million investment in the recovery supports infrastructure.

Enforce Insurance Parity and Expand Access to Addiction Treatment

Although the Federal Mental Health Parity and Addiction Equity Act (MHPAEA) was signed into law in 2008, the Affordable Care Act in 2010, and other access to treatment protections were codified in NY State in 2014 and 2016, individuals and families across New York State are still being denied life-saving addiction treatment because the laws are still not fully implemented or being enforced adequately. We urge the Governor and the NYS Legislature to work together to enforce insurance and parity laws in New York, and hold insurance companies accountable to the new laws, requiring unfettered access to 14 days of initial inpatient treatment. In addition, we call for increased

funding for addiction treatment and recovery support services so that individuals receive care that is accessible, accountable, efficient, equitable, sustained and of the highest quality.

Treatment on Demand: It is unconscionable that individuals must wait days and even weeks on average before they can access sorely needed treatment. Insurers, providers, state and county government units must all work together with recovery community organizations to ensure that immediate access to treatment becomes the norm rather than the exception. Anyone in need, must have access to treatment on par with access for all other medical conditions upon request. To that end, all hospitals must be required to admit any individual into any available bed when presenting with a need for medically supervised withdrawal or stabilization services related to substance use disorder. These admissions are necessary to ensure safe, humane treatment and equal access to a hospital bed as with any other presenting, urgent, medical condition.

Legislation and Regulation: In addition, we recognize that there are number of priority issues that must be addressed through legislation or regulation and FOR-NY stands ready to work with the Governor and Legislature to address these issues. Our priority issues are as follows:

ADDICTION & RECOVERY SAFEGUARDS

Certification of Recovery Homes - We support a standardized certification of recovery homes. Individuals in early recovery must be protected and afforded a safe and supportive living environment. Regulations and supervision must be adopted within the parameters of the Federal Fair Housing Act in a manner that promotes integrity, ensures continuous quality improvement, upholds residents' rights, are recovery-oriented, and conducive to optimum health and well-being.

Expand the Role of Peers for Individuals and Families – We support increased training to help peers access the education and training needed for certification and the expansion of employment opportunities for recovery coaches, peer advocates and family support navigators in all phases of the addiction to recovery continuum of care including: crisis centers, detox units, inpatient rehabilitation, outpatient treatment, and community residences, as well as in supportive housing and at other recovery support service access points. Peers must be integrated at key points of contact in communities throughout the state.

Establishment of Recovery High Schools and Recovery Collegiate Programs – We support the creation of secondary schools and collegiate programs designed specifically for students in recovery from addiction. Each school would educate students in recovery from addiction and co-occurring disorders, meet Department of Education standards for awarding secondary and higher education diplomas, and support students in developing a strong recovery foundation.

The effectiveness of recovery high schools in minimizing relapse and improving graduation rates is well documented and must be considered as we take a broad approach to combating addiction and preventing relapse in younger populations.

Evaluation, Assessment and Referral after Overdose Reversal - We support the creation of proactive interventions to assist those in crisis after receiving emergency Naloxone to reverse an opiate overdose. In most instances, no treatment intervention occurs (or any referral at all) and there are numerous reports of additional overdoses and in some cases, even death. Mechanisms for evaluation, in depth assessment, treatment referrals and *warm handoffs* to recovery coaches or peer advocates with access to other supports must be offered, implemented and made immediately available to help save lives. We support the implementation and expansion of the current peer engagement initiatives.

Treatment Regulations for People on Buprenorphine - We support enactment of regulations requiring concurrent counseling/treatment with the use of buprenorphine. Evidence-based research supports the critical need for people receiving Medication-Assisted Treatment (MAT) to have corresponding therapeutic support. A simple recommendation for addiction treatment as an adjunct to buprenorphine has proven insufficient therefore regulations must be adopted.

Improve Outcomes for Those in Treatment and Recovery with Current or Former Criminal Justice Involvement - We support the removal of barriers that make it difficult for individuals with criminal records to access treatment, sustain recovery and have the same access to housing, employment, healthcare, and education as other New Yorkers.

Asset Forfeiture Funds - We recommend that all asset forfeiture funds in the Chemical Dependence Service Fund (Section 97-W/State Finance Law) be allocated to OASAS and invested in the expansion of prevention, treatment, and recovery services. These funds should be dedicated for their intended purposes as described.

Opioid Addiction Treatment and Recovery Fee – We recommend a one cent fee on each milligram of an active opioid ingredient in pain medication. Money from this “permanent funding stream” would be used to provide and expand access to addiction treatment and recovery support services.

Closing Comment: The following quote comes from the testimony of a family member, in recovery, at the “Recovery Talks- Community Listening Forum” hosted by FOR-NY and our local RCO- Recovery Advocacy in Saratoga (RAIS) in Saratoga Springs, NY:

“Finally, recovery is made up of many miracles, but finding a place for help should not have to be one of them.”



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Mission and Vision

WHO? “Friends of Recovery - NY is comprised of NYS residents who are in long-term recovery from addiction, their families, friends and allies. We represent all sectors of the community, all regions of the state, and the numerous and diverse paths to recovery. We actively organize and mobilize the recovery community so as to speak effectively with one voice.”

WHAT? “Our mission is to demonstrate the power and proof of recovery from addictions and its value to individuals, families and communities throughout NYS and the nation. We actively seek to advance public policies and practices that promote and support recovery.”

WHY? “We envision a world in which recovery from addiction is both a commonplace and a celebrated reality, a world in which the entire spectrum of effective prevention, treatment and recovery support services are available and accessible to all who might benefit from them.

FOR-NY Believes:

- Recovery is possible for everyone
- Everyone achieves recovery in his or her own way
- Adequate resources and support are necessary for sustained recovery
- Recovery is about reclaiming a meaningful life and role in society

FOR-NY Stands For:

- Addressing addiction as a public health issue
- Responding to illicit drug use as a health issue rather than a crime
- Eliminating barriers to getting help
- Developing non-punitive, non-judgmental recovery service models
- Creating a system that engages and supports people to reclaim a meaningful life
- Including recovering individuals and our families at all levels of budget and policy development in the system