



Recovery Housing Program Models

Recovery Housing Webinar Series

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- Q&A
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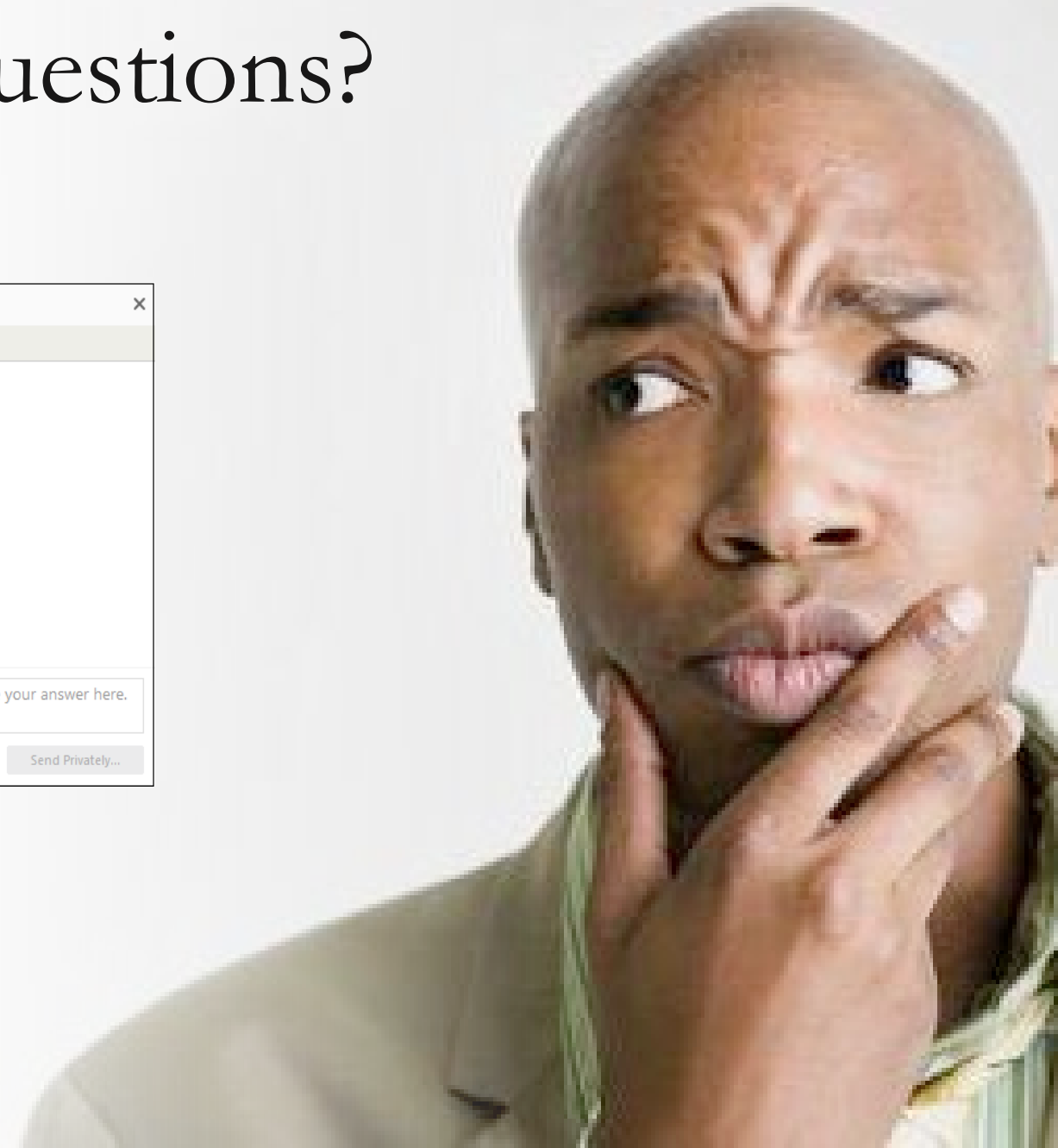
Q&A

All (0)

Select a question and then type your answer here.
There's a 256-character limit.

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Webex Instructions

PowerPoint and webinar recording will be available on the HUD Exchange



Participants in 'listen only' mode



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Agenda

- Welcome and Introductions
- Learning Objectives
- SUPPORT Act and CDBG Recovery Housing Program Background
- Panelist Presentations
- Panel Discussion
- Q&A
- Closing Thoughts

Session Overview and Introductions



**David Awadalla, BSHP,
MSW**
ICF
Senior Research
Scientist, Opioids



Rachel Post, LCSW
Technical Assistance
Collaborative
Senior Associate



David Sheridan
National Alliance for
Recovery Residences
Executive Director



Mercedes Elizalde
Central City Concern
Public Policy Director

Session Learning Objectives

As a result of this webinar, participants will be able to:

- Identify the components or levels of recovery housing programs
- Describe the outcomes generated by recovery housing

SUPPORT Act Overview

SUPPORT for Patients and Communities Act, October 24, 2018

- In response to the opioid epidemic
- Section 8071 authorized the program to aid grantees with providing stable, temporary housing for up to 2 years to individuals in recovery from a substance use disorder
- Eligible States and the District of Columbia have age-adjusted rates of drug overdose deaths above the national overdose mortality rate
- Based on Community Development Block Grant program under title 1 of Housing and Community Development Act of 1974

CDBG-Recovery Housing Program Funding

- FY 2020 Budget appropriated \$25 million to program authorized by the SUPPORT Act
- Funds awarded by formula to 25 eligible grantees: 24 States and the District of Columbia
- The formula includes unemployment rates (15%), labor force nonparticipation (15%), and the age-adjusted rates of drug overdose deaths (70%)



NARR

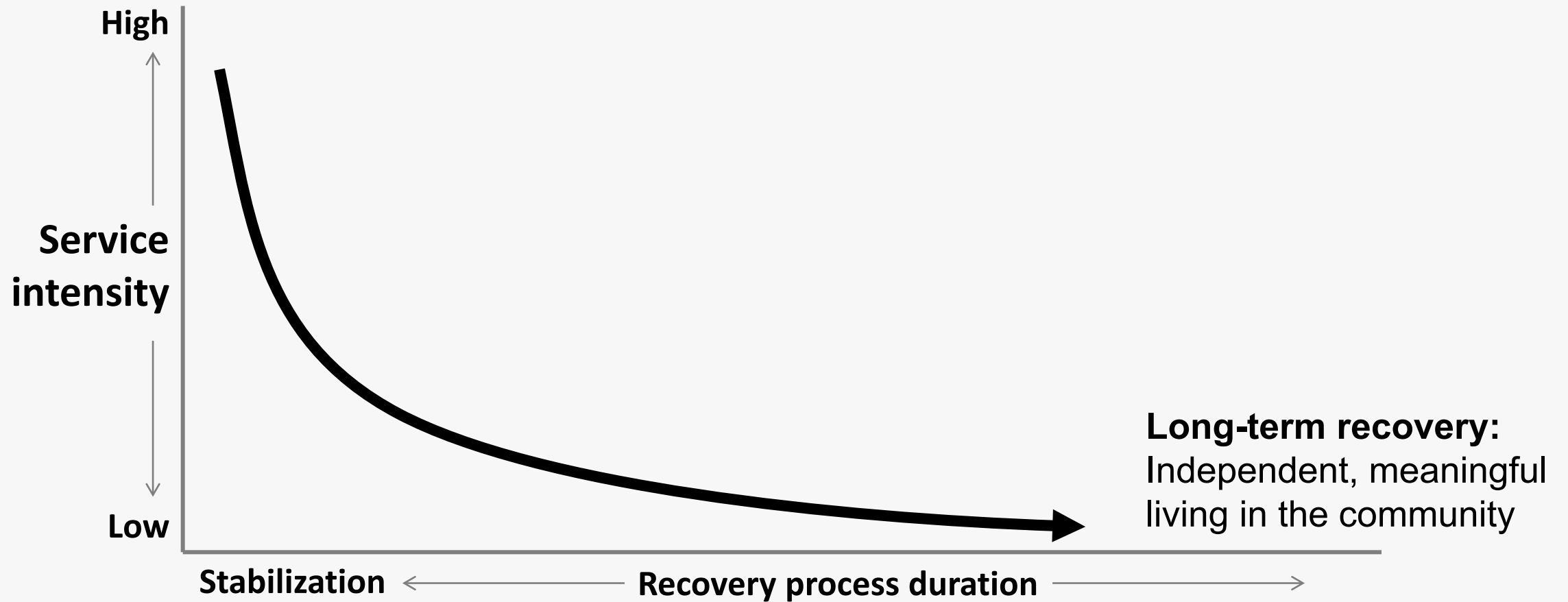
**National Alliance for
Recovery Residences**

Community • Standards • Ethics • Education

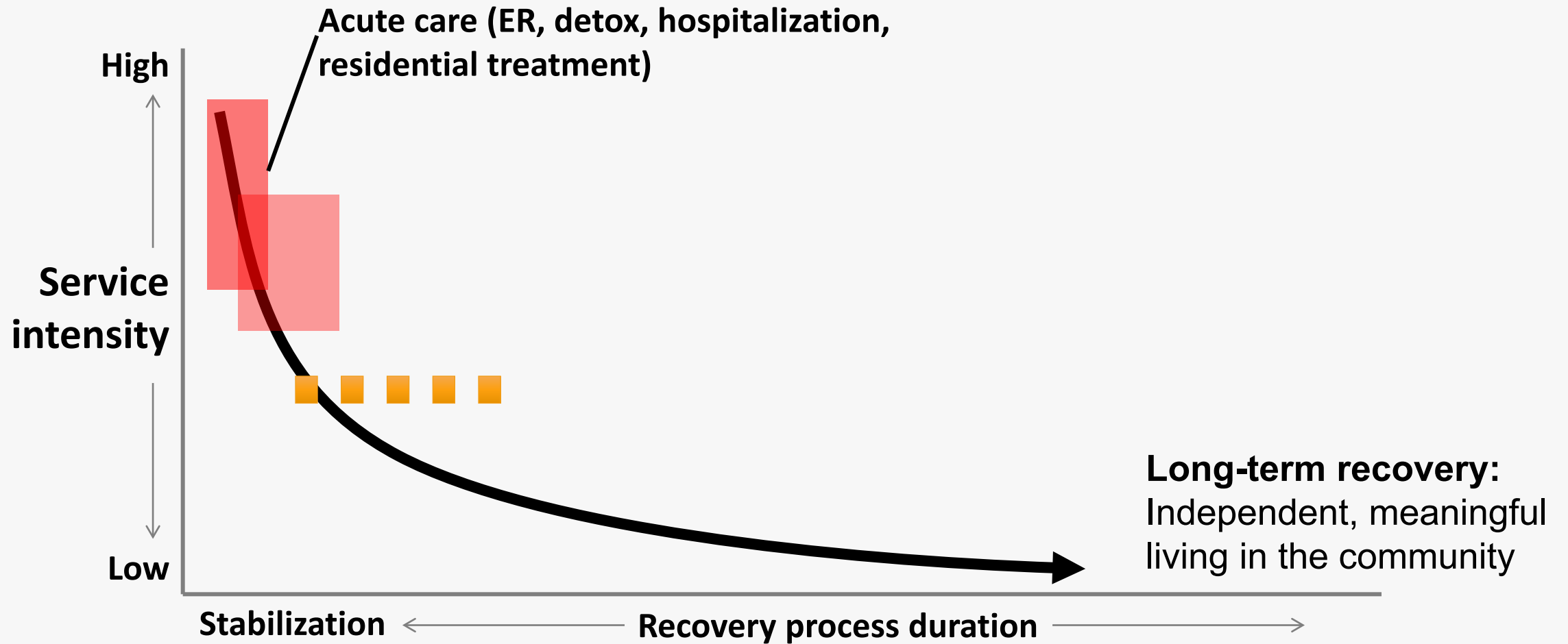
What is Recovery



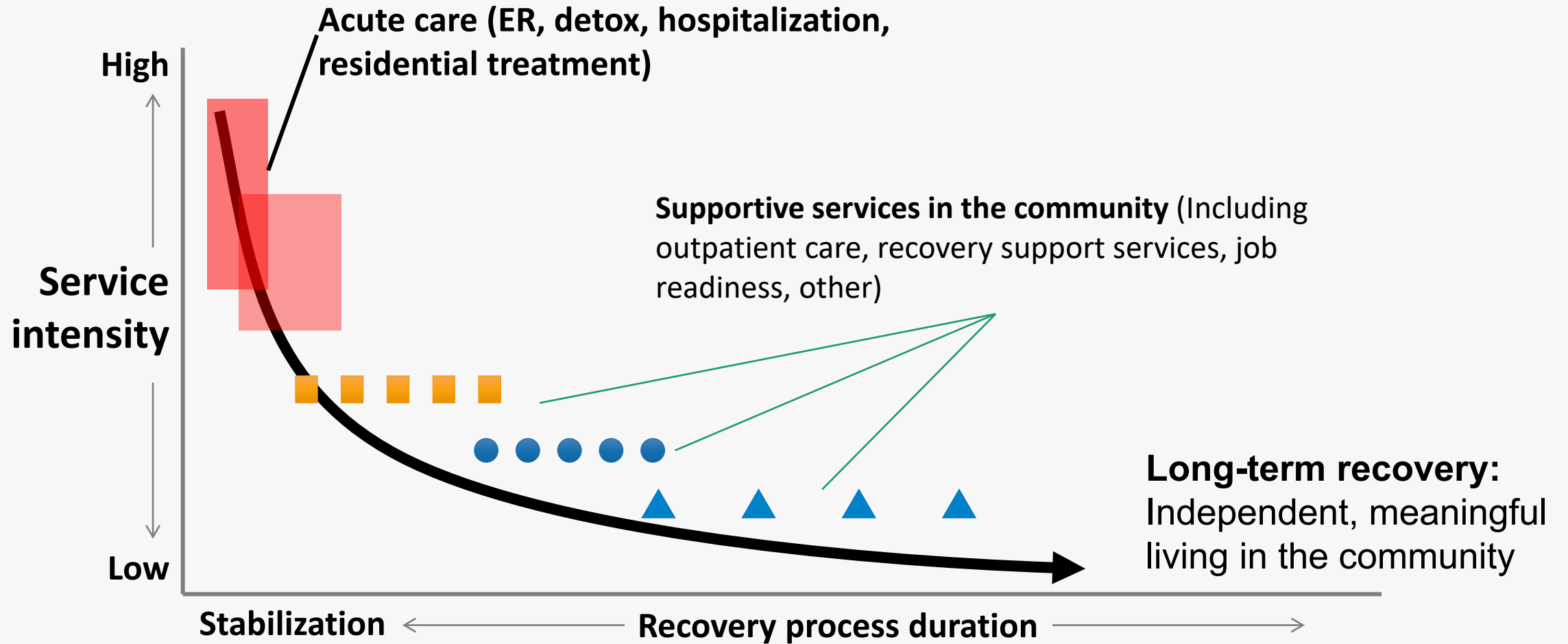
How Recovery Happens



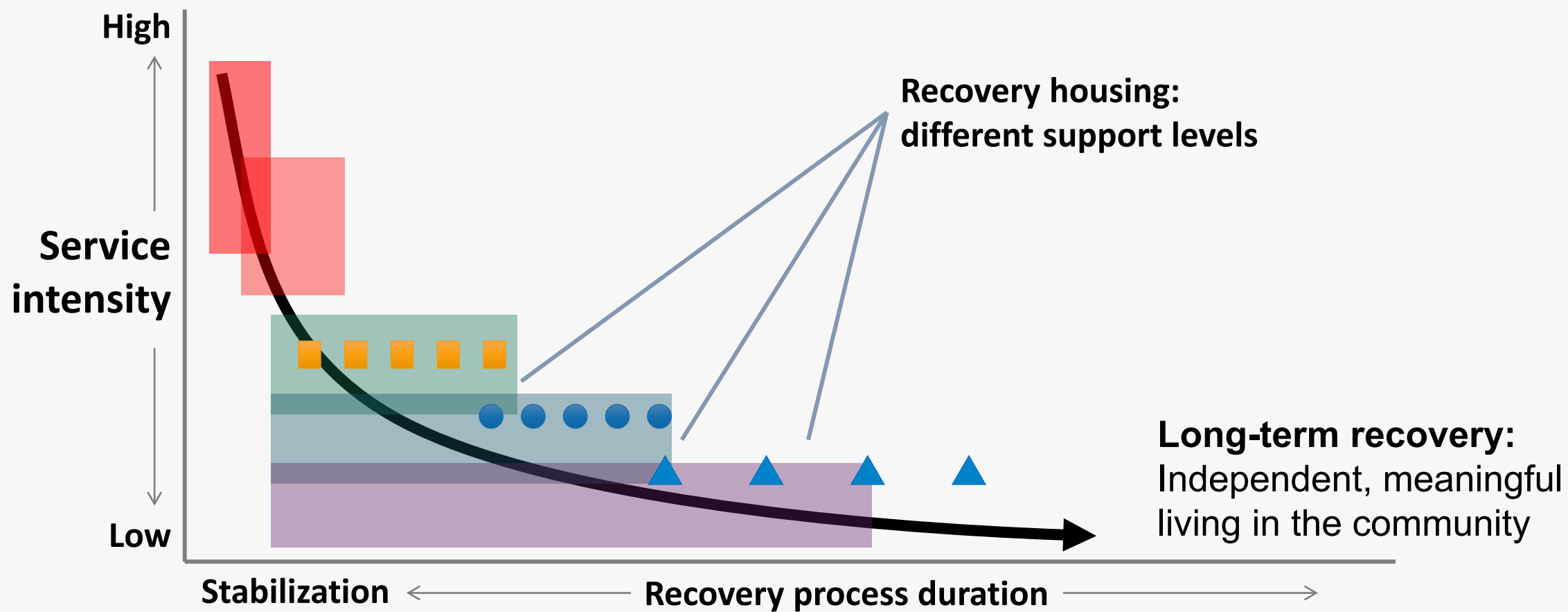
How Recovery Happens



How Recovery Happens



How Recovery Happens



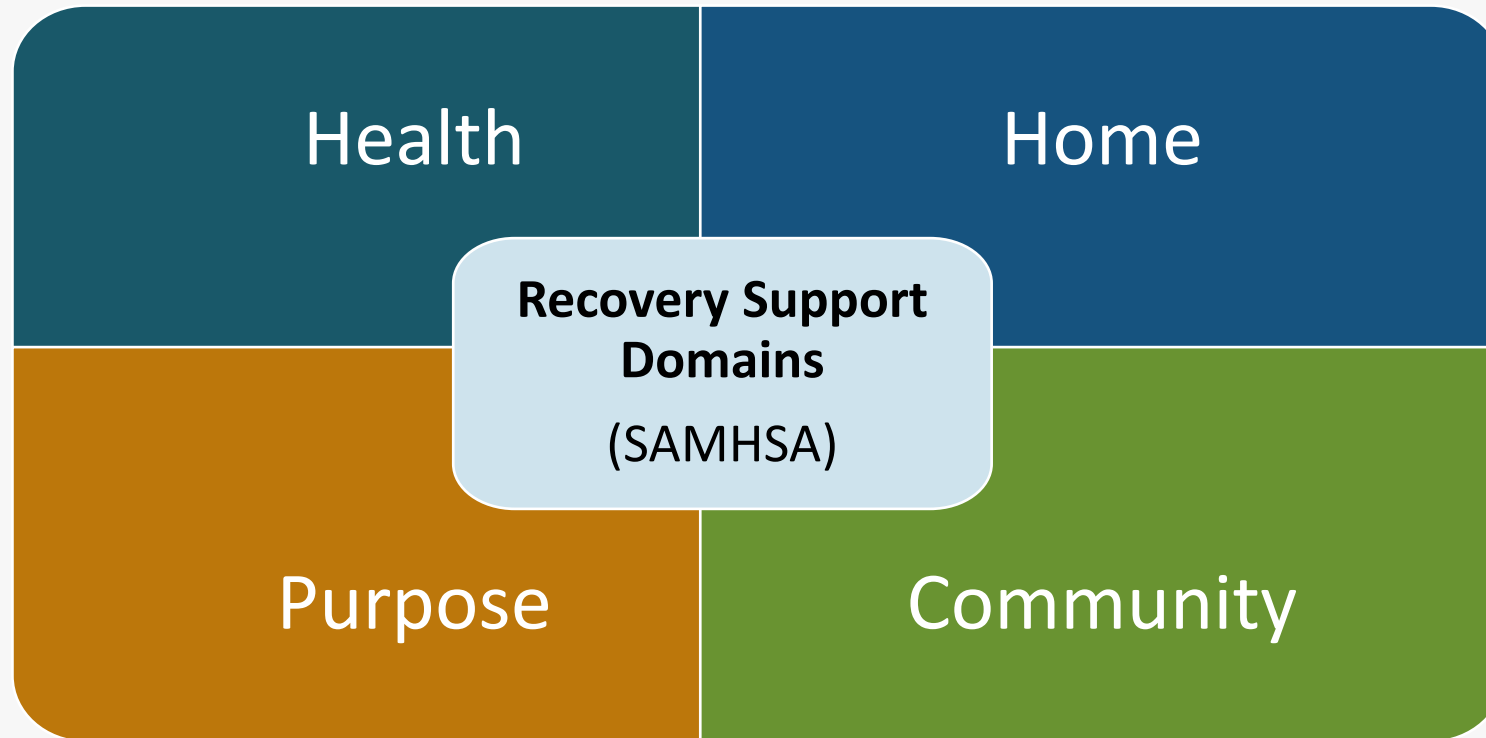
SAMHSA Definition of Recovery



Recovery is:

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

Covers Many Aspects of Human Experience



**What is
Recovery Housing**



Not Everyone with SUD has the Same Housing Requirements

Depends on the individual's needs, capabilities and goals.

Options include:

- Low-cost rental housing
- “Housing first” supportive housing
- Assisted living
- Recovery housing



Shared housing

Individuals with substance use disorders

Abstinence-based

Peer recovery support

Operates as a family-like community



Different property footprints:

Single-family detached dwellings, duplexes...

Apartment buildings or blocks of units

Converted from other types of housing

Special-purpose

Recovery Housing is an Evidence-based Practice (SAMHSA)



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EBP

About

Emerging Practices

Recovery Housing: Best Practices and Suggested Guidelines

This report identifies ten specific areas, or guiding principles, that will assist states and federal policy makers in defining and understanding what comprises safe, effective, and legal recovery housing. National organizations have contributed significant and valuable work in developing policies, practices, and guidance to improve recovery housing as an integral model of care. The guiding principles in this document are meant to provide an overarching framework that builds upon and extends the foundational policy and practice work that had guided the development of recovery housing to date. SAMHSA recommends following these Ten Guiding Principles to guide recovery house operators, stakeholders and states in enacting laws designed to provide the greatest level of resident care and safety possible.

EBP Resource Link

[Recovery Housing: Best Practices and Suggested Guidelines](#)

RECOVERY HOUSING: BEST PRACTICES AND SUGGESTED GUIDELINES

On October 24, 2018 the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment (SUPPORT) for Patients and Communities was signed into law by President Trump. Subtitle D, Ensuring Access to Quality Sober Living (SEC. 7031), of this law mandates that the Secretary of Health and Human Services, in consultation with other specified individual stakeholders and entities, shall identify or facilitate the development of best practices for operating recovery housing. These best practices may include model laws for the implementation of suggested minimum standards that:

- (1) consider how recovery housing is able to support recovery and prevent relapse, recidivism, and overdose, including by improving access to medication assisted treatment
- (2) identify or facilitate the development of common indicators that could be used to pinpoint potentially fraudulent recovery housing operators

The SUPPORT legislation seeks to improve resident care for individuals suffering from a substance use disorder who are in need of supportive recovery-oriented transitional housing. The Administration has dedicated time, attention, and resources to ensuring that individuals with substance use disorders have access to lifesaving medications,

Who lives in recovery housing?

- Individual suffering from a substance use disorder
- With or without other co-occurring disorders and disabilities
- Needs a supportive community environment
- Able to undertake activities of daily living (bathing, eating, dressing, etc.)
- Desirous of a recovery path free of alcohol and other mood-altering substances
- Willing to engage in a personally-directed program of recovery

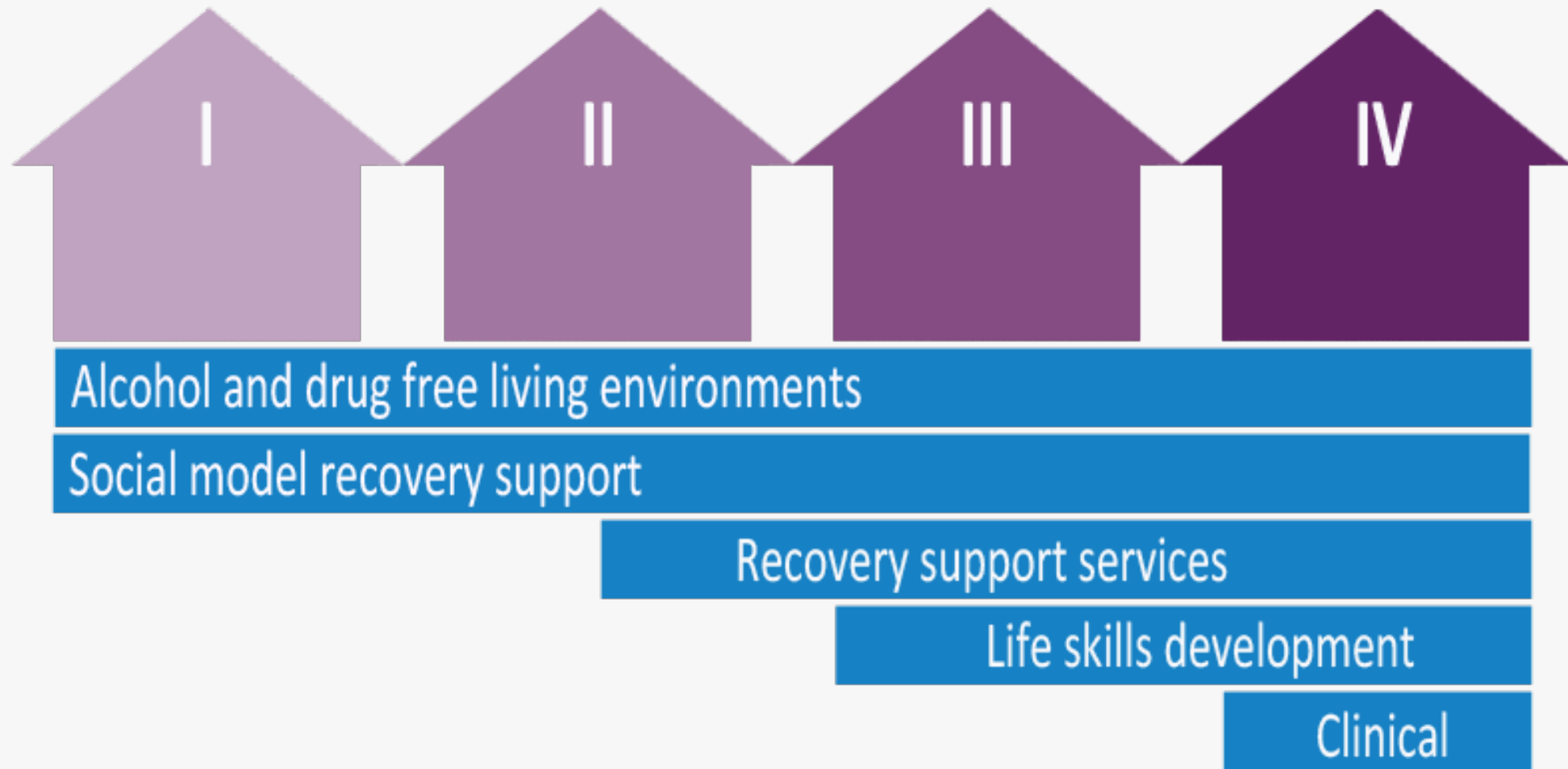
Abstinence elements

- Resident does not consume alcohol, illicit drugs, or medications taken without prescription
- FDA-approved medications for treatment of SUD, taken as prescribed, are consistent with abstinence
- Abstinence verification typically through toxicology screening
- Consequences for return to use can vary, and can include referral to a more appropriate recovery support or treatment environment



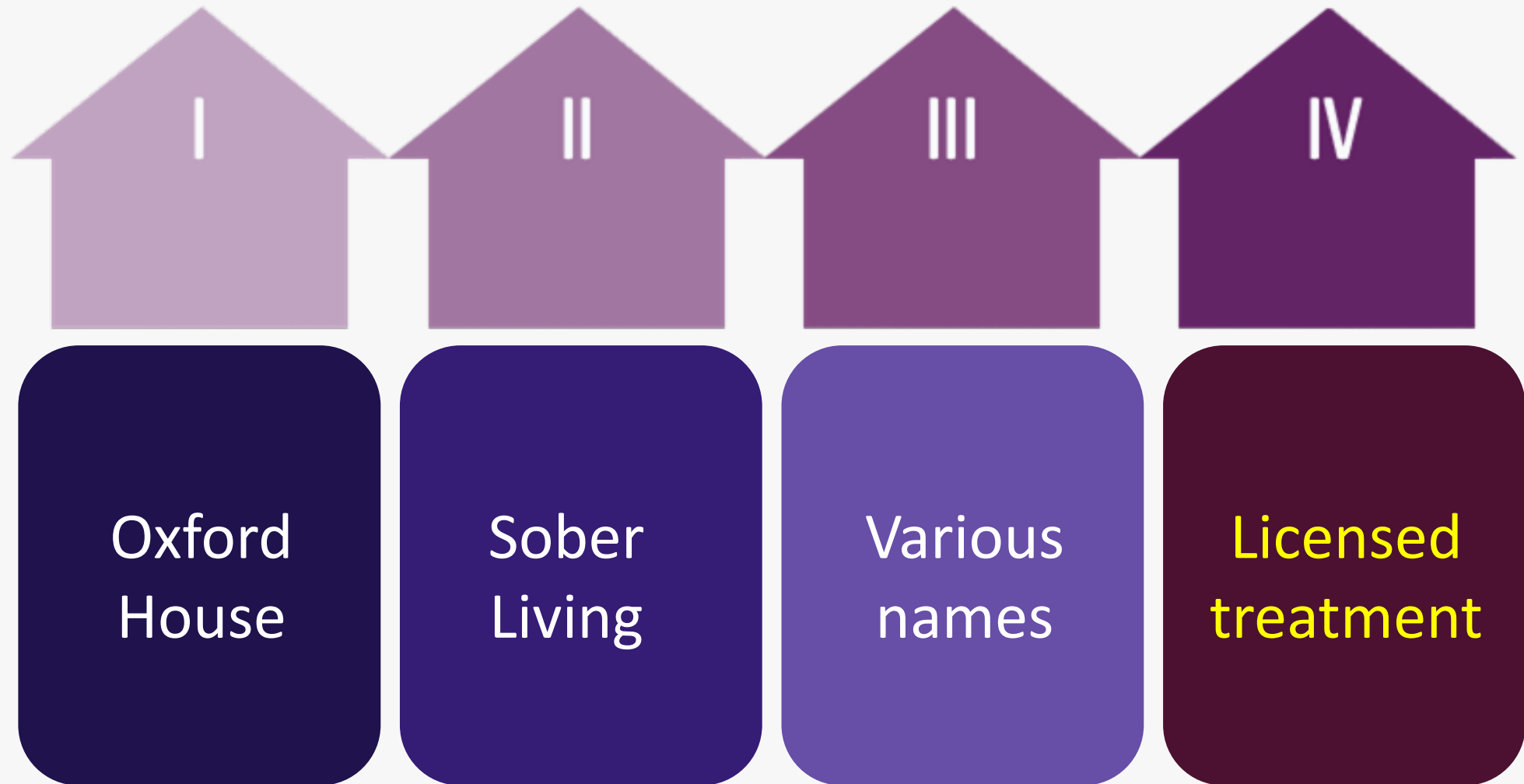
SPECTRUM: LEVELS of SUPPORT

Levels of Support

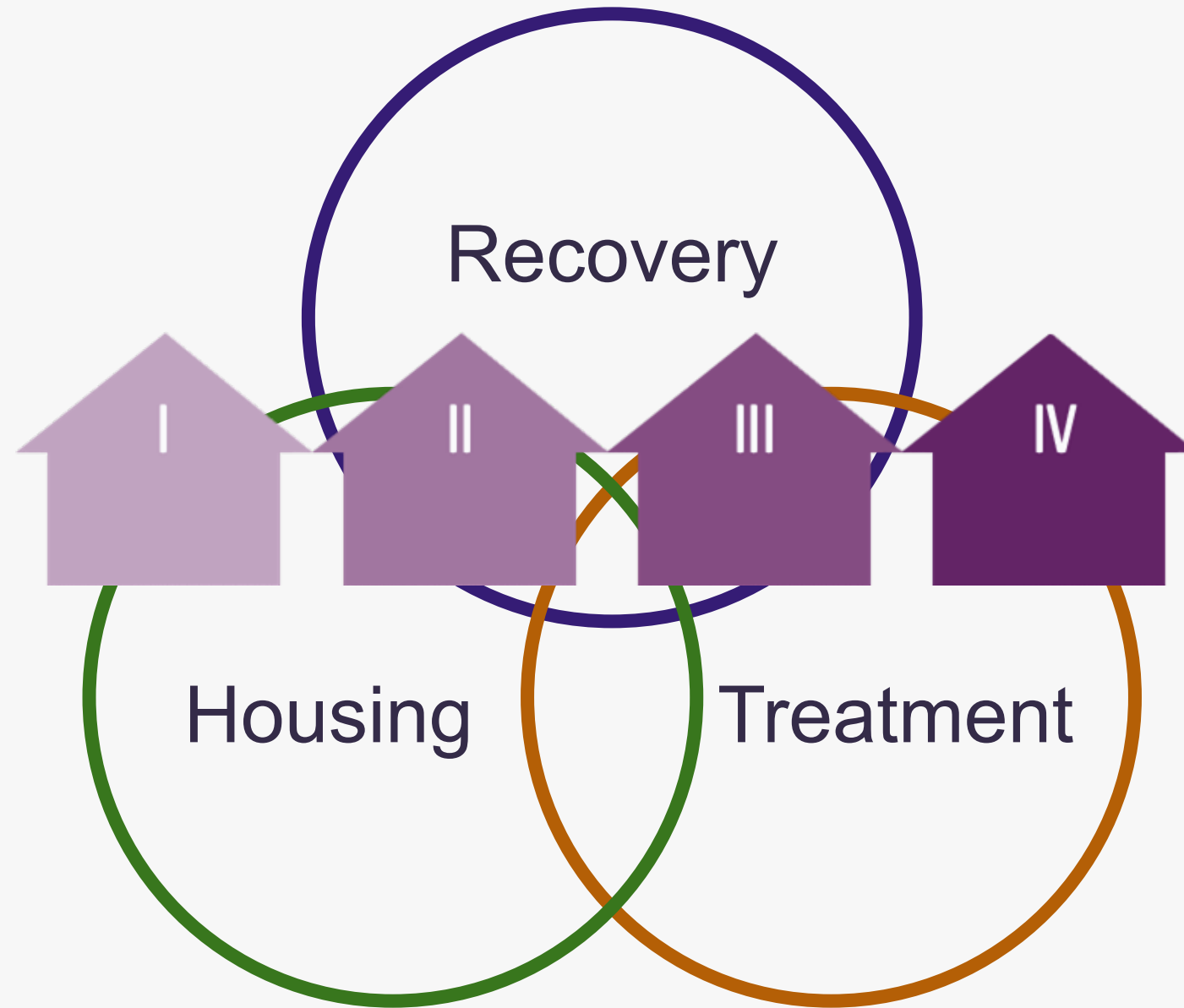


Developed by NARR
Adopted by SAMHSA

Levels of Support



Recovery Residences



How is 'Housing First' Different?

	Housing First (Harm Reduction)	Recovery Residence
Footprint	Mostly special-purpose, single unit; some scattered site shared housing	Single-family residences, multi-unit; also mixed use and special-purpose construction
Services	Available, optional depending on resident preferences	Social model support; community-based and in-home services depending on level; mix of required and resident-driven
Qualifying disability	Any or none	Must suffer from SUD

How is 'Housing First' Different?

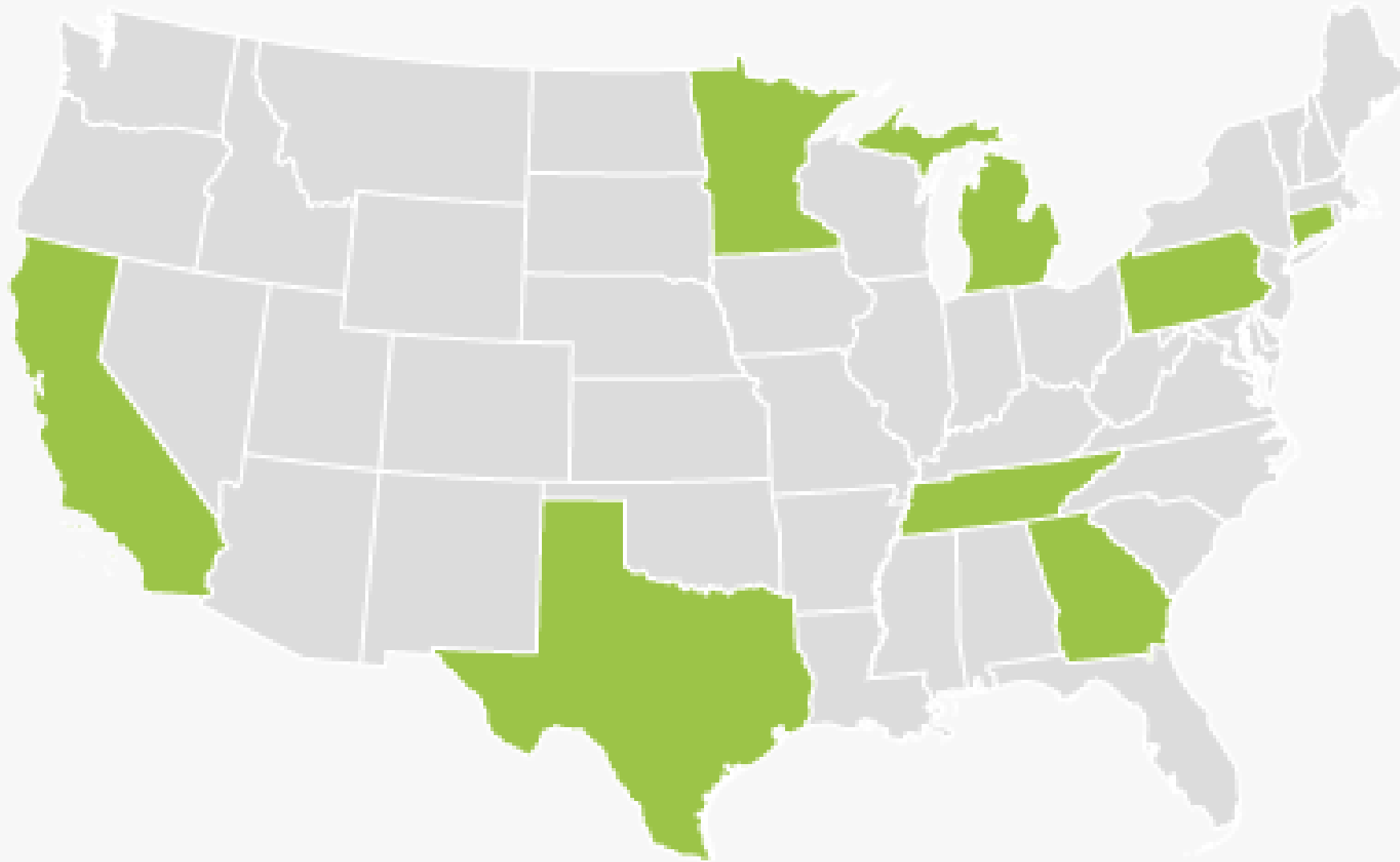
	Housing First (Harm Reduction)	Recovery Residence
Behavioral rules	Eviction if damage to unit or property, threats or violence, excessive nuisance	Shared maintenance of home, recovery engagement,
Abstinence	No drugs in unit, otherwise not regulated	Yes, consequences of return to use vary
Medications	May be managed, but usually up to resident	Permitted meds vary, medications taken as prescribed are consistent with abstinence

How is 'Housing First' Different?

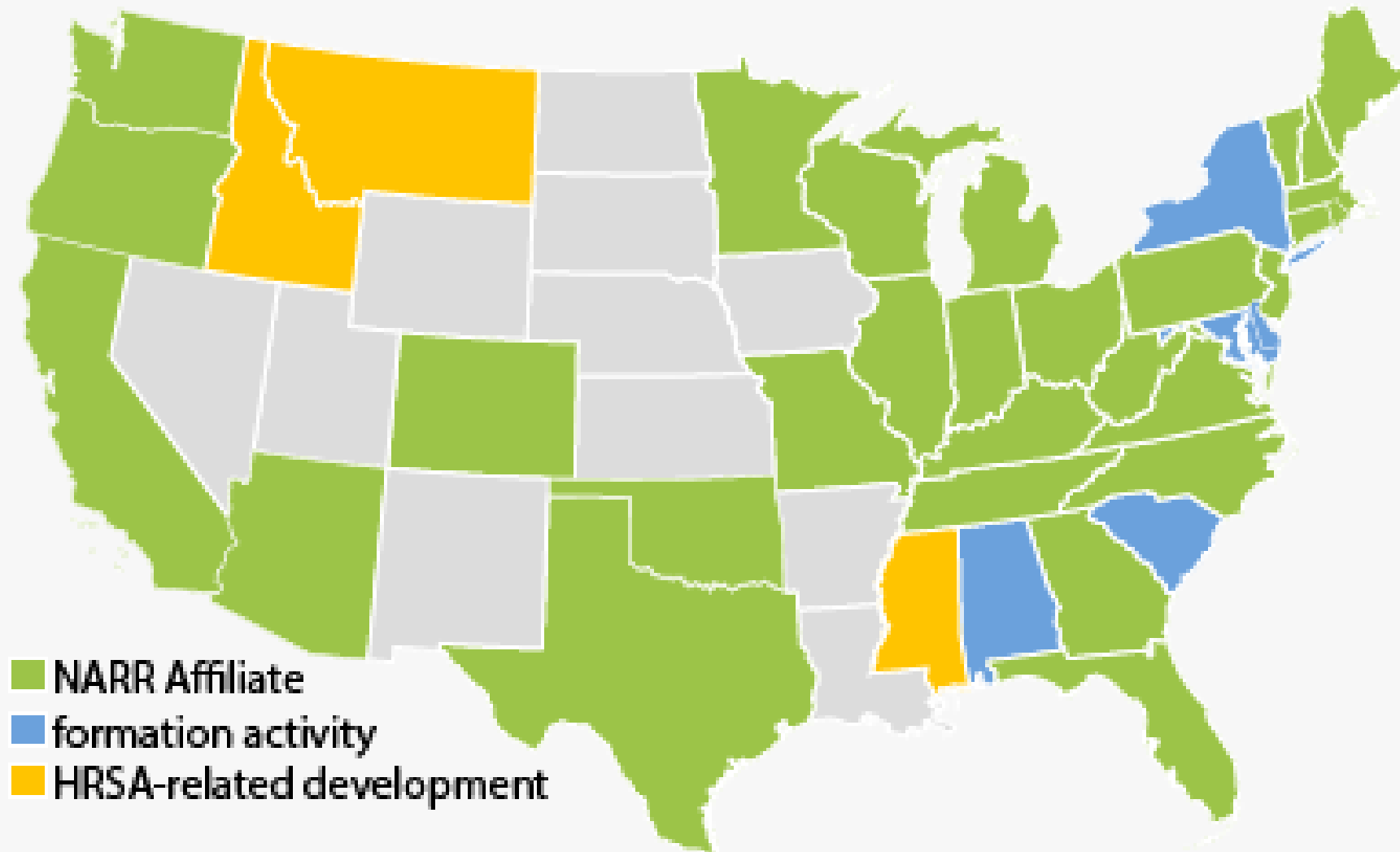
	Housing First (Harm Reduction)	Recovery Residence
Costs	Usually third party payment	Most is self-pay, but third party payments increasing
Length of stay	Varies, resident-driven	Varies, resident-driven except in higher levels
Priority Population(s)	Homeless, physical disabilities, moderate to severe MH disabilities; ADL	SUD, desiring to engage in recovery; other co-occurring conditions; ADL

NARR at a Glance

- Founded in 2011 by leading regional recovery housing experts, organizations; based on decades of best practices developed nationally
- ***National Standard and Code of Ethics***
- Covers the full spectrum of recovery housing
- ***Residence certification program***
- ***Network of state affiliate organizations***
- ***Operating model for statewide recovery housing support systems***
- Training, technical assistance to providers, staffs, state agencies
- Capacity assessments and resource mapping
- Policy development



NARR Today



Standards

Administration

Physical Environment

Recovery Support

Good Neighbor

- 31 standard elements, divided into four major domains
- Roughly 100 individual indicators
- Download from the NARR site: ***narronline.org***

Residence Assessment, Certification

- Annual process
- Formal application
- Review of residence documents
- Structured interviews with operator, staff
- Physical site assessment
- Technical assistance usually available to providers

Recovery Housing Policy Guide



- A joint effort between National Council and NARR with input from other stakeholders, including Oxford House
- Provides state policymakers and advocates strategies, tools, and policy language that support the infrastructure of recovery housing, quality operating standards, and protections for people in recovery
- Highlights three main sections:
 1. Protecting Recovery Housing
 2. Supporting Recovery Housing in Practice
 3. Sample Legislative Language

Learn more: NARR Conference and Events

Tenth Anniversary Best Practices Conference

The only national conference devoted solely to recovery housing

October 24-26, 2021, Omni Hotel, Richmond VA

Details soon at *narronline.org*

Monthly Open Call (variety of stakeholders)

Recovery housing news, events, discussion; all are welcome

First Friday each month, 11:00 – noon EST

Registration for the series on the NARR website

Monthly Best Practices Learning Community

Best practices for residence operation, discussion; all are welcome

Second Wednesday each month, 3:30 – 5:00 PM EST

Registration for the series on the NARR website

Contact NARR



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Recovery Residences

Board Member, Chandler Lodge Foundation

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Narronline.org



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CONCERN

HOMES HEALTH JOBS

COMPREHENSIVE SOLUTIONS



Supportive,
Affordable
Housing



Integrated
Health Care



Income &
Employment



Positive Peer
Relationships



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HEALTH AND HOUSING COLLABORATIVE

- \$21.5 million investment from seven health organizations
- Investment leverages \$68M from other sources including LIHTC, NMTC, City, County, Metro and Foundation / Philanthropic
- Three new buildings that will add nearly 380 units of affordable housing to the Portland area
- Includes a new health clinic in East Portland

2018-2019



Interstate Apartments
51 units



Stark Street Apartments
153 units



Eastside Health Center
175 units



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HOUSING CHOICE: DIFFERENT HOUSING FOR DIFFERENT NEEDS

- More than 2,004 units total
 - 1,199 units recovery housing
 - 805 units Housing First/low-barrier housing
 - 300 scattered site Permanent Supportive Housing units



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CHOICE: RECOVERY HOUSING



Point of entrance: Self initiated Detox or Residential

Primary substance use disorder with frequent co-occurring mental health

Housing offered in community (congregate/SRO) supportive of life style change

Peer Mentor/Case Manager ratio: 1-30 and 24/7 front desk

Short-term rent assistance provided

Access to integrated primary and behavioral healthcare, outpatient treatment and MAT if desired

Evidence Based Practice Supported Employment

Recovery community supports and fellowship

Support in securing permanent and often felony-friendly housing



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TRANSITIONAL RECOVERY COMMUNITY HOUSING

645 residents served in 289 short term units in 2020

- 85% exited to Permanent Housing or other Stable Housing
- 67.5% were placed directly into permanent housing
- 93% still housed and in recovery 12 months post exit
- 37% exit with employment
- 12% exit with other income
- 8.1% returned to homelessness

Malcolm was a journalist and author before his life was diverted by addiction. Thanks to transitional recovery housing and a culturally responsive addiction treatment program, Malcolm secured employment as a Policy Advisor at the Oregon Food Bank.



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PARTNERSHIPS AND FUNDING

The following partners and sources of funding contribute to this comprehensive housing and services package:

- HUD Continuum of Care Grant
- Medicaid
- County General Funds
- SAMHSA CSAT Block Grant
- Health Resources Service Administration Health Care for Homeless grant
- Workforce Investment and Opportunity Act funding
- USDA Food Stamp Employment and Training 50/50 program
- Low Income Housing Tax Credits and New Market Tax Credits
- Hospital Community Benefits
- Philanthropic funding



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TRANSITIONAL RECOVERY COMMUNITY HOUSING

A survey of one of the Recovery Housing Building tenants in 2017 found the following:

- 70% of respondents said that in the last 5 years “My addiction has got in the way” of keeping my housing
- In the last 5 years 65% have spent time living outside
- 38% were chronically homeless prior to move-in
- 27% reported having a problem with alcohol, 20% with heroin, and 31% with multiple substances
- 36% had used a detoxification facility 4 or more times



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COST/BENEFIT

Cost of 6 month-stay in CCC Short-term Recovery Housing
(includes rent, peer mentor, outpatient treatment and supported employment,
supervision and indirect costs)

\$9,894

—COMPARED TO—

Cost of 4 months of residential treatment

\$27,480

Cost of 6 months of criminal activity
(Herinckx, 2008)

\$37,080



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FROM DETOX TO RECOVERY

- Clients who entered Recovery Housing after detox were:
 - 3 times as likely to complete SUD treatment
 - 10 times as likely to engage in primary care at OTC



Since Alycia became involved with CCC's services, she has obtained her Certified Nursing Assistant (CNA) license and earned her Licensed Practical Nursing degree in May 2017.

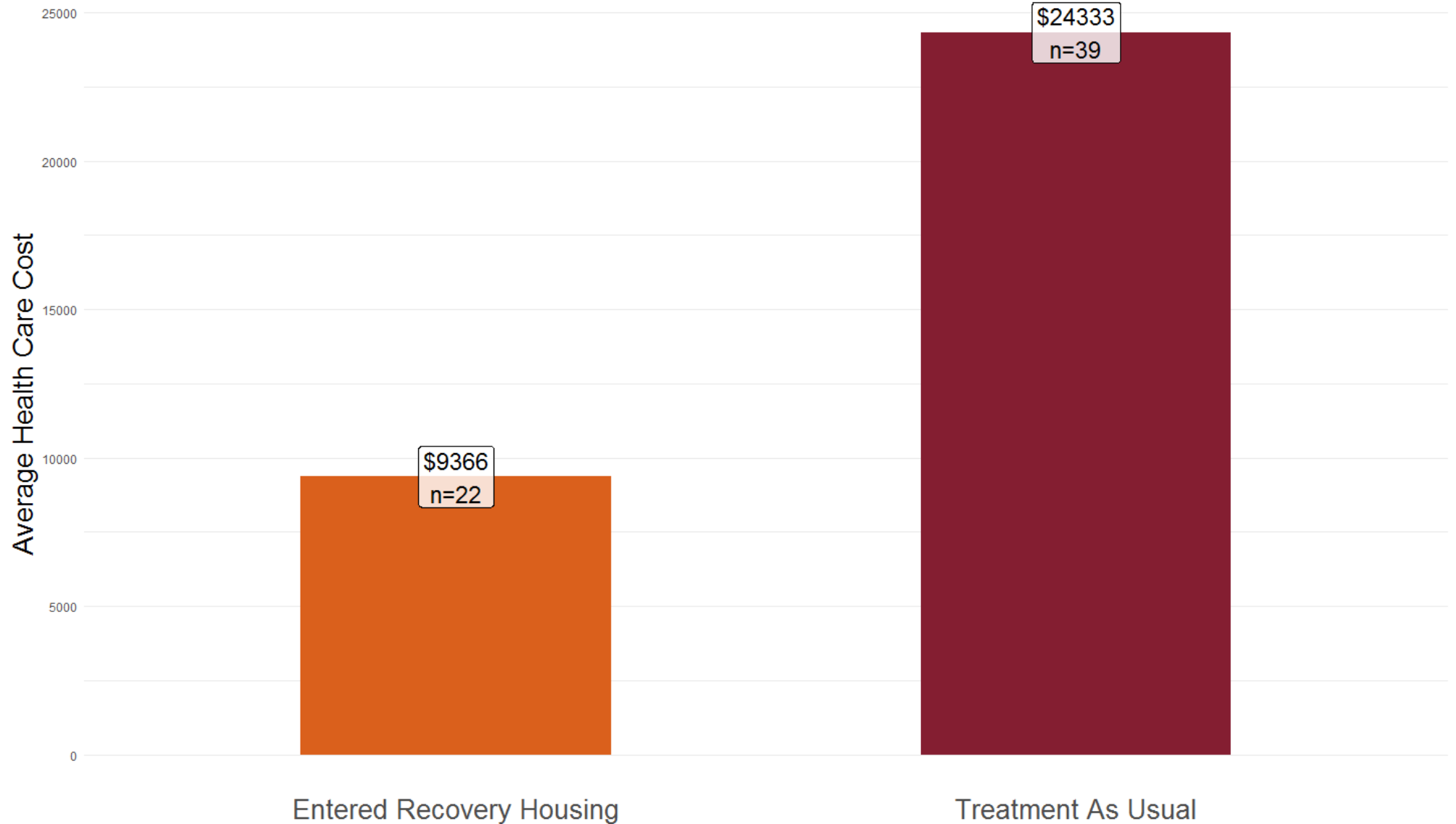


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TOTAL HEALTH CARE COST



Differences are statistically significant, but sample size is small; average cost for 12 calendar months following month of detox admission



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Discussion Questions

- What advice would you offer states as they prepare to deploy these Recovery Housing Program funds?
- How has your organization successfully engaged other systems in the operation or support of recovery housing?
 - Which funders and stakeholders are the most important to partner with?
- Are there any particular challenges or lessons learned that you care to share with our audience?
- How has your organization addressed NIMBYism?



Q & A

Resources

- **SUPPORT [Act](#)**
- **Central City Concern, [Comprehensive Solutions to Ending Homelessness](#)**
- **National Alliance for Recovery Residences (NARR), NARR [Standard](#)**
- **NARR, [Helping Recovery Residences Adapt to Support People with Medication-Assisted Recovery](#)**
- **NARR, [NARR COVID-19 Guidance](#)**
- **National Council for Behavioral Health and NARR, "[Building Recovery: State Policy Guide for Supporting Recovery Housing](#)"**
- **SAMHSA, [Recovery Housing Best Practices and Guidelines](#)**
- **HUD Exchange [Recovery Housing Program \(RHP\) Page](#)**



Thank you for attending!

Visit RHP Page on HUD
Exchange

Thank you for attending!