National Recovery Month

Prevention Works • Treatment is Effective • People Recover

september 2012

JOIN THE VOICES FOR RECOVERY

It's Worth It

Substance Abuse and Mental Health Services Administration

SAMHSA

www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

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DEPARTMENT OF HEALTH & HUMAN SERVICES · USA

DEAR *NATIONAL RECOVERY MONTH* SUPPORTER:

For the 23rd year, the Substance Abuse and Mental Health Services Administration (SAMSHA), within the U.S. Department of Health and Human Services (HHS), is honored to sponsor ***National Recovery Month (Recovery Month)***. This long-standing observance celebrates the effectiveness of treatment and recovery services and the reality of recovery for all individuals experiencing behavioral health issues. To promote ways to use the many behavioral health resources available during ***Recovery Month*** and beyond, SAMHSA has created this toolkit, which helps people recognize signs of mental and/or substance use disorders and assists organizers in planning and promoting ***Recovery Month*** events.

Millions of Americans are affected by mental and/or substance use disorders – regardless of race, age, gender, geography, or socioeconomic level. According to ***2010 National Survey on Drug Use and Health*** data, an estimated 22.1 million persons aged 12 or older were classified with substance dependence or abuse in the past year, and 45.9 million adults aged 18 or older in the United States had a mental illness in the past year.

Since these conditions are widespread, your work during ***Recovery Month*** and year-round positively affects many lives. This year, ***Recovery Month*** continues to promote the critical message that prevention works, treatment is effective, and people recover. Our new theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities.

SAMHSA created this toolkit to educate people that those in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. The toolkit assists in planning ***Recovery Month*** events and provides tools and educational materials to distribute in communities and during local events. It will help SAMHSA continue to inform audiences about the power of recovery.

The toolkit contains three separate sections and a special section showcasing real-life examples of people in recovery:

- **Media Outreach** – This section offers media materials that can easily be downloaded and customized with local information. To review this section, visit ***http://www.recoverymonth.gov***, click on "***Recovery Month*** Kit" and locate the "Media Outreach" section. More information about this section is available in the section, titled "How to Use This Toolkit" and on the ***Recovery Month*** website.
- **Targeted Outreach** – This section will highlight facts and audience-specific information in brief summaries.
- **Resources** – This section lists organizations to partner with for ***Recovery Month*** activities, as well as throughout the year. People in need of assistance also can be referred to these organizations.
- **Join the Voices for Recovery** – This section features stories of members of the community who have achieved recovery from mental and/or substance use disorders. These narratives bring the theme to life in a unique and personal way.

Your commitment to ***Recovery Month*** is essential to raising awareness about the importance of prevention, treatment, and recovery. We achieve our success through the support and participation of individuals, communities, and organizations and couldn't do it without your help. SAMHSA is grateful for your continued hard work and dedication to making a difference in the lives of those affected by mental and/or substance use disorders.

RESOURCES

The following resources provide guidance on raising year-round awareness for ***Recovery Month***. Share these resources with community members so they can be active participants in the treatment and recovery movement and volunteer to help educate and reach others.

- **Mental and Substance Use Disorders: Fast Facts** – A fact sheet that includes a list of the top-line statistics about mental and/or substance use disorders.
- **Develop Your Social Network** – A guide that provides ideas on how to build social media programs from scratch or enhance an existing program.
- **New Media Glossary** – A piece to help you engage the online community and reach this year's target audiences (e.g., military, criminal justice system, families and friends, and people in recovery).
- **Build Community Coalitions** – A document that explains how to form community coalitions or partnerships, including the research process to identify groups and individuals in which to partner.
- **Planning Partners Directory** – A list of organizations that meet regularly throughout the year to plan ***Recovery Month*** celebrations. These groups are potential collaborators or resources as you plan your own activities.
- **Single-State Agency (SSA) Directory** – A list of State offices that provide local information and guidance about mental and/or substance use disorders, prevention, treatment, and recovery in your community.
- **Prevention, Treatment, and Recovery Resources** – An extensive document that features mental and/or substance use disorder prevention, treatment, and recovery resources which cover a wide range of support services.
- **Customer Satisfaction Form** – A feedback form to share successes during ***Recovery Month*** and offer feedback to improve future ***Recovery Month*** materials.

1-800-662-HELP (4357)
1-800-487-4889 (TDD)

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HOW TO USE THIS TOOLKIT AND THE *NATIONAL RECOVERY MONTH* WEBSITE

The ***National Recovery Month (Recovery Month)*** toolkit is a resource for behavioral health information, available online at ***http://www.recoverymonth.gov.*** The ***Recovery Month*** toolkit shares the possibilities of recovery and promotes ways to use the many behavioral health resources available during this annual observance and beyond. Additional sections explain how individuals can harness the strength, hope, and courage to address mental and/or substance use disorders and actively participate in their communities.

This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The three sections of the toolkit – Media Outreach, Targeted Outreach, and Resources – will help individuals and organizations plan events, reach and educate key audiences, and offer resources to people in need of treatment support services.

The following how-to guide briefly summarizes each section and provides tips on making the most of the information found in the ***Recovery Month*** toolkit.

Media Outreach

The Media Outreach section provides instructions to plan and promote ***Recovery Month*** activities and events, as well as templates to customize and send to local and online media outlets. Available online at ***http://www.recoverymonth.gov***, the Media Outreach section features the following sections:

- **Promote *Recovery Month* with Events** – An effective way to spread the message of recovery and engage others through events. This document offers guidance on the event-planning process and provides recommendations and instructions on how to publicize an event and maximize attendance.
- **Work with the Media** – Media coverage is often an important component to the success of a local event. This document provides the basics of media outreach, including how to research outlets, connect with reporters, and participate in an interview.
- **Share Your Voice through Op-eds and Online articles** – Write about ***Recovery Month*** to raise awareness about mental and/or substance use disorders. This section contains tips on how to write an op-ed or online article and submit it for publication.
- **Press Materials for Your *Recovery Month* Event** – Press materials, such as media advisories, press releases, and backgrounders, raise awareness through the media and increase the impact of ***Recovery Month*** events. This document offers assistance on the development and distribution of press materials aimed to support the success of ***Recovery Month*** events.
- **Issue *Recovery Month* Proclamations** – A proclamation is a decree by an elected or appointed official that publicly recognizes an initiative such as ***Recovery Month***. This document offers guidance on how to draft, personalize, and promote a proclamation.
- ***Recovery Month* Public Service Announcements (PSAs)** – PSAs are distributed to television and/or radio stations and are available online, with no purchase of airtime. This section details ideas for how to distribute ***Recovery Month*** PSAs and ways to promote them in communities, as well as local events.

Targeted Outreach

The Targeted Outreach section offers audience-specific information about the benefits of recovery, effectiveness of treatment, and tips to overcome challenges during the recovery process. The toolkit has top-line fact sheets with summarized information that highlights behavioral health trends and data within each target audience. On the ***Recovery Month*** website at ***http://www.recoverymonth.gov***, the Targeted Outreach section features the following sections, categorized by general and audience-specific information:

General Information:

- **Overview: It's Worth It** – This piece summarizes the current landscape of behavioral health issues and recovery in the United States among different audiences, including active military, veterans, and families; people within the justice system; friends and families of people in need; and the recovery community.
- **Common Mental Conditions and Misused Substances** – This document contains key statistics about common mental health conditions and substances that are often misused, alternate names for each disorder or substance, signs and symptoms of a problem, adverse health effects, prevalence, and average age of onset (or age of first-time use of a substance). Organizations can use this information for their own ***Recovery Month*** activities and to educate members year-round.
- **Treatment and Recovery: Why It's Worth It** – This piece highlights the range of treatment options for mental and/or substance use disorders, the importance of addressing co-occurring disorders, and the benefits of recovery.
- **Join the Voices for Recovery** – This document presents a snapshot of individuals who are on the road to recovery after struggling with mental and/or substance use disorders. Some stories highlight people's work in the prevention, treatment or recovery support field, or others who may be affected by mental and/or substance use disorders. This piece can be shared with others to provide strength and inspiration.

Audience-specific Outreach:

- **Address Mental and/or Substance Use Disorders Among Military, Veterans and Their Families** – This document outlines the impact of mental and/or substance use disorders on individuals in the military, as well as the prevention, treatment, and recovery resources available to provide support to these individuals and their families.
- **Recovery Among People in the Justice System** – This piece details the need for recovery support services for people involved in the justice system, identifies challenges that exist, outlines solutions to those challenges, and provides action steps to ensure that recovery is achievable and sustainable.
- **Families and Friends Can Make a Difference** – This document provides tips for how to recognize the signs of a behavioral health condition and encourage a positive change in the life of a family member, friend or peer; it also shares ways to cope with a loved one's condition.
- **Partner with the Recovery Community** – This document details how members of the recovery community can share the benefits of recovery and accept responsibility as leaders and role models.

Resources

SAMHSA provides resources to help plan and prepare for ***Recovery Month*** events, as well as tips to cultivate partnerships with other organizations. For more information visit ***http://www.recoverymonth.gov***.

We want to hear from you. Tell SAMHSA about your achievements and experiences gleaned from this year's ***Recovery Month*** celebration.To fill out the "Customer Satisfaction Form" visit ***http://www.recoverymonth.gov***, click on ***Recovery Month*** Kit and locate the Resources section.

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JOIN THE VOICES FOR RECOVERY

It's Worth It

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September celebrates the effectiveness of treatment services and the reality of recovery. This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover. Resources to help you take part in ***Recovery Month*** are available at ***http://www.recoverymonth.gov***.

The ***Recovery Month*** website is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). The site has useful statistics and tools to support your ***Recovery Month*** efforts, including how to:

- Organize local and virtual ***Recovery Month*** events;
- Use audio, video, and the Web to promote and participate in ***Recovery Month*** efforts;
- Publicize your events on the ***Recovery Month*** website and social networking sites, such as Facebook (http://www.facebook.com/recoverymonth), Twitter (http://www.twitter.com/recoverymonth), and YouTube (http://www.youtube.com/recoverymonth); and
- Access and customize media materials with your logo and details, and order ***Recovery Month*** materials for your own event.

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The 2012 ***National Recovery Month (Recovery Month)*** website offers:

- Outreach tips and tools that offer guidance on how to garner media coverage;
- Adaptable templates and promotional materials to raise awareness for an event with media and the community;
- Recovery-themed e-cards to celebrate recovery, or express gratitude for recovery support;
- A sharable inspirational quote widget that features a new inspirational quote each day;
- Fact sheets with summarized information that highlights behavioral health trends and data;
- Signs, symptoms, and statistics about common mental health problems and commonly misused substances;
- A "Join the Voices for Recovery" section for members of the recovery community to share their story and promote the possibilities of recovery;
- A ***Recovery Month*** planning toolkit;
- Tips on how to organize community and online events and develop community coalitions or partnerships;
- An interactive section to view activities across the country and post information, photos, and videos of your own event;
- Descriptions of National and local treatment opportunities, including locations to receive treatment and referrals for recovery support services;
- Tips and tools to link to the ***Recovery Month*** website and connect with others on the campaign's social networking platforms; and
- Television and radio public service announcements and the *Road to Recovery* television and radio series.

Some of the content on the ***Recovery Month*** website is available in Spanish. You can access it on the homepage, and click on "En Espanol"on the menu bar.

Approximately

66%

of Americans believe that treatment and support can help people with mental illnesses lead normal lives.*

Approximately

75%

of the population believe that recovery is possible from addiction to alcohol, prescription drugs, and marijuana.**

"Today, with more clarity, I understand what happened to me. I continue to learn how to believe more deeply in myself."

LAUREN SPIRO

Director, National Coalition for Mental Health Recovery
Washington, DC

OVERVIEW: IT'S WORTH IT

Mental and/or substance use disorders (also known as behavioral health conditions) affect millions of individuals, as well as their families and friends who are concerned about them. Many opportunities exist to help them reclaim their lives, restore their relationships, and build promising futures. With the right care, support, and commitment, people with behavioral health conditions can improve their health and direct their own recovery path.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

The ***Recovery Month*** campaign aligns with many of SAMHSA's Strategic Initiatives, which guide SAMHSA's work to help people with mental and/or substance use disorders, their communities, and their families. SAMHSA works to help people prevent and overcome costly behavioral health conditions and to promote overall health and well-being for all Americans.

This overview details the spectrum of behavioral health conditions, as well as prevention and recovery across different audiences, including active military, veterans, and families; people within the justice system; families and friends of someone in need; and the recovery community. Additional sections in this toolkit address how all individuals can harness the strength, hope, and courage to overcome their disorders and actively participate in family life and their communities. In addition, the "Join the Voices for Recovery" document shares positive journeys from the perspectives of multiple individuals in recovery.

The Current Mental Health and Substance Use Landscape — And the Promise of Recovery

Mental and/or substance use disorders and recovery from these disorders are prevalent in people of every ethnicity, age, gender, geographic region, and socioeconomic level. Approximately 45.9 million adults aged 18 or older had a mental illness in the past year, and about 11.4 million adults aged 18 or older had a serious mental illness.[1] Additionally, 22.1 million Americans aged 12 or older were classified with substance dependence or abuse (substance use disorders).[2] Of these people, 17.9 million met the criteria for alcohol dependence or abuse.[3]

Mental illnesses include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder, panic disorder, post-traumatic stress disorder, and borderline personality disorder.[4] These illnesses can result in severe functional impairment, substantially interfering with or limiting one or more of a person's major life activities.[5] They can also disrupt relationships with family members, friends, co-workers, and neighbors.

Substance use is another common problem. People with substance use disorders have problems with misuse, dependence on, or addiction to alcohol, tobacco, and/or illicit or prescription drugs. Substance use disorders include both physical and mental symptoms.[6] Similar to many other health conditions, genetics can play a role in the development of a substance use disorder.[7]

The positive news is that millions of Americans are in recovery from mental and/or substance use disorders today.[8] SAMHSA defines recovery from mental and/or substance use disorders as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.[9] SAMHSA supplements this definition with four major dimensions that support a life in recovery:[10]

- **Health:** Overcome or manage one's disease(s) or symptoms – and make informed, healthy choices that support physical and emotional well-being;
- **Home:** Have a stable and safe place to live;
- **Purpose:** Participate in meaningful daily activities, such as a job, school, volunteer opportunities, family caretaking, or creative endeavors, and have the independence, income, and resources to participate in society; and
- **Community:** Enjoy relationships and social networks that provide support, friendship, love, and hope.

People in long-term recovery can gain a sense of pride from helping those in need, and individuals beginning their road to recovery can learn from their experiences. While each person experiences his or her own unique journey, for many people, recovery:[11]

- Emerges from hope;
- Is person-driven;
- Occurs via many pathways;
- Is holistic;
- Is supported by peers and allies;
- Is supported by relationships and social networks;
- Is culturally based and influenced;
- Is supported by addressing trauma;
- Involves individual, family, and community strengths and responsibilities; and
- Is based on respect.

Encourage Recovery by Meeting Individual Needs

This year's ***Recovery Month*** campaign focuses on a range of individuals who pursue a better quality of life, as well as the people who make it possible for them to achieve and sustain recovery. Each group described on the following page faces a unique road to recovery, with different challenges, needs, and support options. Further information on each group can be found in their respective sections in the toolkit.

Active Military, Reservists, Veterans, and Families

Members of the military are often exposed to extremely stressful situations, such as deployment and combat, that can affect mental health and substance use, and they may be hesitant to seek help for fear of damaging their careers.[12] Furthermore, individuals may have a difficult time adjusting back into active service following deployment. Additionally, families of deployed members of the military may face behavioral health challenges. SAMHSA's Military Families Strategic Initiative leads efforts to ensure that behavioral health services are accessible to military families in need.

Individuals and Families in the Criminal Justice System

People in the criminal justice system experience mental and/or substance use disorders at increased rates compared with the general population. In fact, inmates in local jails are 3 to 6 times more likely than the general population to have a serious mental illness,[13] and between 60 percent and 80 percent of individuals in the criminal justice system have a substance use disorder.[14] SAMHSA's Trauma and Justice Strategic Initiative addresses the needs of people within the criminal and juvenile justice systems with mental and/or substance use disorders with histories of trauma, and sets out to reduce its effects.

Families and Friends of People in Need

Close relatives of those in need may need to seek help for themselves and their families to help them cope with their loved one's problem. Various techniques can be used by family and friends to effectively reach someone experiencing a mental and/or substance use disorder and give them the strength, guidance, and confidence to seek help. Friends who are positive influences can be important allies and offer continuous support for individuals working toward their recovery.

The Recovery Community

There is perhaps no stronger advocate for recovery than peers who are already sustaining recovery. Many people who are struggling need someone they can empathize with, trust, and relate to while embarking on their own journey. Social supports can improve recovery outcomes.[15]

Both the "Families and Friends" and "Recovery Community" documents align with SAMHSA's Recovery Support Strategic Initiative, which partners with people in recovery from mental and/or substance use disorders to promote individual, program, and system-level approaches to recovery.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month*** and mental and/or substance use disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (*http://www.samhsa.gov*)** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.

- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (*http://www.samhsa.gov/treatment*)** – Contains information about treatment options and special services located in your area.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Technical assistance centers** – SAMHSA supports technical assistance centers that promote peer-directed approaches for adults with behavioral health conditions. Such programs maximize self-determination and recovery and assist people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
  - National Consumer Supporter Technical Assistance Center at Mental Health America (*http://www.ncstac.org*);
  - National Empowerment Center (*http://www.power2u.org*);
  - National Mental Health Consumers' Self-Help Clearinghouse (*http://www.mhselfhelp.org*);
  - The Family Café (*http://www.familycafe.net*); and
  - The STAR Center (*http://www.consumerstar.org/index.html*).
- **Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS)** – Provides policy and practice analysis, as well as training and technical assistance, to States, providers, and systems to increase the adoption and implementation of recovery supports with behavioral health issues.

For a longer version of this guide, please visit ***http://www.recoverymonth.gov***, locate the "***Recovery Month*** Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as at *http://www.samhsa.gov/treatment*.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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Recovery makes it possible for people to:*

- Feel better emotionally and physically
- Have time to do things they enjoy
- Improve their quality of life
- Experience less stress

"I am living proof that treatment works and recovery is possible. Each day of recovery, I feel victorious with much gratitude."

MARTIN MILLER

Counselor, Adcare Hospital of Worcester
Worcester, MA

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TREATMENT AND RECOVERY: WHY IT'S WORTH IT

Treatment is one of many pathways to achieve recovery from behavioral health conditions, which include mental, substance use, and co-occurring disorders. In 2010, 23.1 million people aged 12 or older needed treatment for an illicit drug or alcohol use problem (9.1 percent of people aged 12 or older). Of these, 2.6 million (1 percent of people aged 12 or older and 11.2 percent of those who needed treatment) received treatment at a specialty facility.[1] Moreover, among 45.9 million Americans aged 18 and older who experienced any mental illness, just 17.9 million received mental health treatment.[2] Recovery support services provide individuals recovering from behavioral health conditions with the guidance and assistance to maintain and sustain their recovery.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), will celebrate the effectiveness of treatment services and the reality of recovery.

This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both emotionally and physically, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

This document highlights treatment and recovery options for people with mental and/or substance use disorders – particularly for adolescents and young adults. It also discusses the importance of addressing co-occurring disorders and the benefits of recovery.

Choose the Most Appropriate Treatment and Recovery Option

Because a wide range of treatment and recovery support options exist, it's important to find what works best for you or your loved ones who need help. Remember that treatment and recovery are ongoing – it's a process that unfolds over time, rather than a time-limited "event."[3] No single treatment option is effective for everyone; generally, each person will need a customized treatment plan that includes goals and treatment activities designed to help achieve and sustain recovery, and plans may need to be assessed continually and modified as necessary during the road to recovery.[4, 5, 6]

Information on common treatment options for mental and/or substance use disorders is presented below.

Treatment and Support Services for Mental Health Problems

Between 70 and 90 percent of individuals with mental health problems have significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and additional support.[7] As with other chronic illnesses, individuals who seek treatment and recovery support services for mental health problems learn new life skills and go on to live healthy, empowered, and productive lives.

Treatment And Recovery

Treatment and support services for mental health problems include:

- **Psychotherapy:** Includes cognitive behavioral therapy, psychoanalysis, family-focused therapy, dialectical behavior therapy, and interpersonal therapy.
- **Medication therapy:** Does not cure mental health conditions, but can help people feel better and maintain normal daily routines. Medication should be taken as prescribed, and under the supervision of a health care professional.[8]
- **Support groups:** Groups led by peers, mental health professionals, or specialty organizations that provide a forum for people to find support and common ground with others experiencing similar conditions.[9]

Treatment and Recovery Support Services for Substance Use Disorders

Half of all adults over age 18 know someone in recovery from an addiction to alcohol, illicit drugs, or prescription drugs.[10] Individuals with an alcohol or drug dependency need to acknowledge their problem; reach out to family, friends, or health care professionals for help; and receive treatment. The following options are available:

- **Inpatient treatment programs:** Hospital-based rehabilitation units, inpatient residential programs, and therapeutic communities.
- **Outpatient treatment programs:** Individual counseling, medication-assisted treatment, family counseling, and group therapy.
- **Recovery support services:** Peer-to-peer support programs, mutual support groups, faith-based support groups, and recovery schools.
- **Online support groups:** E-therapy services, recovery chat rooms/forums, blogs, and social networking sites.

Consider the Benefits of Embracing Recovery

The recovery journey, while unique for every individual, can be defined as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.[11] When suffering from a mental or substance use disorder, a person might feel a loss of control. The first step to recovery is taking back control by making changes to improve one's life. Lifestyle changes during and after treatment to support one's recovery may include ending dysfunctional relationships in lieu of healthier ones, resolving personal problems, eating healthier, and getting enough rest and exercise. By taking control and making a commitment to recovery, it is possible for people to feel better emotionally and physically, have time to do the things they enjoy; experience less stress, and improve their overall quality of life.[12]

Understand Mental and/or Substance Use Disorders Among Adolescents and Young Adults

During transitional periods from one developmental stage to another, such as entering high school or leaving home for college, adolescents and young adults are at a higher risk of developing substance use disorders.[13] Additionally, half of all mental, emotional, and behavioral disorders are diagnosed by age 14 and three-fourths were diagnosed by age 24,[14] which further underscores the critical nature of this time period. Providing adolescents and young adults with treatment designed specifically for their age group significantly reduces substance use and improves psychological outcomes, as well as school performance.[15] Support and encouragement from family and friends can have a profound impact on an individual's recovery.

Below are other important qualities of a comprehensive treatment plan.[16]

- Targeted sessions that address large issues such as trauma, victimization, or depression;
- Mental health services that further assess the condition and include medication management;
- Substance use sessions that approach adolescents at the appropriate level of social and cognitive development;
- Family programming, including parent education, family counseling, and home visits;
- Recovery support services such as transportation, case management, and coordination of care;
- Comprehensive health care, including treatment for sexually transmitted diseases or other conditions such as asthma/respiratory problems; and
- Recreational activity and exposure to activities not involving drugs or alcohol.

Address Co-Occurring Disorders

A co-occurring disorder means an individual has both a substance use disorder and a mental health condition, such as depression, anxiety, or bipolar disorder, for example.[17] About half of individuals with a severe mental disorder are also affected by substance abuse.[18] Both mental and/or substance use disorders are long-term conditions, so treatment for a co-occurring disorder may take place over an extended period of time.[19] By receiving coordinated, combined, or integrated treatment from the same clinician or treatment team, those with co-occurring disorders have a much better chance of long-term recovery.[20]

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month*** and mental, substance use, and co-occurring disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA Website (*http://www.samhsa.gov*)** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour, free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (*http://www.samhsa.gov/treatment*)** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Co-Occurring Disorders" Website (*http://www.samhsa.gov/co-occurring*)** – Contains information on co-occurring disorders, treatment, issues, and facts.

- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Treatment 101: Recovery Today** – Part of SAMHSA's *Road to Recovery* Television and Radio series that examines many aspects of treatment and recovery.
- **Psychology Today's Therapy Directory (*http://therapists.psychologytoday.com/rms*)** – Allows users to locate a therapist, psychologist, or counselor who specializes in mental health problems by city or zip code throughout the United States.
- **Mental Health America (*http://www.mentalhealthamerica.net*)** – Offers resources about the realities of mental health and mental illness.
- **RecoverForever.com (*http://www.recoverforever.com*)** – Offers live online support and contains an abundance of resources on alcohol and drug treatment services that are searchable by State.
- **Alcoholics Anonymous (*http://www.aa.org*)** and **Narcotics Anonymous (*http://www.na.org*)** – Contains an array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to find and join a local chapter.
- **Al-Anon/Alateen Family Groups (*http://www.al-anon.alateen.org*)** – Provides support groups for families and friends of people with alcohol problems.
- **Nar-Anon (*http://www.nar-anon.org*)** – Offers a community for family members to share experiences related to substance use disorders.

For a longer version of this guide, please visit ***http://www.recoverymonth.gov***, locate the "***Recovery Month*** Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as at *http://www.samhsa.gov/treatment*.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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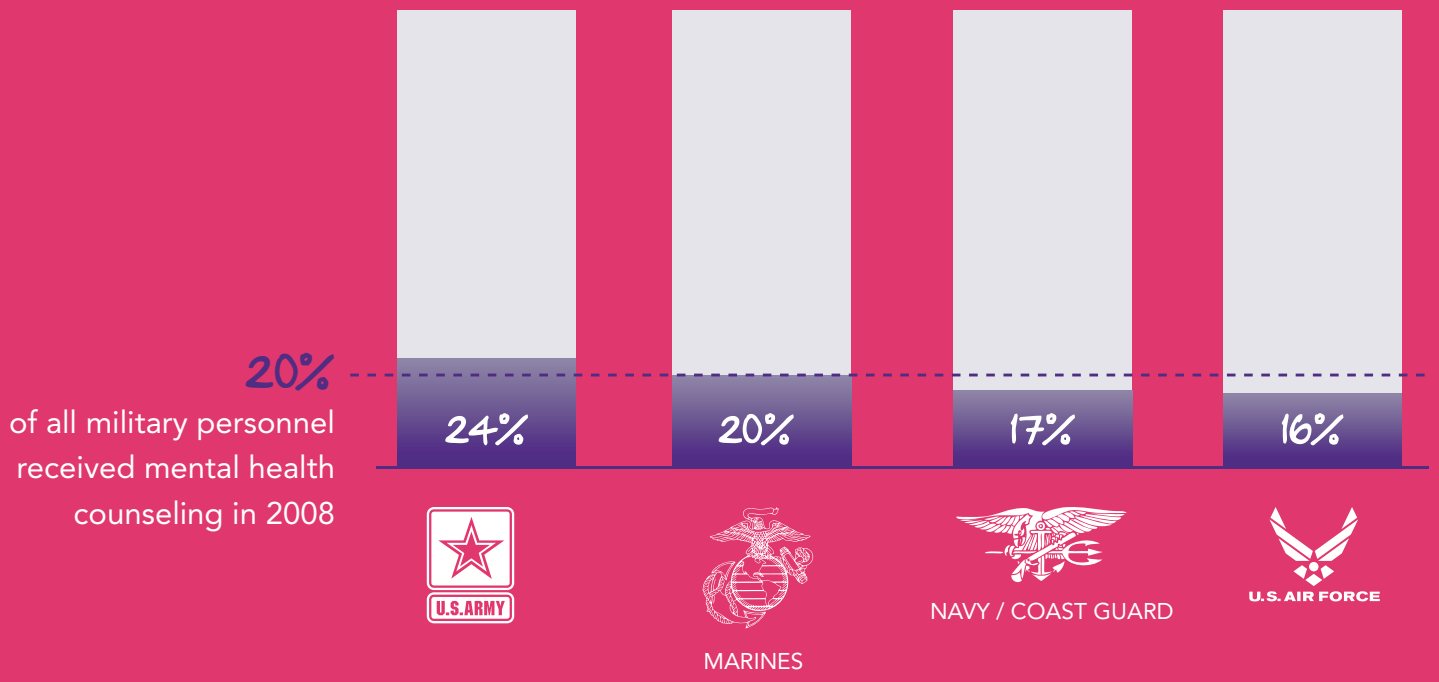
Treatment And Recovery

National Recovery Month

Prevention Works • Treatment is Effective • People Recover

Mental Health Counseling Rates Among Armed Service Branches*



"Changing my whole life was not easy, but the end result was well worth it."

FRANK RYAN

VP of Clinical Services, Loyola Recovery Foundation
Pittsford, NY

National Recovery Month

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september 2012

ADDRESS MENTAL AND/OR SUBSTANCE USE DISORDERS AMONG ACTIVE MILITARY, VETERANS, AND THEIR FAMILIES

Military personnel and veterans willingly risk their lives to protect our society. In the United States, there are more than 22.3 million veterans[1] and more than 2.2 million active military service members (including the National Guard and Reserve).[2] Among the challenges these men and women face is the risk of developing or exacerbating behavioral health conditions, which include mental and/or substance use disorders.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

SAMHSA's efforts to curb behavioral health issues in soldiers, veterans, and their families are guided by its Military Families Strategic Initiative, which aims to ensure access to needed behavioral health services to achieve positive outcomes in this population.[3]

This document outlines the impact of mental and/or substance use disorders on individuals in the military, as well as the prevention, treatment, and recovery resources available to provide support to these individuals and their families. To learn about the recovery journey of a military service member, veteran, or relative, please visit the "Join the Voices for Recovery" document in this toolkit.

Prevalence of Mental and/or Substance use Disorders

Active military, veterans, and military families are all at risk for developing mental and/or substance use disorders. The rate of behavioral health conditions among military personnel is significant, with serious consequences:

- Mental and/or substance use disorders caused more hospitalizations among U.S. troops in 2009 than any other cause.[4]
- More than 1,100 members of the armed forces died by suicide from 2005 to 2009 – an average of 1 suicide by a member of the armed forces occurred every 36 hours during that time.[5]
- Any illicit drug use, including prescription drug abuse, among active-duty personnel more than doubled between 2005 and 2008, from 5 percent to 12 percent.[6]

Military

Individuals, as well as their friends and family, can help to prevent these disorders by recognizing their prevalence and symptoms and learning more about how these disorders can affect members of the military community.

Understanding Mental Health Problems in the Military

While serving our Nation, hundreds of thousands of soldiers face exposure to combat. These traumatic war experiences can have a direct effect on mental health. The most common mental health problems among active duty service members include post-traumatic stress disorder (PTSD) and depression:[7]

- **PTSD** is an anxiety disorder associated with traumatic experiences, and approximately 14 percent of service members returning from Iraq or Afghanistan meet the criteria for PTSD.[8] Symptoms often include reliving the traumatic event, feelings of emotional detachment, difficulty sleeping, and increased anger or irritability.[9]
- **Depression** is a condition that involves feelings of sadness or low mood that last more than just a few days, and is a common problem that can occur following trauma. For veterans, depression can be caused by painful memories and feelings about their war experiences.[10] Symptoms of depression can include feelings of sadness and hopelessness, loss of interest in activities that were once pleasurable, insomnia or excessive sleeping, and thoughts of suicide.[11]

Understanding Substance Use Disorders in the Military

While substance use disorders are not as pervasive as mental health problems among military populations, they are still a major health concern.[12] The following are signs and consequences associated with substance use among people in the military:

- Failure to fulfill major personal and professional obligations;[13]
- Recurrent use of substances in situations in which they are physically hazardous;[14]
- Recurrent alcohol or substance-related legal problems;[15]
- Persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of alcohol or substance use, while this use often continues without stopping;[16]
- Mood and behavior problems;[17]
- Financial difficulties;[18] and
- Hurt social relationships.[19]

The Extended Impact on Families

In the United States, there are approximately 700,000 military spouses, and more than 700,000 children have experienced the deployment of a parent.[20] Military families play an active role in the recovery of a relative's disorder, while at the same time they may also experience difficulties dealing with situations that can arise due to a family member's deployment, injury, or death. Studies show that longer cumulative lengths of combat deployment, or the total number of days overseas, are associated with more emotional difficulties among military children and more mental health diagnoses among U.S. Army wives.[21, 22]

To prevent the onset of these issues, families need to identify the signs of mental and/or substance use disorders among loved ones – and monitor for symptoms even after a parent or spouse returns home.

Address Prejudice to Help Military Members on the Road to Recovery

Social prejudice, or fear of being exploited or judged for mental and/or substance use disorders, can interfere with the desire of individuals with behavioral health conditions to seek treatment and support. For example, in 2008, approximately 12.9 percent of all military personnel believed that if they were to seek mental health counseling through the military, their careers would be damaged.[23] Perceptions about behavioral health problems can change, however, and research shows that the most effective way of countering prejudice and discrimination is by sharing one's personal experiences with others.[24]

Opportunities for Prevention, Treatment, Recovery, and Support

Many States have policies in place to respond to the needs of veterans, and in 31 States, substance use disorder treatment and service providers are required to screen for veterans' mental health status and in 40 States, health care providers screen patients to determine if they need mental health assessments.[25] The Department of Defense (DOD) and U.S. Department of Veterans Affairs (VA) promote the integration of behavioral health and primary care to help reduce prejudice, improve access to high-quality behavioral health services, and provide a proven "best practice" for treating depression and PTSD.[26]

Additionally, the VA has devoted $37.7 million to placing psychiatrists, psychologists, and social workers within primary care clinics[27] and has recruited nearly 3,800 new mental health employees, including 800 psychologists.[28] Despite an influx in mental health care professionals, only 20 percent of all military personnel received mental health counseling in 2008.[29] Army personnel were the branch most likely to have received some sort of mental health counseling (24 percent), compared with personnel in the Marine Corps (20 percent), Navy or Coast Guard (17 percent), and Air Force (16 percent).[30]

With the help of treatment and the support of family and friends, those in the military can and do overcome mental and/or substance use disorders and sustain happy, healthy, and productive lives.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals, including family members, can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA Website (*http://www.samhsa.gov*)** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (*http://www.samhsa.gov/treatment*)** – Contains information about treatment options and special services located in your area.

- **SAMHSA's "Considerations for the Provision of E-Therapy" Report (*http://store.samhsa.gov/shin/content/SMA09-4450/SMA09-4450.pdf*)** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center (*http://www.stopstigma.samhsa.gov*)** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Veterans Crisis Line, 1-800-273-TALK (8255) (*www.veteranscrisisline.net/Default.aspx*)** – Connects veterans in crises and their family and friends with VA responders through a confidential, toll-free helpline and online chat.
- **United States Department of Veterans Affairs – Mental Health (*http://www.mentalhealth.va.gov*)** – Maintains and improves the health and well-being of veterans through health care, social services, education, and research.
- **Army Substance Abuse Program (ASAP) (*http://www.acsap.army.mil*)** – Provides guidance and leadership on alcohol and drug abuse prevention, education, and training programs for soldiers and their commanders.

For a longer version of this guide, please visit ***http://www.recoverymonth.gov***, locate the "***Recovery Month*** Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as at http://www.samhsa.gov/treatment.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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Prison Populations who Experienced Mental Health Problems in 2005*

78,800

45%

of Federal Prison Population

705,6004

56%

of State Prison Population

79,900

64%

of Local Jail Population

"I now enjoy the love, support, and respect of my family and friends."

CHARLES B. THORNTON

Director, The Mayor's Office on Returning Citizen Affairs
Washington, DC

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september 2012

RECOVERY AMONG PEOPLE IN THE JUSTICE SYSTEM

People with mental and/or substance use disorders involved with the justice system face many challenges on their path to recovery, such as misconceptions, shortages of treatment, and difficult transitions. Many people in the justice system, including incarcerated individuals and those recently released from jail or prison, have experienced the effects of behavioral health conditions, which include both mental and/or substance use disorders. In 2005, approximately three-fourths of people in State prisons and local jails with a mental health problem also met the clinical criteria for substance dependence or abuse.[1] Many effective treatments, services, and supports specifically designed for these individuals exist.

A continuum of care supports those in the criminal justice system before, during, and after incarceration. Some effective initiatives include drug and mental health courts, jail diversion programs, counseling interventions, medically assisted treatment, cognitive therapy, correctional therapeutic communities, and community reentry programs that include drug treatment and recovery support. These and other efforts provide support for people and families who need help for mental or substance use disorders.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

Recovery Month supports many of SAMHSA's Strategic Initiatives, which guide SAMHSA's work to help people with mental and/or substance use disorders and their communities and families. SAMHSA works to prevent costly behavioral health conditions and promote overall health and well-being for all Americans. SAMHSA's Trauma and Justice Strategic Initiative is dedicated to reducing the behavioral health impact of trauma. It addresses the needs of people with mental and/or substance use disorders and those with histories of trauma within the criminal and juvenile justice systems.

This document details the need for recovery support services for people and their families involved in the criminal justice system, and provides action steps to facilitate recovery. Refer to the "Join the Voices for Recovery" document in this toolkit to learn about real-life recovery journeys from mental and/or substance use disorders.

Justice System

Behavioral Health Conditions in Criminal Justice Populations

The need for treatment for mental and/or substance use disorders among people involved with the criminal justice system is critical. In 2005, individuals who experienced mental health problems accounted for 56 percent of State prisoners, 45 percent of Federal prisoners, and 64 percent of jail inmates.[2] Substance use diagnoses are even more prevalent: in 2009, between 60 percent and 80 percent of adult males aged 18 to 49 under the supervision of the criminal justice system had a substance use related issue.[3]

Many of those affected are young adults or adolescents, making it important to acknowledge behavioral health conditions early and obtain treatment and support before problems deepen. Evidence shows that youth who had been in jail or a detention center were more likely to have used illicit drugs, alcohol, or cigarettes in the past year than youth who had never been in these facilities.[4]

Fortunately, effective addiction treatment has been shown to decrease an individual's future drug use and drug-related criminal behavior, improve family relationships, and increase prospects for employment.[5]

Recovery is Worth it for People in the Criminal Justice System

SAMHSA defines recovery as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.[6] People in the criminal justice system can take their first steps of recovery by:[7]

- Recognizing that they have a disorder and that it is a treatable problem;
- Asking family members for help beginning a treatment program;
- Asking a court or probation officer about getting help with mental and/or substance use disorders; and
- Asking a lawyer or a court officer about local programs.

There is no "single solution" for how to address mental and/or substance use disorders, but for every individual, every step is worth it. Treatment and recovery support services offered by providers and peers are delivered during different stages for people in the criminal justice system. For example, services can be provided prior to incarceration (e.g., jail diversion and drug courts), in criminal justice facilities (e.g., treatment and recovery services, peer support), and post-release (e.g., transitional, peer support, and community-based services). Examples and benefits of these types of treatment and recovery support services include:

- **SAMHSA's Jail Diversion Program for Adults** – Diverts individuals with mental illness (and often co-occurring substance use disorders) from the criminal justice system to community-based treatment and recovery-related services;[8]
- **Community-based services** – Provide some portions of the jail population the opportunity to live, work, and receive treatment services in the community, often at contracted halfway houses, in pre-release facilities, or at home under monitoring surveillance;[9] and
- **Peer support services** – Demonstrate that people understand and have experienced the benefits of recovery from mental and/or substance use disorders and can share their recovery stories. Positive reinforcement can help people recognize progress made.[10] Examples include Alcoholics Anonymous, Narcotics Anonymous, and Dual Recovery Anonymous.

Make a Difference During Recovery Month and Throughout the Year

This September and throughout the year, SAMHSA encourages all people involved in the criminal justice system to participate in ***Recovery Month***. To make a difference in someone's life:

- **Provide information about local reentry programs and resources** to individuals reentering the community. As a family member, friend, probation officer, or legal counsel to someone in the criminal justice system, consult the U.S. Office of Justice Program State Activities and Resources database to locate available resources to ease the transition from jail or prison back to the community.
- **Act as a supportive figure** to friends or family who are incarcerated, on probation, or on parole by listening to and understanding their challenges, monitoring for signs of mental and/or substance use disorders, and encouraging them to seek recovery support services, if necessary.
- **Share your story** if you were involved in the criminal justice system and are now in recovery from a mental and/or substance use disorder. Help others learn about treatment and recovery options, as well as provide support and encouragement for those just beginning their journey. Letting others know they are not alone has a profound effect on an individual's will to live in recovery.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (*http://www.samhsa.gov*)** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (*http:.//www.samhsa.gov/treatment*)** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report (*http://store.samhsa.gov/shin/content/SMA09-4450/SMA09-4450.pdf*)** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center (*http://www.stopstigma.samhsa.gov*)** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.

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- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Federal Bureau of Prisons (*http://www.bop.gov*)** – Provides progressive, safe, and humane care for Federal inmates. It offers mental health services, substance abuse treatment, and other self-improvement opportunities.

For a longer version of this guide, please visit ***http://www.recoverymonth.gov***, locate the "***Recovery Month*** Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as at http://www.samhsa.gov/treatment.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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Justice System

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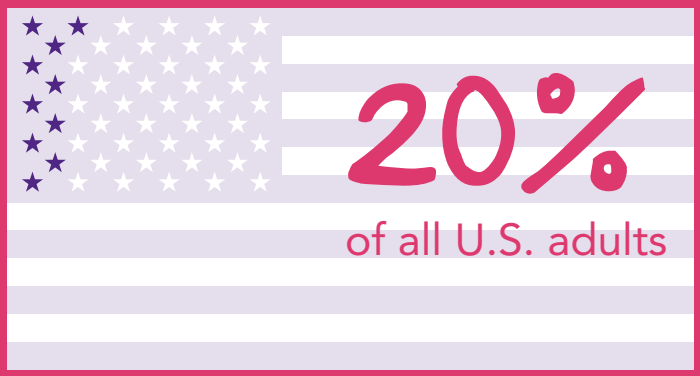
In 2010, there were an estimated

45.9 million =

adults aged 18 or older in the United States with any mental illness.*



"Because of strong family support, I was able to leave the hospital system fairly quickly and begin slowly rebuilding my life."

ORYX COHEN

Technical Assistance Center Director, National Empowerment Center
Lawrence, MA

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FAMILIES AND FRIENDS CAN MAKE A DIFFERENCE

For millions of people, a solid support system is essential for recovery from a mental and/or substance use disorder. People of all ages who have behavioral health conditions are just like those with other treatable conditions – deserving of empathy, compassion, and respect.[1] Encouragement from peers, loved ones, colleagues, and the community where they live can have a significant impact on people's overall health and well-being in recovery.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

Recovery Month aligns with SAMHSA's Recovery Support Strategic Initiative, which partners with people in recovery and family members to promote individual, program, and system approaches to building recovery and resilience. Family and friends make a difference by offering support, reassurance, companionship, and emotional strength. They share the message that treatment and recovery support services are available and help their loved ones find a recovery program that meets their individual needs.

This document provides tips for recognizing the signs of a behavioral health condition and encouraging a positive change in the life of someone you know, while learning ways you can cope with your loved one's condition.

Recognize Mental Health Problems and Offer Your Support

While most people believe that mental health problems are rare,[2] these conditions are, in fact, common. Remember that you are not responsible for and did not cause the mental or substance use disorder of a family member or friend. You can help your loved one by recognizing the signs of mental health problems, which vary by age group, so you can be alert to any changes in behavior:[3, 4]

- **Young children:** Changes in school performance; poor grades despite strong efforts; excessive worry or anxiety; hyperactivity; persistent nightmares; persistent disobedience or aggression; and frequent temper tantrums.
- **Older children and pre-adolescents:** Substance use; inability to cope with problems and daily activities; changes in sleeping and/or eating habits; excessive complaints of physical ailments;

Families and Friends

defiance of authority; truancy, theft, and/or vandalism; intense fear of weight gain; prolonged negative mood, often accompanied by poor appetite or thoughts of death; and frequent outbursts of anger.

- **Adolescents:** Feelings of sadness, hopelessness, or worthlessness; prolonged grief after a loss or death; excessive feelings of anger or worry; alcohol or drug use; exercising, dieting, or binge-eating obsessively; hurting others or destroying property; doing reckless things that may result in self-harm or harm to others.
- **Adults:** Confused thinking; prolonged depression (sadness or irritability); feelings of extreme highs and lows; excessive fears, worries, and anxieties; social withdrawal; dramatic changes in eating or sleeping habits; strong feelings of anger; delusions or hallucinations; growing inability to cope with daily problems and activities; suicidal thoughts; denial of obvious problems; numerous unexplained physical ailments; and substance use.

If your friend or family member tells you that he or she has a mental health condition, the following tips can help you offer support:[5]

- Express your concern and support;
- Ask about how he or she is managing;
- Ask what you can do to help;
- Offer to help your loved one with errands or everyday tasks;
- Reassure your loved one that you care about him/her; and
- Find out if the person is getting the care that he or she needs and wants.

Recognize Substance Use Disorders and Offer Your Support

Like mental health conditions, substance use disorders affect families of every race, ethnicity, socio-economic status, and location. The following are signs that a friend or family member may be abusing drugs:[6]

- **Physical signs:** Bloodshot eyes or pupils larger or smaller than usual; changes in appetite or sleep patterns; sudden weight loss or weight gain; deterioration of physical appearance or personal grooming habits; unusual smells on the breath, body, or clothing; and tremors, slurred speech, or impaired coordination.
- **Behavioral signs:** Drop in attendance and performance at work or school; unexplained need for money or financial problems; engaging in secretive or suspicious behaviors; sudden change in friends, favorite hangouts, and hobbies; and frequently getting into trouble (fights, accidents, illegal activities).
- **Psychological signs:** Unexplained change in personality or attitude; sudden mood swings, irritability, or angry outbursts; periods of unusual hyperactivity, agitation, or giddiness; lack of motivation; appearing lethargic; and appearing fearful, anxious, or paranoid, with no reason.

When offering support to someone with a substance use disorder, refer to the following tips to guide the conversation.[7]

- Express your concern and provide examples of ways in which the person's substance use has caused problems;
- Don't cover up or make excuses for substance use-related accidents or occurrences;
- Intervene as soon as possible after a substance use-related incident, when the individual is no longer under the influence;

- Gather information on treatment options and offer to accompany the person to the first appointment or meeting; and
- Recruit other friends, family members, or people in recovery to deliver the message that help is available and treatment is effective.

Most importantly, remind these individuals that recovery is possible, and that millions of people just like them were able to regain their lives and live healthy, rewarding lives in recovery.

Mental and/or Substance Use Disorders Affect the Whole Family

Individuals with mental and/or substance use disorders aren't the only ones whose lives are impacted by these conditions. These disorders affect family members and friends emotionally, physically, spiritually, and economically. The following tips will help you cope with changes in your life:[8, 9]

- Set limits, roles, and boundaries;
- Develop a coping strategy;
- Accept your feelings;
- Support recovery;
- Simplify your approach by setting small goals; and
- Sustain your own physical, mental, and spiritual health.

When family members and friends are involved and supportive of a person seeking treatment for substance misuse, the likelihood of success is improved.[10] You can work toward making things better for yourself and also increase the chances of your loved one reaching and maintaining recovery.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

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- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (*http://www.samhsa.gov/treatment*)** – Contains information about treatment options and special services located in your area.

- **SAMHSA's "Considerations for the Provision of E-Therapy" Report (*http://store.samhsa.gov/shin/content/SMA09-4450/SMA09-4450.pdf*)** – Shares extensive information on the benefits, issues, and successes of e-therapy.
- **SAMHSA's ADS Center (*http://www.stopstigma.samhsa.gov*)** – Provides information and assistance to develop successful efforts to reduce prejudice and discrimination and promote social inclusion.
- **National Association for Children of Alcoholics (*http://www.nacoa.net*)** – Advocates for the public awareness, education, and support of children whose parents suffer from substance use disorders.
- **National Council on Alcoholism and Drug Dependence, Inc. (NCADD) (*http://www.ncadd.org*)** – Offers assistance to individuals, parents, youth, and friends and family of those who are fighting alcoholism and drug addiction.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Teen Challenge International (*http://www.teenchallengeusa.com*)** – Provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems.

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Friends And Family

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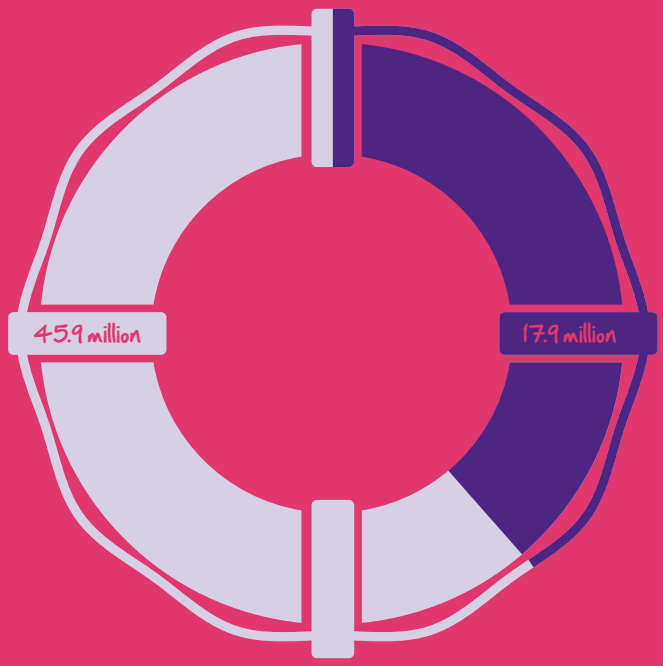
In 2010, among **45.9 million** Americans aged 18 or older who experienced any mental illness, **17.9 million** received mental health treatment.*



"My life is not perfect, but recovery has given me a second chance to face challenges with a measure of grace and gratitude."

ERIC MCDANIEL

Program Coordinator, Faces & Voices of Recovery
Washington, DC

National Recovery Month

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PARTNER WITH THE RECOVERY COMMUNITY

Every day, people with mental and/or substance use disorders begin to reclaim their lives and rebuild their futures through the journey of recovery. Members of the recovery community and their family members are important role models for people in recovery, helping to promote the effectiveness of intervention, support, and treatment, as well as spreading the hope of recovery.

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This document details how members of the recovery community can share the benefits of recovery and act as leaders and role models. People in recovery are experienced in recognizing the signs of mental health problems and substance use disorders, which are listed below, and can support their peers in identifying and implementing appropriate action steps to meet individual needs. In addition, the next section promotes self-care among people in the recovery community to address the potential for relapse. The "Join the Voices for Recovery" document in this toolkit shares positive journeys from the perspectives of multiple individuals in recovery.

Signs of Behavioral Health Conditions

The experiences of people in recovery have enabled them to identify warning signs in someone in need, share their own stories to promote recovery, and help themselves and others recognize signs of possible relapse and seek appropriate support. Mental and/or substance use disorders can co-occur, meaning someone may have both at the same time. Below are tips to help identify them.

Symptoms of mental health problems among children, adolescents, and adults include:[1]

- Feelings of extreme highs and lows;
- Excessive fears, worries, and anxieties;

Recovery Community

- Social withdrawal;
- Changes in eating or sleeping habits;
- Strong feelings of anger;
- Substance misuse;
- Inability to cope with problems and daily activities;
- Excessive complaints of physical ailments;
- Changes in school performance; and
- Hyperactivity.

Symptoms of substance misuse among children, adolescents, and adults include:[2]

- **Mood swings:** Virtually all mood-altering drugs produce mood swings ranging from euphoria to depression;
- **School and work problems:** Changes in school and work performance can occur, such as excessive tardiness, absences, missed deadlines, failure to turn in assignments, suspension, or expulsion; and
- **Changes in appearance:** People with substance use disorders may have worsening personal appearance or hygiene or a sudden gain or loss of weight.

Although all of these signs may suggest behavioral health conditions, these generalized symptoms and signs may also be indicative of other problems or disorders.

Stable recovery requires self-awareness and self-care. Relapse of substance use and re-emergence of mental disorder symptoms may occur during the process of recovery. The potential for these problems makes recognition of personal warning signs and access to a personal recovery support network important.

Share Stories: The Recovery Community Can Help

There are perhaps no stronger advocates for the power of recovery than people who are already sustaining their own recovery. Social supports improve recovery outcomes,[3] and many people struggling with mental and/or substance use disorders need someone who has experience coping with these issues to trust and relate to when embarking on their own recovery journey.

Real-life stories bring to life the power of recovery.[4] Peer-to-peer stories and conversations may help a person realize that he or she has a problem and needs to seek treatment. Options to get involved in the recovery community are detailed below.

Speak publicly and/or plan an event

A number of organizations exist to mobilize advocates to speak on behalf of those with behavioral health conditions. In 2011, there were more than 1,200 Recovery Month events nationwide, and many featured real-life examples of community members who overcame a behavioral health condition.

Events such as a run/walk bring attention to those in recovery, help educate communities about behavioral health conditions, and demonstrate the reality of recovery. See the "Promote ***Recovery Month*** with Events" document in this toolkit for more information on how to plan an event this September!

Form or participate in a support group

Support groups are a place for people to give and receive both emotional and practical support, and exchange information.[5] To find a support group:[6]

- Ask a doctor or other health care provider for assistance. A doctor, nurse, social worker, chaplain, or psychologist may be able to recommend a support group;
- Contact local community centers, libraries, churches, mosques, synagogues, or temples;
- Ask others with the same illness or life situation for suggestions;
- Contact a State or national organization devoted to mental or substance use disorders; and/or
- Search the Internet. Online support groups are available as email lists, newsgroups, chat rooms, blogs, and social networking sites, such as Facebook. If you need help on how to use these online tools, visit the "Develop Your Social Network" document in this toolkit.

Offer assistance and encouragement

Because mental and/or substance use disorders affect a person's ability to maintain a healthy lifestyle, handle stress, relate to others, and make choices, below are some positive coping strategies to manage these issues.[7, 8]

- Eat nutritious meals and snacks;
- Get physical activity and enough rest;
- Reduce caffeine intake and stop smoking;
- Seek help from counselors or support groups on a regular basis;
- Get support from family and friends; and
- Find time to take care of yourself and relax.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website (*http://www.samhsa.gov*)** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website (*http://www.samhsa.gov/treatment*)** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report (*http://store.samhsa.gov/shin/content/SMA09-4450/SMA09-4450.pdf*)** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center (*http://www.stopstigma.samhsa.gov*)** – Provides information and assistance to develop successful efforts to reduce prejudice and discrimination and promote social inclusion.
- **Ensuring Solutions to Alcohol Problems (*http://www.gwumc.edu/sphhs/institutescenters/ensuring_solutions_to_alcohol_problems.cfm*)** – Provides information and tools to increase access to effective and affordable screening and treatment for individuals, families, and businesses.
- **Faces & Voices of Recovery (*http://www.facesandvoicesofrecovery.org*)** – Organizes and mobilizes Americans in recovery, their family, and their friends to promote the right and resources to recover. It accomplishes this through advocacy, education, and demonstrations of the power and proof of long-term recovery.
- **National Council on Alcoholism and Drug Dependence, Inc. (NCADD) (*http://www.ncadd.org*)** – Fights alcoholism and drug addiction and offers assistance to individuals, parents, youth, and friends and family.
- **Recovery Connection (*http://www.recoveryconnection.org*)** – Provides people and their loved ones in need of addiction help with detox or treatment information. It provides a free national helpline with staff who have had addiction problems and understand the recovery process.

For a longer version of this guide, please visit ***http://www.recoverymonth.gov***, locate the "***Recovery Month*** Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as at *http://www.samhsa.gov/treatment*.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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Recovery Community

National Recovery Month

Prevention Works • Treatment is Effective • People Recover

COMMON MENTAL HEALTH PROBLEMS AND MISUSED SUBSTANCES

Each year, individuals, families, and communities are impacted by mental and/or substance use disorders. The aim of ***National Recovery Month (Recovery Month)*** is to raise awareness about the many resources available to help prevent these conditions and encourage treatment and recovery. Recovery Month is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

Learning about some of the most common mental health problems and the misuse of alcohol and illicit and prescription drugs can help you recognize the signs of behavioral health conditions and provide help to individuals experiencing them. Included in this document are key statistics about common mental health problems and substances that are often misused. Also included are alternate names for each disorder or substance, signs and symptoms of a problem, adverse health effects, prevalence, and average age of onset (or age of first-time use of a substance). Information in the following charts was collected from the *2010 National Survey on Drug Use and Health*, as well as reports and data released by The Partnership at Drugfree.org, the National Institute of Mental Health, and the National Institute on Drug Abuse.

The following chart includes information on common mental health problems:

ANXIETY DISORDERS

Mental Health Problem	Signs & Symptoms[1, 2, 3]	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old)[4, 5, 6]	Average Age of Onset[7]
Agoraphobia	Intense fear and anxiety of any place or situation where escape might be difficult; avoidance of being alone outside of the home; fear of traveling in a car, bus, or airplane, or being in a crowded area	2.4 percent of youth; 1.4 percent of adults	20 years old
Generalized Anxiety Disorder	An overwhelming sense of worry and tension; physical symptoms including fatigue, headaches, muscle tension, muscle aches, trouble swallowing, trembling, twitching, irritability, sweating, lightheadedness, nausea, and hot flashes	1.0 percent of youth; 5.7 percent of adults	31 years old
Obsessive Compulsive Disorder (OCD)	Persistent and unwelcome anxious thoughts or "obsessions," often accompanied by rituals that are performed to try to prevent or get rid of them, called "compulsions"	(youth data not available) 1.6 percent of adults	19 years old
Panic Disorder	Feelings of sudden terror that often occur with a pounding heart, sweating, nausea, chest pain, faintness, or dizziness; an avoidance of places or situations where panic attacks have occurred	2.3 percent of youth; 4.7 percent of adults	24 years old
Post-Traumatic Stress Disorder (PTSD)	Relived trauma after experiencing a terrifying event, through nightmares or disturbing thoughts throughout the day; feelings of detachment, numbness, irritability, or aggressiveness	4.0 percent of youth; 6.8 percent of adults	23 years old
Social Phobia	Intense feelings of anxiety and dread about social situations; a persistent fear of being watched and judged by others and being humiliated or embarrassed by the person's own actions; physical symptoms such as blushing, profuse sweating, trembling, nausea, and difficulty talking	5.5 percent of youth; 12.1 percent of adults	13 years old
Specific Phobia	Marked and persistent fear and avoidance of a specific object or situation, such as a fear of heights, spiders, or flying	15.1 percent of youth; 12.5 percent of adults	7 years old

MOOD DISORDERS

Mental Health Problem	Signs & Symptoms[1, 2, 3]	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old)[4, 5, 6]	Average Age of Onset[7]
Bipolar Disorder	Recurrent episodes of highs (mania) and lows (depression) in mood; changes in energy and behavior; extreme irritable or elevated mood; an inflated sense of self-importance; risky behaviors, distractibility, increased energy, and a decreased need for sleep	3.0 percent of youth; 3.9 percent of adults	25 years old
Major Depressive Disorder	A pervading sense of sadness and/or loss of interest or pleasure in most activities that interferes with the ability to work, study, sleep, and eat; negative impact on a person's thoughts, sense of self-worth, sleep, appetite, energy, and concentration	11.2 percent of youth; 16.5 percent of adults	32 years old

OTHER MENTAL HEALTH PROBLEMS

Mental Health Problem	Signs & Symptoms[1, 2, 3]	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old)[4, 5, 6]	Average Age of Onset[7]
Attention-Deficit/ Hyperactivity Disorder (ADD/ADHD)	Inattention or difficulty staying focused; hyperactivity, or constantly being in motion or talking; impulsivity, meaning often not thinking before acting	9.0 percent of youth; 8.1 percent of adults	7 years old
Personality Disorder	Difficulties dealing with other people and participating in social activities; inflexibility, rigidity, and inability to respond to change; deeply ingrained, inflexible patterns of relating, perceiving, and thinking that cause distress or impaired functioning	(youth data not available) 9.1 percent of adults*	Not available
Schizophrenia	Hearing voices or believing that others are trying to control or harm the person; hallucinations and disorganized speech and behavior, causing individuals to feel frightened, anxious, and confused	(youth data not available) 1.1 percent of adults*	Not available

The following chart includes information on commonly misused substances:

ALCOHOL, TOBACCO, AND INHALANTS

Substance	Other Names[8, 9, 10]	Immediate Intoxication Effects[11, 12]	Negative Health Effects[13, 14]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[15]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[16, 17]
Alcohol	Booze, beer, wine, liquor	Dizziness; talkativeness; slurred speech; disturbed sleep; nausea; vomiting; impaired judgment and coordination; increased aggression	Brain and liver damage; depression; liver and heart disease; hypertension; fetal damage (in pregnant women)	17.2 years (16.9 years in 2009); rate of current alcohol use among youths aged 12 to 17 is 13.6 percent	131.3 million people (similar to 130.6 million people in 2009)
Tobacco Products	Cigarettes, cigars, smokeless tobacco, snuff, spit tobacco, chew	Increased blood pressure and heart rate	Chronic lung disease; coronary heart disease; stroke; cancer of the lungs, larynx, esophagus, mouth, and bladder; poor pregnancy outcomes	17.3 years (17.5 years in 2009); rate of current tobacco use among youths aged 12 to 17 is 10.7 percent	69.6 million people (similar to 69.7 million people in 2009)
Gases, Nitrites, and Aerosols (Inhalants)	Ether, chloroform, nitrous oxide, isobutyl, isoamyl, poppers, snappers, whippets, laughing gas	Increased stimulation; loss of inhibition; headache; nausea; vomiting; slurred speech; loss of motor coordination; wheezing; cramps; muscle weakness	Memory impairment; damage to cardiovascular and nervous systems; unconsciousness	16.3 years (16.9 years in 2009); rate of current inhalant use among youths aged 12 to 17 is 1.1 percent	70,000 people (similar to 60,000 people in 2009)

ILLICIT DRUGS

Substance	Other Names[8, 9, 10]	Immediate Intoxication Effects[11, 12]	Negative Health Effects[13, 14]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[15]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[16, 17]
Cocaine	Blow, bump, C, candy, Charlie, coke, crack, flake, rock, snow, toot, white lady	Increased alertness, attention, and energy; dilated pupils; increased temperature, heart rate, and blood pressure; insomnia; loss of appetite; feelings of restlessness, irritability, and anxiety	Weight loss; cardiovascular complications; stroke; seizures	21.2 years (20.0 years in 2009); rate of current cocaine use among youths aged 12 to 17 is 0.2 percent	1.5 million people (similar to 1.6 million people in 2009)
Ecstasy	Adam, E, eve, decadence, M&M, roll, X, XTC	Enhanced sense of self-confidence and energy; involuntary teeth clenching; a loss of inhibitions; transfixion on sights and sounds; nausea; blurred vision; chills; sweating; increased heart rate and blood pressure	Muscle cramping/sleep disturbances; depression; impaired memory; kidney, liver and cardiovascular failure; anxiety	19.4 years (20.2 years in 2009); rate of current ecstasy use among youths aged 12 to 17 is 0.5 percent	695,000 people (less than 760,000 people in 2009)
Heroin	Big H, blacktar, brown sugar, dope, horse, junk, muc, skag, smack, white horse	Feeling of euphoria; flushing of the skin; dry mouth; heavy extremities; slurred speech; constricted pupils; droopy eyelids; vomiting; constipation	Collapsed veins; infection of the heart lining, valves; abscesses; cellulitis; liver disease; various types of pneumonia; clogged blood vessels; respiratory complications	21.3 years (25.5 years in 2009)	20,000 people (same as 2009)

ILLICIT DRUGS, CONT.

Substance	Other Names[8, 9, 10]	Immediate Intoxication Effects[11, 12]	Negative Health Effects[13, 14]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[15]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[16, 17]
Hallucinogens	Acid, boomers, doses, hits, LSD, microdot, peyote, shrooms, sugar cubes, tabs, trips	Dilated pupils; higher body temperature; increased heart rate and blood pressure; sweating; loss of appetite; sleeplessness; dry mouth; tremors	Flashbacks that may occur within a few days or more than a year after use	19.1 years (18.4 years in 2009); rate of current hallucinogen use among youths aged 12 to 17 is 0.9 percent	1.2 million people (similar to 1.3 million people in 2009)
Marijuana	Blunt, dope, ganja, grass, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, skunk, weed	Distorted perception; trouble with thinking and problem solving; loss of motor coordination; increased heart rate	Respiratory infection; impaired memory; anxiety; exposure to cancer-causing compounds	18.4 years (17 years in 2009); rate of current marijuana use among youths aged 12 to 17 is 7.4 percent	17.4 million people (increased from 16.7 million people in 2009)
Methamphetamine	Chalk, crank, crystal, ice, meth, speed, white cross	State of euphoria; insomnia; decreased appetite; irritability/ aggression; anxiety; nervousness; convulsions	Paranoia; hallucination; repetitive behavior; delusions of parasites or insects crawling under the skin; psychosis; severe dental problems; heart attack	18.8 years (19.3 years in 2009)	353,000 people (decreased from 502,000 people in 2009)

PRESCRIPTION DRUGS

Substance	Other Names[8, 9, 10]	Immediate Intoxication Effects[11, 12]	Negative Health Effects[13, 14]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[15]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[16, 17]
Pain Relievers	Vike (Vicodin®), oxy, O.C. (Oxycontin®), M (roxanol), schoolboy (empirin with codeine), China white, dance fever (Actiq®)	Pain relief; euphoria; drowsiness, respiratory depression and arrest; nausea; confusion; constipation; sedation; unconsciousness; restlessness	Muscle and bone pain; drowsiness; seizure; coma; respiratory depression; decreased heart rate	21.0 years (20.8 years in 2009); rate of current non-medical use of prescription pain relievers among youths aged 12 to 17 is 3 percent	5.1 million people (similar to 5.3 million people in 2009)
Psycho-therapeutics	Prozac®, Zoloft®, Ritalin®	Increased heart rate, blood pressure, and metabolism; feelings of exhilaration and energy; increased mental alertness; rapid or irregular heartbeat; reduced appetite	Heart failure; weight loss; tremors and muscle twitching; fevers, convulsions, and headaches; irregular heartbeat and respirations; anxiety; restlessness; paranoia; hallucinations; delusions of parasites or insects crawling under the skin	22.3 years (21 years in 2009)	7.0 million people (same as in 2009)
Sedatives	Haldol®, Thorazine®, Navane®, Prolixin®, Mellaril®, Trilafon®	Slurred speech; shallow breathing; sluggishness; fatigue; disorientation and lack of coordination; dilated pupils; reduced anxiety; lowered inhibitions	Seizures; impaired memory, judgment and coordination; irritability; paranoid and suicidal thoughts; sleep problems	23.5 years (19.7 years in 2009)	374,000 people (similar to 370,000 people in 2009)

PRESCRIPTION DRUGS, CONT.

Substance	Other Names[8, 9, 10]	Immediate Intoxication Effects[11, 12]	Negative Health Effects[13, 14]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[15]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[16, 17]
Tranquilizers	Benzos (Mebaral®, Ativan®, Xanax®, Valium®, Nembutal®, Librium®)	Slurred speech; shallow breathing; sluggishness; fatigue; disorientation and lack of coordination; dilated pupils; reduced anxiety; lowered inhibitions	Seizures; impaired memory, judgment and coordination; irritability; paranoid and suicidal thoughts; sleep problems	24.6 years (22.4 years in 2009)	2.2 million people (similar to 2.0 million people in 2009)
Stimulants	Adderall®, Ritalin®, Concerta®	Increased alertness, attention, and energy	Increased hostility or paranoia; dangerously high body temperatures; irregular heartbeat; cardiovascular failure; lethal seizures	21.2 years (21.5 years in 2009)	1.1 million people (similar to 1.3 million people in 2009)

For a longer version of this guide, please visit ***http://www.recoverymonth.gov***, locate the "***Recovery Month*** Kit," and click on the "Targeted Outreach" link. Information about treatment options and special services in your area can be found by calling **1-800-662-HELP (4357)** or 1-800-487-4889 (TDD), as well as at http://www.samhsa.gov/treatment.

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National Recovery Month

Prevention Works • Treatment is Effective • People Recover

september 2012

JOIN THE VOICES FOR RECOVERY

It's Worth It

PERSONAL STORIES ABOUT RECOVERY

Substance Abuse and Mental Health Services Administration
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Join The Voices For Recovery

This September marks the 23rd annual ***National Recovery Month (Recovery Month)*** observance, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). This initiative raises awareness about the mental and/or substance use disorders that affect millions of individuals, as well as their families, and celebrates those in recovery.

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and substance use disorders are significant and valuable. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in meaningful ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

The following narratives provide a personal perspective on the benefits of treatment and recovery. While every story is unique, they all illustrate this year's ***Recovery Month*** theme by showing the positive impact of recovery on individuals, families, and communities. These stories are an inspiration to take action and seek treatment for a mental and/or substance use disorder, or help a loved one in need.

Adam J. Deveau

BRIDGTON, ME

The ancient symbol known as "yin-yang" illustrates that our reality operates in a constant struggle to maintain balance. When our physiological balance is thrown off by using drugs to induce happiness, our internal equilibrium must regain balance by following that pleasure with extreme feelings of despair.

Eventually, I came to realize that my drug-induced highs were nowhere near good enough to justify all my abysmal lows. My mornings used to begin with a race between my eyes opening and my withdrawals starting. Between using my first drug, finding my favorite drug, and hitting rock bottom, I was someone who wanted help for so many reasons.

I discovered that medication-assisted treatment could support my recovery from addiction. Methadone maintenance treatment has given me a second chance at happiness and has taught me to value long-term, sustainable contentment above short-term, shallow, drug-induced pleasure.

I continue to be committed to my recovery because I love my family, my country, and the compassionate recovery community who has supported me. The moral of my story is that with treatment and counseling I have been able to stay alive, keep my job, earn my bachelor's degree in philosophy, and pursue happiness. If I had stayed on drugs, my story was destined to be a tragedy about a person falling far short of their potential.

Charles B. Thornton

Director, The Mayor's Office on Returning Citizen Affairs
WASHINGTON, DC

As a talented point guard in high school, I had tremendous opportunities in front of me. However, the lure of the streets, with their promise of easy money, peer pressure, nightlife, alcohol, and drugs, was simply too much to overcome.

And so began an 11-year revolving door odyssey in and out of jail for typical drug user offenses. I was a poster child for recidivism. In 1990, I was again paroled and everyone, including me, believed that I would be back in jail in short order. However, in less than 1 year, I completely turned my life around and was irreversibly moving in the right direction.

Unlike before, I tapped into a combination of public-private services, training, and mentoring programs.This was the essential difference! Programs such as Alcoholics Anonymous and Narcotics Anonymous provided guidance, direction, and moral support in addressing my underlying addictions. My sponsor provided temporary Oxford-model housing, which both physically removed me from a risky environment and provided mentoring support. Home was truly a safe place.

I was hired for my first real job as a building maintenance worker, which provided the foundation for my career. Additional study and licensing put me in a position to work as chief building engineer at three different companies. I've since worked as a real estate agent, developer, entrepreneur, and currently, in the non-profit sector.

I now enjoy the love, support, and respect of my family and friends. I have rebuilt my relationship with my high-school sweetheart, and now the same two teenagers who brought a little girl into this world in 1978 are married, responsible adults. I'm active in a spiritual program, and most importantly, support multiple community recovery organizations and volunteer at the Department of Corrections.

As I've been able to quietly, and without fanfare, give back to my community tenfold, I am ever mindful of that spiritual axiom that states that "from those who have received much, much is expected."

Eric McDaniel

Program Coordinator, Faces & Voices of Recovery
WASHINGTON, DC

I have been in recovery since February 10, 2008, and it has completely changed my life for the better. I come from a family with a history of alcoholism, and I drank – and blacked out – for the first time when I was 9 years old. I started drinking again as an 18-year old college freshman. I could never control my drinking. Once I started, I never knew when I would stop, or what I might do.

After law school, it took only 2 years for my alcoholism and depression to turn a promising young trial lawyer, good friend, and devoted husband into an isolated and suicidal 29-year old with little hope. But God sent me a therapist who happened to specialize in trauma and addiction, and she told me where to find help. After a failed suicide attempt, I went to treatment and started to receive care for my illness.

With the help of other people in recovery, I have learned to practice a new way of living without alcohol. I found an Oxford House that supported my recovery while I worked toward regaining my independence. My life is not perfect, but recovery has given me a second chance to face challenges with a measure of grace and gratitude. I have the capacity to help others, and to ask for (and accept) help when I need it. I have been able to pursue my dream of working in public policy, and I now use my education and experiences in my work as a recovery advocate. I share my recovery with others, and encourage them to speak out about issues that matter to our community. Recovery has given my life new meaning and purpose.

> "My life is not perfect, but recovery has given me a second chance to face challenges with a measure of grace and gratitude."

Frank Ryan

VP of Clinical Services, Loyola Recovery Foundation
PITTSFORD, NY

I'm in recovery from alcoholism, and have not had a drink since December 20, 1977. This is not my accomplishment alone – a number of people and places contributed to my recovery.

My family still can't tell me which came first – a drink of alcohol or a step. At the time, they thought it was cute when I would crawl around and take sips of beer from cans on the floor. They did not think it was cute when I got drunk at age 13. Serving in the Navy did not change my drinking or thinking, and at times, I lived in the street. After a brief trip to the Norris Clinic in 1977, I promised myself I would not drink, and for the next 5 months, I didn't. But eventually, I told myself that I had earned a drink. I drank a small bottle, which turned into another bottle, and the next thing I knew, I was in another state. The only thought I had was there had to be a better way to die.

After friends found me, I returned home with them and entered the Norris Clinic again. The clinic and my friends played a trick on me – while I wanted a better way to die, they taught me a way to live. It was a slow process that included going to treatment and Alcoholics Anonymous meetings, finding a sponsor, and for the first time, taking suggestions.

We all have to face life's problems and learn to cope without alcohol or drugs. I had to face the loss of my parents, a wife, son, and grandson without the use of alcohol. I also faced the serious illness of my second wife, almost losing her. The list of problems that come along might be endless, but it is about life.

I now have a family, children, and grandchildren who not only love me, but respect me. I've had a career for 30 years and have not been fired. I have been able to gain self-respect and the respect of others. Changing my whole life was not easy, but the end result was well worth it.

Ian

MINNEAPOLIS, MN

I've been clean, sober, and in recovery since that day 5 years ago when I walked into my doctor's office beaten down by my addiction and finally asking for help. At 30 years old, and after 15 years of drug addiction, I started taking Suboxone. I had been attending 12-step group meetings, but after years of heroin and pill addiction, numerous drug treatments, and chronic relapses, I made the difficult decision to supplement my recovery with medication. Although I feared judgments from others in recovery, Suboxone has saved my life.

While medication-assisted treatment is a significant part of my recovery, staying sober depends on more than just medication. I do service work, go to meetings, and surround myself with supportive people to avoid using substances.

Medication-assisted treatment is the best decision I've made in a long time. I know I wouldn't be where I am today without the help from my doctors and the medication-assisted treatment program, which has stopped my cravings and preoccupation with using substances. My life is no longer controlled by being high, lying, feeling miserable, and then starting the cycle again.

I'm 100 percent committed to my recovery. Even though some days are still hard, I know I can make it through the tough times. I now have a good job, a house, and a family. Additionally, I now have something I never thought I could, sobriety and true happiness.

> "Even though some days are still hard, I know I can make it through the tough times."

Lauren Spiro

Director, National Coalition for Mental Health Recovery
WASHINGTON, DC

My life has been an unfolding process of searching for my truth and my liberation. A major part of my journey has been looking back with a deeper lens at what happened to me. I was put in a mental institution at age 16 and told that I had an incurable brain disease. The experts, however, were wrong.

My most powerful recovery tool has been to heal my emotional pain by expressing the feelings associated with my early hurtful experiences, and having people really listen to me. Remarkable changes happened when I started learning about oppression and the damage it had done to my life. I had been stuck in monologue, and no one knew how to engage me in dialogue. Eventually I learned to express myself and discover who I was born to be. I reclaimed my full self and mind, and I learned that there was nothing wrong with me. Today, with more clarity, I understand what happened to me. I continue to learn how to believe more deeply in myself.

I now serve as the director of the National Coalition for Mental Health Recovery (NCMHR), which was formed in 2006 as a united voice for people with who have experienced mental health recovery. We are 32 States strong; we have a voice on Capitol Hill; and we have a seat at White House policy meetings. We are spreading emotional CPR around the world, teaching people how to assist others through an emotional crisis.

I have also earned a master's in clinical and community psychology, and I am an artist who has awakened to the power of creative expression as a tool to transform society. I have devoted my life's work to changing the mental health system so that it better meets the genuine needs of people.

Laurie Dhue

Veteran Broadcast Journalist
NEW YORK, NY

I drank alcohol for the better part of 20 years. That's 7,300 days. From the outside, I had it all: my own show on Fox News Channel along with a healthy salary, a beautiful apartment, nice clothes, the ability to travel whenever I wanted, and family and friends who loved me. But inside I was dead. If I wasn't drinking, I was thinking about a drink or recovering from drinking. Booze was my best friend. It made me a lot of promises and told me a lot of lies.

After hitting bottom, I began seeing an addiction psychiatrist and was introduced to a program of recovery by a friend who had achieved what I wanted. I have nearly 5 years of sobriety and am astonished – and delighted – to say that the desire to drink has been eliminated. I take it one day at a time, comforted by a huge support system that includes fellow recovering alcoholics, family, friends, and colleagues.

After my anonymity was broken in early 2011, I decided to embrace the opportunity to go public with my battle with alcoholism. I went on The Today Show to share the message that addiction doesn't discriminate, that people don't have to suffer in silence, and that help is available. My goal then and now is to put a human face on this treatable disease and chip away at the misconceptions that still very much exist in our society. I want to do whatever it takes to increase awareness and educate those who do not understand that this disease affects many American families in one way or another.

I am a proud member of the Caron Foundation's New York Advisory Board, the National Youth Recovery Foundation, and the Bridge Way sober high school in Philadelphia. I give speeches and host recovery events around the country. This work has become the most important part of my life.

I am filled with gratitude to be part of the solution, and thankful that I'm finally becoming the woman I was meant to be.

Martin Miller

Counselor, Adcare Hospital of Worcester
WORCESTER, MA

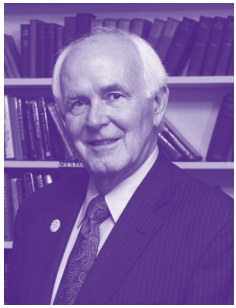
My story of addiction began at age 12 when I started drinking and smoking marijuana. I had just moved to a new city, which meant starting a new school and making new friends. I wanted to fit in. By age 14, I was experimenting with other drugs. At 15, I started using opiates, and at 16, I was addicted to heroin and dropped out of high school. A year later, I was incarcerated for heroin possession. There would be many more drug-related offenses to follow, resulting in more than 10 years of incarceration over the next 35 years. Lost and lonely on the inside, I was mean and tough on the outside. I found myself in a cycle of drug addiction, treatment, and incarceration.

Eventually, long-term treatment offered me the foundation for a life in recovery. Now I am 10 years in recovery; I completed my bachelor's degree at the University of Massachusetts in June 2011 and am currently entering my second semester at Springfield College, working toward a master's degree in social work. I am a Certified Alcohol and Drug Counselor and a Licensed Alcohol and Drug Counselor II.

I also became involved with Massachusetts Organization for Addiction Recovery (MOAR) 6 years ago. I feel that becoming a visible, vocal advocate for improved addiction treatment and education, as well as public awareness, is essential to my newfound purpose in life.

Today, thanks to my recovery, I am a valuable, responsible member of society who is an employed, tax-paying voter and involved in my community. I am a man with honor, dignity, integrity, and respect. I am living proof that treatment works and recovery is possible. Each day of recovery, I feel victorious with much gratitude.

Mike Barry



CEO, People Advocating Recovery
LOUISVILLE, KY

I loved to party when I was in school in the late 60s. I was also responsible, made good grades, and began a radio and television career, becoming a highly respected television news anchorman and producer. I worked in Nashville, Chicago, New York, and Los Angeles.

Little did I know that alcoholism was taking control of my life by my early 20s. I started drinking my way through jobs, moving from city to city to start over. I ran away from my problems mentally, morally, and physically. I burned so many bridges that I eventually I found myself living in a homeless shelter with nothing but the clothes on my back.

On October 7, 1994, I barricaded myself in my apartment for over a week and decided to drink myself to death. I ran out of hope. I was at a turning point in my life, although I didn't know it.

My family, friends, minister, and psychiatrist had all tried to help me, but I wouldn't let them. But one moment of clarity led me to ask God just one more time for help. No bargaining, no promises, just surrender. It was truly a spiritual experience.

Today, I'm a person in long-term recovery, which means I haven't had a drink in more than 17 years. I am happy, and life is good. I have so much less materially, but I have so much more internally. I am happily married, have my own business, my children are speaking to me, and I have a beautiful granddaughter who has never seen me drunk.

Each day I continue to work hard on my recovery and love every minute of it. I speak about my experience wherever I can. I share my strength and hope so that others will find inspiration that there is a solution. While sometimes this process helps me more than others, it also reminds me daily of what things were like and who I was, but more importantly, who I've become.

Molly Cisco

Executive Director, Grassroots Empowerment Project
MADISON, WI

I knew from an early age that I was not like other kids. There was an emptiness deep inside of me that felt like a big black scary hole. One of my earliest memories of the hole was when I was laying on a snow bank looking at the stars and wishing I did not exist. I was a very sad little girl, but that was a secret and it was too scary to tell. Instead, I learned how to act very happy. I was the class clown, the fun girl to invite to sleepovers.

My secret remained for years, until everything fell apart. Wanting to die is no way to live, so I decided to live. After I felt completely safe, I slowly told my therapist that I had a secret. She taught me how to save my life, find a new way of living in this world, and become who I wanted to be.

After confiding in her, I worked hard at self-discovery and recovery. I learned that I loved to garden so much that I did it every day for a whole summer. I began working again, and my job led me to lots of people who understood my experiences. I built a circle of friends who believed in me, cared about me, and with whom I could share my secret. The big black scary hole became so small that I forgot it was there.

Some call it mental illness, others call it trauma. I think that I wasn't loved for a long time, but now I give and receive love. I have a full and happy life. I have my friends, my new family, a home, a career, and my dogs. The hole is still there from time to time, but now I know what to do to make it small again.

Nancy Bassett

Director, Kingdom Recovery Center
ST. JOHNSBURY, VT

I am a person in long-term recovery, which for me means that I haven't used substances for more than 11 years. Recovery has changed my life.

Alcohol never appealed to me, but when the "hippie era" started, I experimented with everything. I met a Marine veteran who was also experimenting with drugs and soon found myself using opiates. We got married and had a son. Throughout my son's childhood we were able to keep the drugs in the background, but when he graduated and moved away, we didn't have to hide our drug use anymore. Eventually, we realized that heroin was running our life.

When my husband went to rehab, I went to buy drugs one last time. Coming back, the Vermont drug task force was waiting for me. I was sentenced to a 9-month drug program located in the Federal Correctional Institution in Connecticut. I walked in and saw three tiers of bars. I felt as though I was in a bad TV movie.

On my third day in the drug unit, I was called to the chaplain's office and was told that my husband of 30 years had overdosed and died the night before. This finally made me aware of what my addiction could do to me. It took me to jails, institutions, and near death, but I knew I wanted to live.

When I went home to continue a life in recovery, I was hired for a fantastic job. I still work at the peer-based Kingdom Recovery Center, and I have been the president of Vermont Recovery Center Network numerous times over the past several years.

I am a now a respected member of my community, and one day at a time, I work to stay on the path of recovery. Life is good.

Nemasa Asetra

Aspiring Author
NEW ORLEANS, LA

Living with a mental health condition can have devastating effects. It can strike anyone at any time in life, regardless of race, social or economic status, or other factors. Some people may think it will never happen to them.

My mental illness began in 1989. I was first diagnosed with paranoid schizophrenia; however, I also suffered with depression but it was not discovered until years later. I went without treatment for my conditions because I did not want to feel like a zombie. As an adoptee, I recently learned that my birth mom is mentally ill as well and is a ward of the public guardian system in her state.

After years filled with numerous visits to Martin Luther King/Drew Hospital in California, I decided to do the right thing and seek treatment for my mental health issues. Although I relapsed in 1995, I continued again toward recovery in 1997. I finally came to my senses and realized the importance of medication management and some type of therapy. Although there have been challenges along the way, I continued to receive treatment and learned the vital lesson that I could not get well if I stopped taking medication just because I felt like it.

Plain and simple, medication management and psychotherapy have helped me stay on the path of recovery from my mental health conditions. I'm an aspiring author with an autobiography detailing my mental health issues, and I advocate for the mentally ill. I am now 45 years old and living life to the fullest.

Oryx Cohen

Technical Assistance Center Director, National Empowerment Center
LAWRENCE, MA

In the fall of 1999, at age 26, I had my first of two major spiritual and emotional life crises. I had just moved 3,000 miles from my familiar life in Oregon to attend graduate school in Massachusetts and reinvent myself. One week later, after little sleep and several strange experiences, I totally lost grip on physical reality. I even convinced myself that I could fly my car, leading to a near-fatal car crash where I was air-lifted to the nearest trauma unit.

Soon afterwards, I was thrust into a system that didn't see me as a whole person with a story to tell. Instead I was a collection of symptoms, a diagnosis. For me, this just piled additional trauma onto the traumatic experiences I was already having.

The major pieces of my recovery have been peer and family support, sleep, reading literature about recovery, exercise, holistic alternatives, diet, and having meaningful work helping others. Recovery is a very individual process, and some strategies work for some but not others. I found it was helpful to try different alternatives like yoga, acupuncture, Reiki, and meditation to see what worked best.

Because of strong family support, I was able to leave the hospital system fairly quickly and begin slowly rebuilding my life. I returned to graduate school and earned my master's degree in public administration. After graduating, I co-founded the Freedom Center and currently work with the National Empowerment Center. Now, I'm married, a homeowner, have two young children, and have been fully recovered for 10 years.

Sandra Huffman

Founder, Sandra's Walk for Recovery
NATIONWIDE

I was adopted by a family that battled alcohol, substance use, and mental health issues. At age 7, I began to misuse the prescription medication given to me. I can remember sneaking downstairs and making up stories to take more.

I ran away when I was14 and had my first child at 15, and soon after, gave her up for adoption. I spent almost 35 years of my life living with addiction and alcohol issues, managing to get married twice and have two more children. Most, if not all, of my relationships ended in violence and chaos.

By my late 30s, I started going to jail. This is where I was introduced to the Broward County Drug Court System and Judge Marcia Beach. While she could never force me to get clean and sober, she did love me until I could love myself. I learned to take those first steps that I needed to come into a life of recovery.

After exiting the drug court program, I sought out every program in the county so I could stay on the right path. I joined a 12-step fellowship, listened and took suggestions, got involved, and stayed involved.

I spent the next 2 years trying to build a new life, but soon faced the judgments that surround the recovery community. When I needed a second part-time job and was turned away from delivering pizzas because of my arrests stemming directly from addiction, I had enough.

Step by step, day by day, I got better and carried my story on my sleeve, and the misconceptions faded away. Now almost 6 years into sobriety, I fight for all recovering families and will continue to do so until my very last breath.

In recovery, I found my birth family. My birth mother and seven siblings, as well as the daughter I gave up for adoption, are all in my life. At age 45, I am a person living a life of long-term recovery. I am no longer a liability to my community, I am an asset.

Sarah Rayer

Consultant
WASHINGTON, DC

Recovery has been the greatest gift of my life. I am grateful to have more than 10 years in recovery. I grew up in a small town, and my first social drink was a keg party in the woods.

It was cold and dark, but I remember how I felt like I could talk to boys and have fun without feeling insecure. The next morning I felt terrible, but from that point on, drinking was a part of my social life. After my mother committed suicide one week after I graduated from college, drinking became an escape. I wanted something to take the pain away. I didn't know how to live in the world.

When I was 25, I hit bottom. The pain of drinking outweighed any comfort it provided. On a cold January day, my sister drove me to the Caron Foundation. That was the start of my journey and learning to heal. I left rehab on Valentine's Day and attended my first Alcoholics Anonymous meeting. The day of my first anniversary in recovery I cried the whole day, I was so grateful to be sober.

Today I work in recovery advocacy, and I try to help people who are experiencing the suffering I once did. My life today isn't always easy, but I know that my recovery and the support I have in my life today can carry me through any situation life brings to me.

> "The day of my first anniversary in recovery I cried the whole day, I was so grateful to be sober."

Susan Rogers

Director, National Mental Health Consumers' Self-Help Clearinghouse
PHILADELPHIA, PA

In 1975, my family, fearing (with cause) that I was suicidal, brought an outreach team from the local hospital to my apartment. After a brief conversation, I was told that I could either enter the hospital "voluntarily" or involuntarily. Offered this "choice," I agreed to go "voluntarily," and was taken to the locked psychiatric ward of the nearby general hospital.

Hearing the key turn in the lock while I was on the wrong side of the door terrified me; but the camaraderie with my roommates was healing and, despite an episode of forced drugging, I managed to retain some hope.

During a second hospitalization, in 1976, I met a caring psychologist whom I continued to see for the next 7 years. I had lucked into a 2-for-1 deal – a friend and a helpful partner in my treatment.

A third lucky break was that a former employer offered me my job back, although I told him I was calling from a psych ward. It wasn't only his faith in me that helped; it was also the job, where I stayed for 8 years and was repeatedly promoted. Having a job I enjoyed and where my work was respected was enormously satisfying.

In 1976, I moved into a political collective and met Joseph Rogers, now well known as a longtime leader in the consumer/survivor/ex-patient (c/s/x) movement but then a 24-year-old community organizer. We went from mutual support to a 15-year marriage. Despite our divorce, our partnership continues: he is the executive director and I am the director of the National Mental Health Consumers' Self-Help Clearinghouse, a peer-run national technical assistance center funded by the Substance Abuse and Mental Health Services Administration.

Having control over my own life has been central to my recovery. Except for my time in the hospital, I have had the freedom to choose my companions, my home, my occupation, my amusements, and my political affiliations. I have also had the power to decide whether or not to seek professional help (and from whom) and whether or not to take medication (and which ones), and over the last 36 years I have done both. Sometimes it has helped, sometimes not so much. But in every instance I had the power to choose, which has made all the difference.

Thomas Gilbert

CEO and President, TouchStone Intervention & Professional Services
TRAVERSE CITY, MI

I was a former prosecuting attorney, criminal defense attorney, and judge when I went to a Rolling Stones concert in 2002 and smoked a joint. I was observed by a constituent who rightfully reported my actions, leading to a public statement and a year and a half of total public humiliation. The story took on a life of its own, which hurt a lot of people. The story was voted the No. 1 news story in my local newspaper both in 2003 and 2004. Jay Leno and the Tonight Show joked about the "pot-smoking judge." There were multiple radio shows about the whole situation. I decided to take this opportunity to remain focused on recovery and be responsible for my actions. That's what it took for me to get treatment and commit to recovery.

I am now in long-term recovery from alcoholism and addiction to marijuana. That means I have not had a drink or drug in more than 9 years, am actively working a program of recovery, and am living a life beyond my wildest dreams.

With a master's degree in addiction counseling, I help families throughout the country with interventions and chemical dependency counseling, and run a small legal practice for people in the recovery community. I speak out against the misconception of addiction and try on a daily basis to be an example of the solution. My life has never been better, and this can be a reality for everyone because addiction is a treatable disease and recovery is possible.

> "My life has never been better, and this can be a reality for everyone because addiction is a treatable disease and recovery is possible."

Todd Crandell PC, LCD III

Founder and President, Racing for Recovery
SYLVANIA, OH

My 13-year struggle with drugs and alcohol nearly destroyed my life, devastating relationships with family and friends and shattering the promise of a professional hockey career. I quit using drugs and alcohol on April 15, 1993, and have been in recovery and a champion for it ever since.

In the process of rebuilding my life, I realized that I needed something more than traditional recovery programs. I chose the most grueling sport imaginable, the Ironman triathlon, which consists of a 2.4 mile swim, 112 mile bike, and 26.2 mile run. I ran my first triathlon in 1999 and have never stopped.

I have completed 20 full-length Ironman triathlons across the world. In 2008, I was the only person in the world to complete the Ultraman Hawaii triathlon, which is a 3-day test of endurance consisting of 6.2 miles of swimming and 90 miles of biking on the first day, 171.2 miles of biking on day 2, and 52.4 miles of running on day 3. Six days later, I completed Ironman Western Australia. In 2009, I completed Ultraman Canada and became 1 of 25 individuals in the world to have completed both Ultraman triathlons.

In 2001, my experience with running these triathlon events and inspiring others on their road to recovery led me to form the nonprofit organization Racing for Recovery. I've also chronicled my experiences in my book, *From Addict to Ironman*, and two documentaries, *ADDICT* and *Running with Demons*.

Racing for Recovery offers professional counseling services and sponsors support group meetings and events across the United States to promote a lifestyle of fitness and sobriety. I regularly speak to groups and individuals to convey one important message – "With recovery, anything is possible."

Xavier Virsu

The McLeod Center
MARION, NC

My battle with addiction was always a matter of me falling down, and then picking myself up again. I tried to quit on my own several times, but it always seemed that I would lose my resolve rather quickly. When my wife found out she was pregnant, I made the decision to seek help because I had failed so many times on my own. This time I was determined not to fail.

Medication-assisted recovery was the best option for me. Methadone helps me not to be sick, and significantly reduces my desire to use opiates. Now in recovery, I am working and at home with my family where I should be, instead of roaming the streets. I have a counselor who understands addiction, and just having someone lend a sympathetic ear takes a load off my shoulders. My counselor educates me on dependency and has helped me to find triggers and identify the situations that led me to use substances. Medication, along with support from my counselor, has helped me to break the cycle of substance use and become closer to my family.

I continue to be committed to recovery because my family is the most important thing in my life. I want to start a new chapter in my life defined by supporting my wife and helping my son grow into adulthood. Medication-assisted recovery has allowed me to go to college and work toward a degree to better support my family. Recovery has given me the chance to accomplish things I never thought were possible.

National Recovery Month

Prevention Works • Treatment is Effective • People Recover

september 2012

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PREVENTION, TREATMENT, & RECOVERY RESOURCES

Substance Abuse and Mental Health Services Administration

SAMHSA

www.samhsa.gov • 1-877-SAMHSA-7 (1-877-726-4727)

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DEPARTMENT OF HEALTH & HUMAN SERVICES USA

PREVENTION, TREATMENT, AND RECOVERY RESOURCES

The following is a list of mental and/or substance use resources that can help you during ***National Recovery Month (Recovery Month)*** and throughout the year. The organizations are listed by category to help you quickly identify the resource(s) most closely aligned with your needs. Resources cover a variety of subject areas, including culture, policy, education, recovery support groups, mental health, prevention, and more. The referenced organizations represent a broad sampling of what is available nationwide. Organizations in **pink** are ***Recovery Month*** Planning Partners and are heavily involved in planning activities.

Please note: This list is not exhaustive of all available resources. Inclusion does not constitute endorsement by the U.S. Department of Health and Human Services (HHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), or its Center for Mental Health Services (CMHS), Center for Substance Abuse Prevention (CSAP), Center for Substance Abuse Treatment (CSAT), or Center for Behavioral Health Statistics and Quality (CBHSQ).

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FEDERAL AGENCIES AND REPRESENTATIVES

General Information About Mental and/or Substance Use Disorders

These government agencies offer a broad range of resources to assist individuals with mental and/or substance use disorders, as well as their families.

EXECUTIVE OFFICE OF THE PRESIDENT (EOP)
White House Office of Faith-Based and Neighborhood Partnerships

Located in seven Federal agencies, this group's goal is to ensure that grassroots leaders can compete on an equal footing for Federal dollars, receive greater private support, and face fewer bureaucratic barriers.
708 Jackson Place
Washington, DC 20502
202-456-3394
http://www.whitehouse.gov/administration/eop/ofbnp

EOP, White House Office of National Drug Control Policy (ONDCP)

This component of the Executive Office of the President establishes policies, priorities, and objectives for the Nation's drug control program, which includes prevention, treatment, and recovery.
P.O. Box 6000
Rockville, MD 20849-6000
800-666-3332
http://www.whitehouse.gov/ondcp

EOP, ONDCP
Information Clearinghouse

This Federal office serves as a resource for statistics, research data, and referrals useful for developing and implementing drug policy.
P.O. Box 6000
Rockville, MD 20849-6000
800-666-3332
http://www.whitehousedrugpolicy.gov/about/clearingh.html

U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID)

This independent Federal Government agency receives overall foreign policy guidance from the Secretary of State. The agency supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture, and trade; global health; and democracy, conflict prevention, and humanitarian assistance.
Information Center
U.S. Agency for International Development
Ronald Reagan Building
Washington, DC 20523-1000
202-712-4810
http://www.usaid.gov

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

This Federal Government agency protects the health of all Americans and provides essential human services, especially for those who are least able to help themselves.
200 Independence Avenue SW
Washington, DC 20201
877-696-6775
http://www.hhs.gov

HHS, Administration on Aging (AoA)

This organization's mission is to develop a comprehensive, coordinated, and cost-effective system of home and community-based services that helps elderly individuals maintain their health and independence in their homes and communities.
1 Massachusetts Avenue NW
Washington, DC 20201
202-619-0724
http://www.aoa.gov

HHS, Agency for Healthcare Research and Quality (AHRQ)

This organization within HHS supports research that helps people make more informed decisions and improves the quality of health care services. AHRQ, formerly known as the Agency for Health Care Policy and Research, is committed to improving care, safety and quality by developing successful partnerships and generating the knowledge and tools required for long-term improvement. The goal of AHRQ's research is to provide measurable improvements in health care in the United States, gauged in terms of improved quality of life and patient outcomes, lives saved, and value gained for what we spend.
540 Gaither Road
Rockville, MD 20850
301-427-1104
http://www.ahrq.gov

HHS, Centers for Disease Control and Prevention (CDC)
For more than 60 years, this organization has been dedicated to protecting health and promoting quality of life through the prevention and control of disease, injury, and disability. The CDC is committed to programs that reduce the health and economic consequences of the leading causes of death and disability, thereby ensuring a long, productive, healthy life for all people.
1600 Clifton Road
Atlanta, GA 30333
800-CDC-INFO (232-4636)
888-232-6348 (TTY)
800-QUIT-NOW (784-8669)
800-332-8615 (TYY)
http://www.cdc.gov

HHS, CDC, National Center for Health Marketing (NCHM)
This center helps define the future of health marketing within the CDC, the Federal sector, and beyond.
1600 Clifton Road
Atlanta, GA 30333
800-CDC-INFO (232-4636)
888-232-6348 (TTY)
800-QUIT-NOW (784-8669)
800-332-8615 (TYY)
http://www.cdc.gov/healthmarketing

HHS, CDC, National Center for HIV, STD, and TB Prevention, Divisions of HIV/AIDS Prevention (NCHSTP)
As the Federal Government's lead agency in combating HIV/AIDS, the CDC is a source of extensive data, public education materials, and prevention information accessible through numerous links on its website. The agency provides statistics and prevention measures relating to HIV/AIDS risks and prevalence among drug users.
1600 Clifton Road
Atlanta, GA 30333
800-CDC-INFO (232-4636)
888-232-6348 (TTY)
800-QUIT-NOW (784-8669)
800-332-8615 (TYY)
http://www.cdc.gov/nchstp/od/nchstp.html

HHS, CDC, Office on Smoking and Health (OSH)
This office is a division within the National Center for Chronic Disease Prevention and Health Promotion, one of the CDC centers. The CDC OSH website, http://www.cdc.gov/tobacco, contains numerous resources, such as Taking Action Against Secondhand Smoke – An Online Toolkit, CAPS – Community Actions and Practices, and National Tobacco Control Program State Exchange.
1600 Clifton Road
Atlanta, GA 30333
800-CDC-INFO (232-4636)
888-232-6348 (TTY)
800-QUIT-NOW (784-8669)
800-332-8615 (TYY)
http://www.cdc.gov/nccdphp

HHS, Center for Medicare and Medicaid Services (CMS)
This Federal agency provides health insurance for more than 74 million Americans through Medicare and Medicaid. It also enforces the Health Insurance Portability and Accountability Act (HIPAA) and several other health-related programs.
7500 Security Boulevard
Baltimore, MD 21244
877-267-2323
410-786-3000
http://www.cms.hhs.gov

HHS, Food and Drug Administration (FDA)
This Government agency is responsible for protecting public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines and other biological products; medical devices; our Nation's food supply; cosmetics; dietary supplements; and products that give off radiation.
10903 New Hampshire Avenue
Silver Spring, MD 20993
888-INFO-FDA (888-463-6332)
http://www.fda.gov

HHS, FDA
MedWatch
This website is the FDA gateway for finding clinically important safety information and reporting serious problems with human medical products.
http://www.fda.gov/safety/medwatch/default.htm

HHS, Health Resources and Services Administration (HRSA)
This Federal agency's mission is to improve and expand access to quality health care for all.
Parklawn Building
5600 Fishers Lane
Rockville, MD 20857
301-443-3376
http://www.hrsa.gov

HHS, HRSA
Poison Control Program
This program oversees the national toll-free Poison Help Line, 1-800-222-1222, which connects callers to their nearest poison center, 24 hours a day, 7 days a week for help in a poisoning emergency. Calls are free and confidential and can be translated into 161 languages.
Parklawn Building
5600 Fishers Lane, Room 100-06
Rockville, MD 20857
800-222-1222
http://www.poisonhelp.hrsa.gov

HHS, National Institutes of Health (NIH)
National Center for Complementary and Alternative Medicine (NCCAM)
This is the Federal Government's lead agency for scientific research on complementary and alternative medicine (CAM). It is one of the 27 institutes and centers that make up the National Institutes of Health (NIH) within HHS. NCCAM sponsors and conducts research using scientific methods and advanced technologies to study CAM. CAM is a group of diverse medical and health care systems, practices, and products that are not presently considered to be part of conventional medicine.
9000 Rockville Pike
Bethesda, MD 20892
888-644-6226
866-464-3615 (TTY)
http://nccam.nih.gov

HHS, NIH
National Institute on Alcohol Abuse and Alcoholism (NIAAA)
This Federal institute provides leadership in the national effort to reduce alcohol-related problems by conducting and supporting research in a wide range of scientific areas.
5635 Fishers Lane, MSC 9304
Bethesda, MD 20892-9304
301-443-3860
http://www.niaaa.nih.gov

HHS, NIH
National Institute on Drug Abuse (NIDA)
This Federal institute supports most of the world's research on the health aspects of drug use and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.drugabuse.gov

HHS, NIH, National Institute of Mental Health (NIMH)
This institute's mission is to transform the understanding and treatment of mental health problems through basic and clinical research, paving the way for prevention and recovery. For the institute to continue fulfilling this vital public health mission, it must foster innovative thinking and ensure that a full array of novel scientific perspectives are used to further discovery in the evolving science of brain, behavior, and experience.
6001 Executive Boulevard
Bethesda, MD 20892
301-443-4513
866-615-6464
http://www.nimh.nih.gov

HHS, Office of the Assistant Secretary for Health (ASH)
This group is comprised of 12 core public health offices and the Commissioned Corps, a uniformed service of more than 6,500 health professionals who serve at HHS and other Federal agencies. It was formerly known as the Office of Public Health and Science (OPHS).
200 Independence Avenue SW, Room 716G
Washington, DC 20201
202-401-7425
http://www.hhs.gov/ash

HHS, Office on Disability (OD)
The organization's mission is to oversee the implementation and coordination of programs and policies that enhance the health and well-being of people with disabilities. OD works directly with the agencies in HHS to facilitate policy development and to advance disability issues across agency and departmental lines. OD identifies opportunities to maximize and streamline processes that result in the elimination of inefficient or redundant efforts to serve Americans with disabilities.
200 Independence Avenue SW
Washington, DC 20201
http://www.hhs.gov/od

HHS, Substance Abuse and Mental Health Services Administration (SAMHSA)
This Federal agency improves the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from substance use and mental disorders. It lists a range of resources on its "Find Substance Abuse and Mental Health Treatment" website, http://www.samhsa.gov/treatment.
1 Choke Cherry Road, Eighth Floor
Rockville, MD 20857
240-276-2130
http://www.samhsa.gov

HHS, SAMHSA, Regional Administrators
Regional Administrators help SAMHSA reach out to and provide information for States, Territories, Tribes, providers, communities and other stakeholders, whether about funding opportunities, federal policies affecting them, or disaster preparedness and response. They also make it easier for SAMHSA to collaborate with other HHS colleagues in the regional offices and be better informed about behavioral health needs throughout the country.
http://www.samhsa.gov/about/regions/index.aspx

Region I (Serving CT, ME, MA, NH, RI, VT)
A. Kathryn Power, M.Ed.
JFK Federal Building
Boston, MA 02203
Kathryn.power@samhsa.hhs.gov

Region II (Serving NJ, NY, Puerto Rico, U.S. Virgin Islands)
Dennis O. Romero
26 Federal Plaza
New York, NY 10278
Dennis.romero@samhsa.hhs.gov

Region III (Serving DE, DC, MD, PA, VA, WV)
Jean Bennett
150 South Independence Mall West
Philadelphia, PA 19106-3499
Jean.bennett@samhsa.hhs.gov

Region IV (Serving AL, FL, GA, KY, MS, NC, SC, TN)
Stephanie McCladdie
61 Forsyth Street Southwest
Atlanta, GA 30303
Stephanie.McCladdie@samhsa.hhs.gov

Region V (Serving IL, IN, MI, MN, OH, WI)
Jeffrey A. Coady, Psy.D.
233 North Michigan Avenue, Suite 200
Chicago, Il 60601
Jeffrey.coady@samhsa.hhs.gov

Region VI (Serving AR, LA, NM, OK, TX)
Michael Duffy, R.N., B.S.N.
1301 Young Street, Suite 1030
Dallas, TX 75202
Michael.duffy@samhsa.hhs.gov

Region VII (Serving IA, KS, MO, NE)
Laura Howard, J.D.
601 East 12th Street
Kansas City, MO 64106
Laura.howard@samhsa.hhs.gov

Region VIII (Serving CO, MT, ND, SD, UT, WY)
Charles Smith, Ph.D.
1961 Stout Street
Denver, CO 80294-3538
Charles.smith@samhsa.hhs.gov

Region IX (Serving AZ, CA, HI, NV, Guam, American Samoa, Northern Mariana Islands, Federated States of Micronesia, Marshall Islands, Palau)
Jon Perez, Ph.D.
90 Seventh Street, Eighth Floor
San Francisco, CA 94103
Jon.perez@samhsa.hhs.gov

Region X (Serving AK, ID, OR, WA)
David Dickinson
2201 Sixth Avenue, MS RX-02
Seattle, WA 98121-1826
David.dickinson@samhsa.hhs.gov

HHS, SAMHSA, Technical Assistance Centers
These organizations, supported by SAMHSA funding, promote the planning and development of integrated primary and behavioral health care.

Addiction Technology Transfer Center (ATTC)
For a full description, refer to Research.

Center for Integrated Health Solutions (CIHS)
CIHS promotes the development of integrated primary and behavioral health services to better address the needs of individuals with mental and substance use conditions, whether seen in specialty behavioral health or primary care provider settings.
1701 K Street NW, Suite 400
Washington, D.C. 20006
202-684-7457
http://www.integration.samhsa.gov

Collaborative for the Application of Prevention Technologies (CAPT)
CAPT is a national substance abuse prevention training and technical assistance system dedicated to strengthening prevention systems and the Nation's behavioral health workforce.
43 Foundry Avenue
Waltham, MA 02453
617-618-2324
http://captus.samhsa.gov

Co-occurring Disorders Center of Excellence
The Co-occurring Disorders Center of Excellence integrates treatment that addresses mental and substance use conditions to provide better outcomes for substance use, psychiatric symptoms and functioning, decreased hospitalization, increased housing stability, and an improved quality of life.
1 Choke Cherry Road
Rockville, MD 20857
877-SAMHSA-7 (877-726-4727)
http://www.samhsa.gov/co-occurring

Fetal Alcohol Spectrum Disorders (FASD) Center for Excellence
The FASD Center is a Federal initiative devoted to preventing and treating the effects of alcohol on an individual whose mother drank during pregnancy by providing national leadership and facilitating collaboration in the field. These effects may include physical, mental, behavioral, and/or learning disabilities, with possible lifelong implications
SAMHSA FASD Center for Excellence
2101 Gaither Road, Suite 600
Rockville, MD 20850
1-866-STOPFAS (786-7327)
http://www.fasdcenter.samhsa.gov

Financing Center of Excellence (COE)
The COE's website features the latest news, reports, and information on financing health care and mental health/substance use services.
1 Choke Cherry Road
Rockville, MD 20857
877-SAMHSA-7 (877-726-4727)
http://www.samhsa.gov/financing

Homelessness Resource Center (HRC)
The HRC is an interactive community of providers, consumers, policymakers, researchers, and public agencies at Federal, State, and local levels. It seeks to improve the lives of people affected by homelessness who have mental health conditions, substance use issues, and histories of trauma.
1 Choke Cherry Road
Rockville, MD 20857
877-SAMHSA-7 (877-726-4727)
http://homeless.samhsa.gov

National Center for Trauma-Informed Care (NCTIC)
The NCTIC is a technical assistance center dedicated to building awareness of trauma-informed care and promoting the implementation of trauma-informed practices in programs and services.
66 Canal Center Plaza, Suite 302
Alexandria, VA 22314
866-254-4819
http://www.samhsa.gov/nctic

National Center on Substance Abuse and Child Welfare (NCSACW)
The NCSACW improves systems and practice for families with substance use disorders who are involved in the child welfare and family judicial systems by assisting local, State, and tribal agencies.
1 Choke Cherry Road
Rockville, MD 20857
877-SAMHSA-7 (877-726-4727)
http://www.ncsacw.samhsa.gov

National Technical Assistance Center for Children's Mental Health (NTAC)
The NTAC improves the quality of care for the mental health needs of children, youth, and their families at the policy, research, training and consultation, and direct-service levels.
Georgetown University Center for Child and Human Development
Georgetown University
P.O. Box 571485
Washington, DC 20057
202-687-5000
http://gucchd.georgetown.edu/67211.html

Native American Center for Excellence (NACE)
For a full description, refer to Culture-specific.

Projects for Assistance in Transition from Homelessness (PATH)
PATH provides community-based outreach, mental health, substance abuse, case management, and other support services, as well as a limited set of housing services to people with serious mental illness, including those with co-occurring substance use disorders, who are experiencing homelessness or at risk of becoming homeless.
1 Choke Cherry Road
Rockville, MD 20857
877-SAMHSA-7 (877-726-4727)
http://pathprogram.samhsa.gov

SAMHSA Disaster Technical Assistance Center (DTAC)
The DTAC supports SAMHSA's efforts to prepare States, Territories, Tribes, and local entities to deliver an effective mental health and substance abuse behavioral health response to disasters.
4350 East West Highway, Suite 1100
Bethesda, MD 20814
800-308-3515
http://www.samhsa.gov/dtac

Suicide Prevention Resource Center (SPRC)
For a full description, refer to Mental Health.

HHS, U.S. Department of Agriculture (USDA)
Dietary Guidelines for Americans
This Federal agency is responsible for developing and executing U.S. policy on farming, agriculture, and food. Dietary Guidelines for Americans has been published jointly by HHS and USDA every five years since 1980. Of interest to those engaged in efforts to prevent alcohol abuse and alcohol-related problems are the Chapter 9 guidelines for alcohol consumption, which constitute a de facto "official" definition of moderate or responsible alcohol use.
1400 Independence Avenue SW
Washington, DC 20250
202-720-2791
http://www.healthierus.gov/dietaryguidelines

Culture-Specific

These government agencies provide mental and/or substance use resources that are targeted toward specific populations.

HHS, Indian Health Service
This agency offers health services for Alaska Natives and American Indians.
The Reyes Building
801 Thompson Avenue, Suite 400
Rockville, MD 20852-1627
301-443-2038
http://www.ihs.gov

HHS, Office of Minority Health Resource Center
This national center develops health policies and programs to eliminate health disparities in racial and ethnic minority populations.
P.O. Box 37337
Washington, DC 20013-7337
800-444-6472
http://www.omhrc.gov

U.S. DEPARTMENT OF INTERIOR (DOI)
This Government agency offers resources on the prevention of substance use disorders for American Indians, Alaska Natives, and Island communities.
1849 C Street NW
Washington, DC 20240
202-208-3100
http://www.doi.gov

DOI, Office of Alcohol and Substance Abuse Prevention
Bureau of Indian Affairs
This office in the DOI provides reservation-based substance use disorder prevention programs for American Indians.
1849 C Street NW
Washington, DC 20240
202-208-3710
http://www.bia.gov

SAMHSA, Native American Center for Excellence (NACE)
This SAMHSA initiative provides up-to-date information on American Indian and Alaska Native (AI/AN) substance use disorder prevention programs, practices, and policies. NACE also provides training and technical assistance support for urban and rural prevention programs serving AI/AN populations.
1395 Piccard Drive, Suite 100
Rockville, MD 20850
301-977-6553
http://nace.samhsa.gov

Education

These agencies seek to increase understanding of mental and/or substance use disorders through research and programming.

HHS, CDC
For a full description, refer to General Information About Mental and/or Substance Use Disorders.

HHS, NIH
National Library of Medicine (NLM)
This library contains extensive substance use disorder research.
8600 Rockville Pike
Bethesda, MD 20894
888-346-3656
http://www.nlm.nih.gov

HHS, NIH, NIDA
Office of Science Policy and Communications
This Government office conducts science-based research on substance use disorders.
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.nida.nih.gov/about/organization/OSPC/OSPC.html

HHS, SAMHSA, Center for Substance Abuse Treatment, *Road to Recovery* Television and Radio Series
This SAMHSA-sponsored television and radio series, which discusses substance use and mental disorders, is produced monthly and available on the ***Recovery Month*** *website.*
http://www.recoverymonth.gov/Multimedia.aspx

Justice System

These government agencies offer resources to individuals in the justice system, their families, and those working in the justice system.

U.S. DEPARTMENT OF JUSTICE (DOJ)
This Federal government agency enforces the law and defends the interests of the United States according to the law, including drug enforcement.
950 Pennsylvania Avenue NW
Washington, DC 20530-0001
202-514-2000
http://www.usdoj.gov

HHS, Office of Civil Rights (OCR)
As the Department's civil rights and health privacy rights law enforcement agency, OCR investigates complaints, enforces rights, and promulgates regulations, develops policy, and provides technical assistance and public education to ensure understanding of and compliance with non-discrimination and health information privacy laws.
200 Independence Avenue SW
Washington, DC 20201
http://www.hhs.gov/ocr

DOJ, Americans with Disabilities Act (ADA) Information and Technical Assistance
This Federal department provides information about the Americans with Disabilities Act (ADA) through a toll-free ADA Information Line and a website. It permits businesses, States, local governments, and others to call and ask questions about general or specific ADA issues.
U.S. Department of Justice, Civil Rights Division
Disability Rights Section – NYA
950 Pennsylvania Avenue NW
Washington, DC 20530
800-514-0301
800-514-0383 (TTY)
http://www.ada.gov

DOJ, Office of Justice Programs (OJP)
The substance abuse and crime section of this organization's website contains many resources, including training and technical assistance opportunities.
810 Seventh Street NW
Washington, DC 20531
202-307-0703
http://www.ojp.usdoj.gov/programs/substance.htm

DOJ, OJP
Bureau of Justice Assistance (BJA)
This bureau supports law enforcement, courts, corrections, treatment, victim services, technology, and prevention initiatives that strengthen the nation's criminal justice system. It provides leadership, services, and funding to America's communities.
810 Seventh Street NW, Fourth Floor
Washington, DC 20531
866-859-2687
202-616-6500
http://www.ojp.gov/BJA

DOJ, Bureau of Justice Assistance Clearinghouse
This Federal bureau offers community training and technical assistance to prevent crime, substance use disorders, and violence (reference and referral services for criminal justice professionals).
810 Seventh Street NW, Fourth Floor
Washington, DC 20531
800-851-3420
http://www.ojp.usdoj.gov/BJA

DOJ, OJP
Bureau of Justice Statistics (BJS)
The BJS works to collect, analyze, publish, and disseminate information on crime, criminal offenders, victims of crime, and the operation of justice systems at all levels of government. These data are critical to Federal, State, and local policymakers in combating crime and ensuring that justice is both efficient and evenhanded. It was first established on December 27, 1979, under the Justice Systems Improvement Act of 1979, Public Law 96-157 (the 1979 Amendment to the Omnibus Crime Control and Safe Streets Act of 1968, Public Law 90-351).
810 Seventh Street NW
Washington, DC 20531
202-307-0765
http://bjs.ojp.usdoj.gov

DOJ, Community Capacity Development Office
This multi-agency's strategy is to "weed out" violent crime, gang activity, and drug trafficking, and "seed" human services to the areas where these activities occur, encompassing prevention, intervention, treatment, and neighborhood revitalization.
810 Seventh Street NW
Washington, DC 20531
202-616-1152
http://www.ojp.usdoj.gov/ccdo

DOJ, Drug Court Planning Initiative
This initiative provides research, scholarship, and information for drug courts and other court-based intervention programs.
810 Seventh Street NW, Fourth Floor
Washington, DC 20531
202-616-6500
http://dcpi.ncjrs.gov/dcpi/dcpi.html

DOJ, Drug Enforcement Administration (DEA)
This Federal government agency enforces the Nation's controlled substances laws and regulations, works to reduce the availability of illegal drugs, and has a prevention arm devoted to reducing the demand for these drugs. The DEA contributes its "street-smart" perspective and skills to the field and helps to link law enforcement with other providers.
Office of Demand Reduction
2401 Jefferson Davis Highway
Alexandria, VA 22301
888-327-4236
http://www.dea.gov

DOJ, National Criminal Justice Reference Service
To support research, policy, and program development worldwide, this Federal organization provides criminal justice and substance use disorder information.
P.O. Box 6000
Rockville, MD 20849-6000
800-851-3420
301-519-5500
http://www.ncjrs.gov

DOJ, OJP
National Institute of Corrections (NIC)
The NIC provides training, technical assistance, information services, and policy/program development assistance to Federal, State, and local corrections agencies. This agency within the U.S. Department of Justice, Federal Bureau of Prisons is headed by a Director appointed by the U.S. Attorney General. A 16-member Advisory Board, also appointed by the Attorney General, was established by the enabling legislation (Public Law 93-415) to provide policy direction to the Institute.
320 First Street NW
Washington, DC 20534
800-995-6423
202-307-3106
http://nicic.gov

DOJ, OJP
National Institute of Justice (NIJ)
This organization is the research, development, and evaluation agency of the U.S. Department of Justice. It provides objective, independent, evidence-based knowledge and tools to meet the challenges of crime and justice, particularly at the State and local levels.
810 Seventh Street NW
Washington, DC 20531
202-307-2942
http://www.ojp.usdoj.gov/nij/about/welcome.htm

DOJ, OJP
Office of the Assistant Attorney General (OAAG)
This group is responsible for the overall management and oversight of OJP. This includes setting policy; ensuring that OJP policies and programs reflect the priorities of the President, the Attorney General, and Congress; and promoting coordination among the OJP offices and bureaus.
Office of Justice Programs
U.S. Department of Justice
810 Seventh Street NW
Washington, DC 20531
202-307-0703
http://www.ojp.usdoj.gov/about/offices/oaag.htm

DOJ, OJP
Office of Juvenile Justice and Delinquency Prevention (OJJDP)
This organization provides national leadership, coordination, and resources to prevent and respond to juvenile delinquency and victimization. OJJDP supports States and communities in developing and implementing effective and coordinated prevention and intervention programs. It also collaborates to improve the juvenile justice system so that it protects public safety, holds offenders accountable, and provides treatment and rehabilitative services tailored to the needs of juveniles and their families.
810 Seventh Street NW
Washington, DC 20531
202-307-5911
http://www.ojjdp.gov

DOJ, OJP
Office for Victims of Crime (OVC)
Established in 1988 through an amendment to the Victims of Crime Act (VOCA) of 1984, this group is charged by Congress with administering the Crime Victims Fund (the Fund). Through OVC, the Fund supports a broad array of programs and services that focus on helping victims in the immediate aftermath of crime and continuing to support them as they rebuild their lives. Millions of dollars are invested annually in victim compensation and assistance in every U.S. State and Territory, as well as for training, technical assistance, and other capacity-building programs designed to enhance service providers' ability to support victims of crime in communities across the Nation.
810 Seventh Street NW, Eighth Floor
Washington, DC 20531
202-307-5983
http://www.ojp.usdoj.gov/ovc/

DOJ, OJP
Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking Office (SMART)
This group was authorized by the Adam Walsh Child Protection and Safety Act of 2006 to administer the standards for the Sex Offender Registration and Notification Program. Under this program, SMART can administer grant programs relating to sex offender registration and notification. It also cooperates with and provides technical assistance to States, the District of Columbia, principle U.S. Territories, units of local government, tribal governments, and other public and private entities involved in activities related to sex offender registration or notification, or to other measures for the protection of children or other members of the public from sexual abuse or exploitation.
810 Seventh Street NW
Washington, DC 20531
202-514-4689
http://www.ojp.gov/smart

U.S. DEPARTMENT OF TRANSPORTATION (DOT)
National Highway Traffic Safety Administration (NHTSA)
The mission of this agency is to develop partnerships to cooperatively save lives, prevent injuries, and reduce traffic-related health care and economic costs resulting from impaired driving from using alcohol and other drugs.
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236
http://www.nhtsa.gov

DOT, NHTSA
Blood Alcohol Concentration, State, and Federal Law
This law states that it is illegal for drivers to operate motor vehicles when they have blood alcohol concentrations (BACs) at or above a specified level in the United States. The customary level in most States was .10 BAC for drivers age 21 and above until 1992, when NHTSA recommended in a report to Congress that all States lower the illegal level to .08 for all drivers 21 years of age and older. As of August 2005, all 50 States, the District of Columbia, and Puerto Rico have set .08 BAC as the maximum level for drivers.
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236
http://www.nhtsa.dot.gov/nhtsa/whatis/bb/2007/pages/NHTSAPerfMeas.htm

DOT, NHTSA
Stop Impaired Driving
This organization partners with criminal justice and community organizations to sponsor impaired driving campaigns such as You Drink & Drive, You Lose, Friends Don't Let Friends Drive Drunk, and Zero Tolerance Means Zero Chances. The Stop Impaired Drinking site includes program toolkits, success stories, and other resources.
1200 New Jersey Avenue SE
West Building
Washington, DC 20590
888-327-4236
http://www.stopimpaireddriving.org

Mental Health

These government agencies are dedicated to offering mental health services, as well as increasing education and awareness of mental disorders.

HHS, NIH
National Institute of Mental Health (NIMH)
This institute conducts research to reduce mental health problems and behavioral disorders in the United States.
6001 Executive Boulevard
Room 8184, MSC 9663
Bethesda, MD 20892-9663
866-615-NIMH (6464)
301-443-4513
http://www.nimh.nih.gov

HHS, SAMHSA
Center for Mental Health Services (CMHS)
This Federal center seeks to improve the availability and accessibility of high-quality community-based services for people with or at risk for mental health problems and their families. It collects, analyzes, and disseminates national data on mental health services designed to help inform future services policy and program decision-making.
P.O. Box 2345
Rockville, MD 20847
800-789-2647
240-276-1310
http://www.samhsa.gov/about/cmhs.aspx

HHS, SAMHSA, CMHS
Wellness Initiative
The Federal Government has spearheaded the SAMHSA 10x10 Wellness Campaign, launched in 2010, to promote the importance of addressing all parts of a person's life in hopes of increasing life expectancy for people with mental health problems by 10 years over the next 10 years.
http://www.10x10.samhsa.gov

HHS, SAMHSA, CMHS
National GAINS Center
This group has operated since 1995 as a national focus for the collection and dissemination of information about effective mental and substance use disorder services for people with co-occurring disorders in contact with the justice system. The TAPA Center for Jail Diversion and the Center for Evidence-Based Programs in the Justice System, funded by the Center for Mental Health Services (CMHS) in 2001 and 2004, respectively, comprise the National GAINS Center. The GAINS Center's primary focus is on expanding access to community-based services for adults diagnosed with co-occurring substance use and mental disorders at all points of contact with the justice system.
800-311-GAIN (4246)
http://gainscenter.samhsa.gov/html/about

HHS, SAMHSA, CMHS
Resource Center to Promote Acceptance, Dignity and Social Inclusion Associated with Mental Health (ADS Center)
This organization enhances acceptance and social inclusion by ensuring that people with mental health problems can live full, productive lives within communities without fear of prejudice and discrimination. It provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
http://www.stopstigma.samhsa.gov

HHS, SAMHSA, CMHS
Consumer Survivor Mental Health Information
CMHS supports the meaningful participation of mental health consumers/survivors in all aspects of the mental health system, including the planning, design, implementation, policy formulation, and evaluation of mental health services.
1 Choke Cherry Road, Suite 6-1069
Rockville, MD 20857
240-276-1330
http://www.samhsa.gov/consumersurvivor

HHS, SAMHSA, CMHS
Refugee Mental Health Program (RMHP)
This program originated in the Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) in 1980 in response to the arrival of nearly 125,000 Cubans on South Florida shores. Its mission is to provide mental health assessment, treatment, and consultation to Cuban and Haitian migrants and their providers.
1 Choke Cherry Road, Room 6-1099
Rockville, MD 20857
240-276-1845

HHS, SAMHSA, CMHS
Systems of Care
This website is devoted to providing information about the mental health of children, youth, and families. Systems of care is an approach to services that recognizes the importance of family, school, and community, and seeks to promote the full potential of every child and youth by addressing their physical, emotional, intellectual, cultural, and social needs.
1 Choke Cherry Road, Sixth Floor
Rockville, MD 20857
240-276-1980
http://partnersforrecovery.samhsa.gov/rosc.html

HHS, SAMHSA, CMHS
What a Difference a Friend Makes Campaign
SAMHSA launched the Mental Health Campaign for Mental Health Recovery to encourage, educate, and inspire people between the ages of 18 and 25 to support their friends who are experiencing mental health problems.
http://www.whatadifference.samhsa.gov

Military/Veterans

These government agencies offer mental and/or substance use disorder resources to active military and veterans, and their families.

U.S. DEPARTMENT OF DEFENSE (DOD)
This department provides a wide array of services to prevent substance use disorders, including worksite education, drug testing, early intervention, outpatient counseling, and inpatient treatment.
5111 Leesburg Pike
Skyline 5, Suite 810
Rockville, MD 22041
703-571-3343
http://www.defenselink.mil

DOD, Office of Assistant Secretary of Defense for Public Affairs
This public affairs office develops policies, plans, and programs in support of DOD objectives and operations.
1400 Defense, Pentagon, Room 3A-750
Washington, DC 20301-1400
703-428-0711
http://www.defenselink.mil/pubs/almanac/asdpa.html

Department of Defense Center of Excellence (DCoE)
This group assesses, validates, oversees, and facilitates prevention, resilience, identification, treatment, outreach, rehabilitation, and reintegration programs for psychological health (PH) and traumatic brain injury (TBI). It works to ensure the Department of Defense meets the needs of the Nation's military communities, warriors, and families.
2345 Crystal Drive
Crystal Park 4, Suite 120
Arlington, VA 22202
800-510-7897
http://www.dcoe.health.mil/About.aspx

DOD, United States Army
Army Center for Substance Abuse Programs (ACSAP)
This group supports combat readiness by providing program oversight, supervision, inspection, integration, technical assistance, and training development for the operation and management of all elements of the Army Substance Abuse Program.
4501 Ford Avenue, Suite 320
Alexandria, VA 22302
703-681-5583
http://www.acsap.army.mil

DOD, United States Army
Army Medical Surveillance Activity (AMSA)
This division of the army is the only organization that performs comprehensive medical surveillance and routinely publishes background rates of diseases and injuries for the army population.
Army Medical Surveillance Activity
2900 Linden Lane, Suite 200
Silver Spring, MD 20910
301-319-3240
http://www.afhsc.army.mil/home

DOD, United States Marine Corps
Marine Corps Community Services (MCCS)
This group seeks to provide the Marine Corps with plans, policies, and resources to improve and sustain the capabilities of commanders. Its goal is to prevent problems that detract from unit performance and readiness.
Personal and Family Readiness Division
3280 Russell Road
Quantico, VA 22134
703-784-9454
http://www.usmc-mccs.org

DOD, United States Navy
National Naval Medical Center's Substance Abuse and Rehabilitation Program (SARP)
This program's mission is to improve operational readiness, promote healthy lifestyles, and treat problems from substance use disorders. Substance-related problems are identified and treated by a team of specialists. The program is designed to meet the individual needs of active-duty personnel, family members, and retirees.
8901 Rockville Pike
Bethesda, MD 20889
301-295-4611
http://www.bethesda.med.navy.mil

DOD, United States Navy
Navy Alcohol & Drug Abuse Prevention Program (NADAP)
This group's mission is to support the Navy's readiness by fighting substance use. It offers information and assistance to support individual and command alcohol and drug use prevention efforts.
620 John Paul Jones Circle, Suite 1100
Portsmouth, VA 23708-2103
757-953-0700
http://www.npc.navy.mil/CommandSupport/NADAP

U.S. DEPARTMENT OF VETERANS AFFAIRS (VA)
This government agency provides benefits and services to people who are veterans, family members, or survivors of veterans.
810 Vermont Avenue NW
Washington, DC 20420
800-827-1000
http://www.va.gov

VA, Center for Post-Traumatic Stress Disorder (PTSD)
This center advances the clinical care and social welfare of U.S. veterans through research, education, and training on PTSD and stress-related disorders.
802-296-6300
http://www.ptsd.va.gov

VA, Suicide Prevention Hotline
This helpline provides veterans in emotional crisis with round-the-clock access to trained professionals.
800-273-TALK (8255)
http://www.suicidepreventionlifeline.org

Prevention

These government agencies emphasize prevention through public awareness and education campaigns.

DOJ, DEA
"Get it Straight! The Facts About Drugs"
For a full description, refer to Schools/Youth under Federal Agencies.

DOJ, DEA
Just Think Twice
This website focuses on demand reduction and street-smart prevention for teenagers, aiming to educate teens about the realities of drug use.
http://www.justthinktwice.com

EOP, ONDCP
Above the Influence
This campaign helps teens become more aware of the influences around them and encourages them to stay above the influence of peer pressure.
http://www.abovetheinfluence.com

EOP, ONDCP
National Youth Anti-Drug Media Campaign
A comprehensive advertising and public relations program, this campaign offers critical drug information for teens and tips for parents on keeping their kids healthy and drug-free.
http://www.mediacampaign.org

Fetal Alcohol Spectrum Disorders (FASD) Center for Excellence
The mission of this center is to facilitate the development and improvement of prevention, treatment, and care systems in the United States by providing national leadership and facilitating collaboration in the field. CSAT and CMHS are SAMHSA's lead agencies for this initiative.
http://www.fascenter.samhsa.gov

Foundations of Prevention Online
This online course on substance abuse prevention consists of eight instructional units broken up into separate learning modules. The course is self-paced and available 24 hours a day. Tests are scored immediately, so users know how well they are doing and when they need to review.
https://preventionplatform.samhsa.gov/fop/index.cfm?CFID=172156&CFTOKEN=25512330

HHS, NIH, NIAAA
National Advisory Council on Alcohol Abuse and Alcohol
Prevention Task Force on College Drinking
This task force is a leader in the national effort to reduce alcohol-related problems. In addition to conducting and supporting research in a wide range of scientific areas, the Institute translates and disseminates information to health care providers, researchers, policymakers, and the public. Online information for the general public is available in English and Spanish. Topics include "Beyond Hangovers: Understanding alcohol's impact on your health"; "A Family History of Alcoholism-Are you at risk?"; "Alcohol: A woman's health issue"; "Make a Difference: Talk to your child about alcohol-Parent's booklet"; and "Tips for Cutting Down on Drinking."
5635 Fishers Lane, MSC 9304
Bethesda, MD 20892-9304
301-443-3860
http://www.collegedrinkingprevention.gov

HHS, NIH, NIDA
Prevention Research
This institute supports most of the world's research on the health aspects of drug use and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.nida.nih.gov/drugpages/prevention.html

HHS, Office of Disease Prevention and Health
HP2010 – Healthy People 2010 (and beyond)
This report is published by the Office of Disease Prevention and Health Promotion (ODPHP), HHS, and states two overall goals: to increase quality and years of healthy life and to eliminate health disparities. These are supported by 467 objectives organized within 28 main focus areas, each identifying an overall goal.
http://www.healthypeople.gov

HHS, SAMHSA
Center for Substance Abuse Prevention (CSAP)
The mission of this center is to bring effective substance use prevention to every community nationwide. Its discretionary grant programs—whether focusing on preschool-age children and high-risk youth or on community-dwelling older Americans—target States, communities, organizations, and families to promote resiliency, promote protective factors, and reduce risk factors for substance use.
1 Choke Cherry Road
Rockville, MD 20857
240-276-2420
http://www.samhsa.gov/about/csap.aspx

HHS, SAMHSA, CSAP
A Family Guide to Keeping Youth Mentally Healthy & Drug Free
This website serves as a family guide to keep youth mentally healthy and drug free.
1 Choke Cherry Road
Rockville, MD 20857
240-276-2548
http://www.family.samhsa.gov

HHS, SAMHSA, CSAP
Building Blocks for a Healthy Future
This initiative is an early childhood substance use prevention program that educates parents and caregivers about the basics of prevention to promote a healthy lifestyle.
1 Choke Cherry Road
Rockville, MD 20857
800-694-4747, ext. 4820
http://bblocks.samhsa.gov

HHS, SAMHSA, CSAP
National Centers for the Application of Prevention Technologies (CAPTs)
CSAP's national CAPT website provides links to each of the individual centers that make up the system: Northeast, Central, Western, Southeast, and Southwest.
http://captus.samhsa.gov

HHS, SAMHSA, CSAP
Prevention Pathways
This website provides information on prevention programs, program implementation, evaluation technical assistance, online courses, and a wealth of other prevention resources.
http://pathwayscourses.samhsa.gov

HHS, SAMHSA, CSAP
Prevention Platform
This is an online resource for substance use prevention offered by SAMHSA's Center for Substance Abuse Prevention (CSAP).
https://preventionplatform.samhsa.gov

HHS, SAMHSA, CSAP
Reach out Now National Teach-In
Too Smart To Start
This is an underage alcohol use prevention initiative for parents, caregivers, and their 9- to 13-year-old children.
1 Choke Cherry Road
Rockville, MD 20857
240-747-4980
http://www.toosmarttostart.samhsa.gov

HHS, SAMHSA, CSAP
Stop Underage Drinking Portal of Federal Resources
This website is a comprehensive portal of Federal resources for information on underage drinking and ideas for combating this issue. The Consolidated Appropriations Act of 2004 directed the Secretary of Health and Human Services to establish the Interagency Coordinating Committee on the Prevention of Underage Drinking (ICCPUD) and to issue an annual report summarizing all Federal agency activities related to preventing underage alcohol use.
1 Choke Cherry Road
Rockville, MD 20857
240-747-4980
http://www.stopalcoholabuse.gov

HHS, SAMHSA, CSAP
Talk Early. Talk Often. Get Others Involved.
This is a public education resource developed by HHS in support of the Surgeon General's Call to Action to parents about how they can help reduce their child's risk of becoming involved with alcohol. The main focus is to provide parents with information and tools to help them have open and ongoing conversations with their preteen and teen children about the dangers of underage alcohol use.
http://www.underagedrinking.samhsa.gov

HHS, SAMHSA, CSAP
National Registry of Evidence-based Programs and Practices (NREPP)
This is a searchable database of interventions for the prevention and treatment of mental and substance use disorders. NREPP publishes intervention summaries on its website for every intervention it reviews.
http://www.nrepp.samhsa.gov

Schools/Youth

These government agencies offer mental and/or substance use disorder prevention, treatment, and recovery resources targeted toward youth, parents, and educators.

U.S. DEPARTMENT OF AGRICULTURE (USDA), 4-H
Healthy lifestyle education and activities for youth are presented through a program managed nationally by the families, 4-H, and Education and Extension Service of the U.S. Department of Agriculture.
1400 Independence Avenue SW, STOP 2225
Washington, DC 20250-2201
202-401-4114
http://www.national4-hheadquarters.gov

U.S. DEPARTMENT OF EDUCATION (ED)
This department makes information available to students, parents, teachers, and administrators, including grants for anti-alcohol and drug programs.
400 Maryland Avenue SW, 7E-247
Washington, DC 20202-6123
800-872-5327
http://www.ed.gov

ED, Higher Education Center for Alcohol, Drug Abuse, and Violence Prevention (HEC)
Funded by ED, this group provides support to all institutions of higher education in their efforts to address substance use. The HEC provides technical assistance, develops publications, and conducts training workshops.
http://www.higheredcenter.org

ED, Office of Safe and Drug-Free Schools
This office provides information on drug-free school programs and activities.
400 Maryland Avenue SW
Washington, DC 20202-6123
202-260-3954
http://www2.ed.gov/about/offices/list/osdfs/index.html

DOJ, DEA
Get Smart About Drugs
This DEA program is a resource for parents about how and why teens abuse prescription drugs.
2401 Jefferson Davis Highway
Alexandria, VA 22301
202-307-1000
http://www.getsmartaboutdrugs.com

HHS, NIH, NIAAA
College Drinking – Changing the Culture
This is a one-stop resource for comprehensive research-based information on issues related to alcohol abuse and binge drinking among college students.
5635 Fishers Lane, MSC 9304
Bethesda, Maryland 20892-9304
301-443-3860
http://www.collegedrinkingprevention.gov

HHS, NIH, NIDA
Heads Up Website
Through a continuing partnership, NIDA and Scholastic, Inc., the global children's publishing and media company, distributes information on the health effects of drugs to students and teachers in grades 5 through 10 nationwide through a program called "Heads Up: Real News About Drugs and Your Body."
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.scholastic.com/headsup

HHS, NIH, NIDA
NIDA for Teens
This website educates adolescents ages 11 through 15 (as well as their parents and teachers) about the science behind drug abuse.
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.teens.drugabuse.gov

HHS, NIH, NIDA
NIDA Goes Back to School Website
This website is a source of free information about the latest science-based drug abuse publications and teaching materials. The site is targeted toward teachers and parents.
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.backtoschool.drugabuse.gov

HHS, SAMHSA, CSAP
Safe Schools/Health Students (SS/HS)
A Comprehensive Approach to Youth Violence Prevention
This initiative is a unique Federal grant-making program designed to prevent violence and substance abuse among our Nation's youth, schools, and communities.
202-260-3954
http://www.sshs.samhsa.gov/default.aspx

HHS, SAMHSA, CSAP
Stop Underage Drinking Portal of Federal Resources
For a full description, refer to Prevention under Federal Agencies.

HHS, SAMHSA, CSAP
Talk Early. Talk Often. Get Others Involved.
For a full description, refer to Prevention under Federal Agencies.

National Institute on Disability and Rehabilitation Research (NIDRR)
This institute provides leadership and support for a comprehensive program of research related to the rehabilitation of individuals with disabilities. All of its programmatic efforts are aimed at improving the lives of individuals with disabilities from birth through adulthood.
400 Maryland Avenue SW
Washington, DC 20202
800-872-5327
http://www2.ed.gov/about/offices/list/osers/nidrr/index.html

Reclaiming Futures
This initiative created by the Robert Wood Johnson Foundation (RWJF), housed in the Regional Research Institute of the School of Social Work at Portland State University, offers a new approach to helping teenagers caught in the cycle of drugs, alcohol, and crime. In 29 communities across the Nation, the program has received investments to spread its model from RWJF, the Office of Juvenile Justice and Delinquency Prevention, SAMHSA's Center for Substance Abuse Treatment, and the Kate B. Reynolds Charitable Trust.
Portland State University
P.O. Box 751
Portland, OR 97207-0751
503-725-8911
http://www.reclaimingfutures.org

Treatment/Recovery

These government agencies provide mental and/or substance use recovery and treatment research, educational materials, and service referrals.

HHS, NIH, NIDA
Treatment Research
This agency supports most of the world's research on the health aspects of drug abuse and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.
6001 Executive Boulevard
Room 5213, MSC 9561
Bethesda, MD 20892-9561
301-443-1124
http://www.drugabuse.gov/drugpages/treatment.html

HHS, SAMHSA
Co-Occurring Center for Excellence (COCE)
This organization provides the technical, informational, and training resources needed for the dissemination of knowledge and the adoption of evidence-based practices in systems and programs that serve people with co-occurring disorders.
http://coce.samhsa.gov

HHS, SAMHSA
SAMHSA's National Helpline
Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
800-662-HELP (800-662-4357)
800-487-4889 (TDD)
http://www.samhsa.gov/treatment/index.aspx

HHS, SAMHSA
Treatment Locator
This is a searchable directory that contains resources about mental health, substance use, and treatment programs.
http://www.samhsa.gov/treatment/index.aspx

HHS, SAMHSA
Center for Behavioral Health Statistics and Quality (CBHSQ)
This office (formerly the Office of Applied Studies) has primary responsibility for the collection, analysis, and dissemination of behavioral health data.
1 Choke Cherry Road, Room 7-1044
Rockville, MD 20857
240-276-1212
http://www.samhsa.gov/about/cbhsq.aspx

HHS, SAMHSA
Center for Substance Abuse Treatment (CSAT)
*As the sponsor of **Recovery Month**, this organization promotes the availability and quality of community-based substance use treatment services for individuals and families who need them. It supports policies and programs to broaden the range of evidence-based effective treatment services for people who abuse alcohol and drugs and that also address other addiction-related health and human services problems.*
1 Choke Cherry Road, Second Floor
Rockville, MD 20857
240-276-1660
http://www.samhsa.gov/about/csat.aspx

HHS, SAMHSA, CSAT
Division of Pharmacologic Therapies (DPT)
This division manages the day-to-day regulatory oversight activities necessary to implement the use of opioid agonist medications, such as methadone and buprenorphrine, approved by the U.S. Food and Drug Administration for addiction treatment.
1 Choke Cherry Road, Room 2-1075
Rockville, MD 20857
240-276-2700
http://www.dpt.samhsa.gov

HHS, SAMHSA, CSAT
Knowledge Application Program (KAP)
This program provides substance use treatment professionals and consumers with publications, online education, and other resources that contain information on best treatment practices.
JBS International, Inc.
5515 Security Lane, Suite 800
North Bethesda, MD 20852
http://kap.samhsa.gov

HHS, SAMHSA, CSAT
Partners for Recovery Program
This program is dedicated to the advancement of prevention, treatment, and recovery from mental and/or substance use disorders.
240-276-1691
http://www.pfr.samhsa.gov

HHS, SAMHSA, CSAT
The Recovery Community Services Program (RCSP)
This grant program awards funding to peer-to-peer recovery support services that help people initiate and/or sustain recovery from alcohol and drug use disorders. Some projects also offer support to family members of people needing, seeking, or in recovery.
1 Choke Cherry Road, Room 5-1124
Rockville, MD 20857
240-276-1566

Shared Decision Making
This is an interactive and collaborative process between individuals and their health care providers that is used to make health care decisions pertinent to an individual's personal recovery. This approach is consistent with the values of choice, self-determination, and empowerment and provides a means of enhancing consumer involvement in mental health care, which has recognized benefits for positive treatment outcomes.
http://www.samhsa.gov/ConsumerSurvivor/shared.asp

Workplace

These government agencies provide resources to address mental and/or substance use issues in the workplace.

HHS, SAMHSA, CSAP
Workplace Resource Center Helpline
This helpline supplies centralized access to information about drug-free workplaces and related topics.
1 Choke Cherry Road
Rockville, MD 20857
800-WORKPLACE (800-967-5752)
240-276-2600
http://www.drugfreeworkplace.gov

U.S. DEPARTMENT OF LABOR (DOL)
This department provides information for U.S. job seekers, wage earners, and retirees, offering information about workplace rules and regulations.
200 Constitution Avenue NW
Washington, DC 20210
866-4-USA-DOL (866-487-2365)
http://www.dol.gov

DOL, Office on Disability Employment Policy (ODEP)
This office works closely with the Departments of Defense and Veterans Affairs, as well as the DOL's Veterans Office, to address the provision of personal recovery and employment assistance to our Nation's disabled service members, including those coming back from Iraq and Afghanistan.
Frances Perkins Building
200 Constitution Avenue NW
Washington, DC 20210
http://www.dol.gov/odep

DOL, ODEP
America's Heroes at Work
This is a DOL project that addresses the employment challenges of returning service members living with traumatic brain injury (TBI) and/or post-traumatic stress disorder (PTSD). Designed for employers and the workforce development system, the website offers information and tools to help returning service members affected by TBI and/or PTSD succeed in the workplace—particularly service members returning from Iraq and Afghanistan.
866-4-USA-DOL (866-487-2365)
http://www.americasheroesatwork.gov

DOL, DisabilityInfo.gov
This comprehensive Federal website provides disability-related Government resources.
http://www.disabilityinfo.gov

DOL, Drug-Free Workplace Advisor
This tool provides information to businesses about how to establish and maintain an alcohol- and drug-free workplace. It also provides information about the Drug-Free Workplace Act of 1988, based on the Office of Management and Budget's (OMB) Government-wide non-regulatory guidance.
Frances Perkins Building
200 Constitution Avenue NW, Room S-2312
Washington, DC 20210
866-487-2365
http://www.dol.gov/elaws/drugfree.htm

DOL, Substance Abuse Information Database
This interactive database provides a one-stop source of information with summaries and full texts of materials relating to workplace substance use issues. Employers can draw on articles from experts as well as success stories from a variety of industries to assist them in establishing and maintaining a workplace drug-free program.
200 Constitution Avenue NW, Room S-2312
Washington, DC 20210
866-487-2365
http://www.dol.gov/asp/programs/drugs/said

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION (EEOC)
Information for small business employers about EEOC-enforced laws and processes is available through the commission.
U.S. Equal Employment Opportunity Commission
131 M Street NE
Washington, DC 20507
800-669-4000
http://www.eeoc.gov

U.S. NATIONAL LABOR RELATIONS BOARD (NLRB)
This Federal agency administers the National Labor Relations Act by conducting elections to determine whether or not employees want union representation, as well as investigating and remedying unfair labor practices by employers and unions.
1099 14th Street NW
Washington, DC 20570-0001
866-667-NLRB (866-667-6572)
866-315-NLRB (866-315-6572) (TTY)
http://www.nlrb.gov

U.S. SMALL BUSINESS ADMINISTRATION (SBA)
Grantees of the Paul D. Coverdell Drug Free Workplace Program assist small businesses with the implementation of a drug-free workplace program by providing financial, technical, and management assistance, including information about grants/loans and employee assistance programs.
409 Third Street SW
Washington, DC 20416
800-827-5722
http://www.sba.gov

U.S. SBA, U.S. Business Advisor
The organization gives access to Federal Government information, services, and transactions.
http://www.business.gov

OTHER RESOURCES

Culture-Specific Resources

These organizations provide mental and/or substance use support services geared toward specific ethnic groups.

Arab and Middle East Resources Center (AMERC)
This nonprofit organization was founded to provide inter-culturally sensitive services to raise awareness about substance use and mental disorders. This includes public awareness and recovery support. AMERC is a member of Michigan Community Coalition for Change (MC3) and its mission is building bridges for recovery and well-being.
313-766-8712

National Alliance of Multi-Ethnic Behavioral Health Association (NAMBHA)
This 501(c)(3) organization is composed of a myriad of diverse associations interested in the elimination of disparities in mental and behavioral health and improving the well-being of racial/ethnic children, adults, families, and communities.
3 Bethesda Metro Center
Bethesda, MD 20814
301-941-1834
http://www.nambha.org

National Minority AIDS Council
The Council supplies resources for minorities with AIDS.
1931 13th Street NW
Washington, DC 20009-4432
202-483-6622
http://www.nmac.org

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)
For a full description, refer to Prevention.

African-American

These organizations provide prevention, treatment, and recovery resources targeted toward African-American audiences.

Association of Black Psychologists
This association addresses issues facing black psychologists and the black community.
P.O. Box 55999
Washington, DC 20040-5999
202-722-0808
http://www.abpsi.org

Black Administrators in Child Welfare, Inc.
This association provides help for African-American children and their families in the child welfare system.
900 Second Street NE, Suite 217
Washington, DC 20002
202-783-3714
http://www.blackadministrators.org

GROUP Ministries, Inc.
For a full description, refer to Recovery Support Groups.

National Association for Equal Opportunity in Higher Education
This association offers programs and services for African-American college students and college campuses.
209 Third Street SE
Washington, DC 20003
202-552-3300
http://www.nafeo.org

National Association of African Americans for Positive Imagery
This campaign includes alcohol and tobacco control to promote positive community and self images and foster environments free of health disparities.
1231 North Broad Street
Philadelphia, PA 19122
215-235-6488
http://www.naaapi.org

National Association of Black Social Workers
The membership of this association includes African Americans working in social services.
2305 Martin Luther King Avenue SE
Washington, DC 20020
202-678-4570
http://www.nabsw.org

National Black Alcoholism and Addiction Council
This group provides programs, education, and training for the prevention and treatment of substance use disorders in the African-American community.
1500 Golden Valley Road
Minneapolis, MN 55411
877-NBACORG (622-2674)
407-532-2747
http://www.nbacinc.org

National Black Child Development Institute (NBCDI)
The NBCDI provides and supports programs, workshops, and resources for African-American children, their parents, and communities in early health education, elementary and secondary health education, child welfare, and parenting.
1313 L Street NW, Suite 110
Washington, DC 20005-4110
800-556-2234
http://www.nbcdi.org

National Council of Negro Women, Inc.
This organization offers information about issues affecting African-American women and their families.
633 Pennsylvania Avenue NW
Washington, DC 20004
202-737-0120
http://www.ncnw.org

National Medical Association (NMA)
This association serves as the collective voice of African-American physicians and a force for parity and justice in medicine and the elimination of disparities in health.
1012 10th Street NW
Washington, DC 20001
202-347-1895
http://www.nmanet.org

Turning Point
This organization has served the Minnesota community since 1976, providing African Americans with a holistic approach to counseling and treatment.
1500 Golden Valley Road
Minneapolis, MN 55411
612-520-4004
http://www.ourturningpoint.org

Asian-Pacific Islander

These organizations provide prevention, treatment, and recovery resources targeted toward Asian-Pacific Islander audiences.

Asian and Pacific Islander American Health Forum
This forum includes Asian and Pacific Islander communities in all health, political, social, and economic arenas.
1828 L Street NW, Suite 802
Washington, DC 20036
202-466-7772
http://www.apiahf.org

Asian Counseling and Referral Service, Inc.
For a full description, refer to Recovery Support Groups.

Japanese American Citizens League
This community organization provides assistance through programs that enhance the cultural preservation of the Japanese-American community and challenge social injustice wherever it may occur.
San Francisco Office
1765 Sutter Street
San Francisco, CA 94115
415-921-5225

DC Office
1850 M Street NW, Suite 1100
Washington, DC 20036
202-223-1240
http://www.jacl.org

Korean American Coalition
This group holds one strong voice for the Korean-American community by bringing people together to build a better community for all through education, service, and advocacy.
1001 Connecticut Avenue NW, Suite 730
Washington, DC 20036
202-296-9560
http://www.kacdc.org

National Asian American Pacific Islander Mental Health Association
This association aids the mental well-being of Asian Americans and Pacific Islanders when dealing with problems including substance use.
1215 19th Street, Suite A
Denver, CO 80202
303-298-7910
http://www.naapimha.org

National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA)
This private, nonprofit membership organization involves service providers, families, and youth to promote health and social justice and address the alcohol, tobacco, and other drug issues of Asian and Pacific Islander populations.
340 East Second Street, Suite 409
Los Angeles, CA 90012
213-625-5795
http://www.napafasa.org

Organization of Chinese Americans
This organization serves as a resource for Chinese-American and Asian-American citizens and permanent residents to help them secure their rights through legislative and policy initiatives.
1322 18th Street NW
Washington, DC 20036-1803
202-223-5500
http://www.ocanational.org

Hispanic/Latino

These organizations provide prevention, treatment, and recovery resources targeted toward Hispanic/Latino audiences.

ASPIRA Association, Inc.
This association offers programs and activities dedicated to leadership development and education of Puerto Rican and other Latino youth.
1444 Eye Street NW, Suite 800
Washington, DC 20005
202-835-3600
http://www.aspira.org

Chicanos Por La Causa, Inc.
This nonprofit community development corporation offers social service programs and services throughout Arizona.
1112 East Buckeye Road
Phoenix, AZ 85034
602-257-0700
http://www.cplc.org

Latin American Youth Center
This center provides outpatient counseling services for Hispanic individuals, families, and groups.
1419 Columbia Road NW
Washington, DC 20009
202-319-2225
http://www.layc-dc.org

National Alliance for Hispanic Health
This alliance offers information on health issues that affect the Hispanic community.
1501 16th Street NW
Washington, DC 20036
202-387-5000
http://www.hispanichealth.org

National Hispanic Medical Association (NHMA)
This association conducts health and policy research and offers programs to improve the health of Hispanics and other underserved populations.
1411 K Street NW, Suite 1100
Washington, DC 20005
202-628-5895
http://www.nhmamd.org

National Latino Behavioral Health Association
The mission of this organization is to provide national leadership for the advancement of Latino behavioral health services.
1616 P Street NW, Suite 109
Washington, DC 20036
http://www.nlbha.org

National Latino Children's Institute (NLCI)
This national institute conducts research and presents educational materials, programs, and services focused on Latino children.
118 Broadway Street, Suite 615
San Antonio, TX 78205
210-228-9997
http://www.nlci.org

National Latino Council on Alcohol and Tobacco Prevention (NLCATP)
The Council prevents tobacco use and reduces alcohol use disorders in the Latino community through the dissemination of science-based research findings, community education, technical assistance, policy analysis, and advocacy.
250 Fifth Avenue, Suite 403
New York, NY 10001
http://www.nlcatp.org

Puerto Rican Organization for Community Education and Economic Development, Inc.
This organization addresses the social, health, and economic needs of Latino and non-Latino communities.
1126 Dickinson Street
Elizabeth, NJ 07201
908-351-7727
http://www.proceedinc.com

Native American

These organizations provide prevention, treatment, and recovery resources targeted toward Native American audiences.

American Indian Community House (AICH)
This organization provides health and social services for American Indians in New York City.
11 Broadway, Second Floor
New York, NY 10004-1303
212-598-0100
http://www.aich.org

National Congress of American Indians (NCAI)
This organization offers assistance for tribes, tribal leaders, and youth in the prevention of, treatment of, and recovery from substance use disorders among American-Indian and Alaskan-Native families and communities.
1516 P Street NW
Washington, DC 20005
202-466-7767
http://www.ncai.org

National Indian Child Welfare Association (NICWA)
This association is dedicated to the well-being of American Indian children and families.
5100 Southwest Macadam Avenue, Suite 300
Portland, OR 97239
503-222-4044
http://www.nicwa.org

National Indian Health Board (NIHB)
This organization provides health care research and services for tribes, area health boards, tribal organizations, Federal agencies, and private foundations.
926 Pennsylvania Avenue SE
Washington, DC 20003
202-507-4070
http://www.nihb.org

Pima Prevention Partnership
For full description, refer to Recovery Support Groups.

United National Indian Tribal Youth, Inc.
This organization develops initiatives to foster the spiritual, mental, physical, and social development of Native American youth.
500 North Broadway, Suite 10
Oklahoma City, OK 73102
405-236-2800
http://www.unityinc.org

White Bison, Inc.
This nonprofit organization disseminates culturally based principles, values, and teachings to support healthy community development and servant leadership, and to support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma. It offers learning resources to the Native American community nationwide on topics such as sobriety, recovery, prevention, and wellness/wellbriety.
701 North 20th Street
Colorado Springs, CO 80904
877-871-1495
719-548-1000
http://www.whitebison.org

Faith-Based Organizations

These mental and/or substance use organizations bring together individuals with similar religious backgrounds, and provide a faith-based component to behavioral health services.

Alcoholics Victorious
This is a Christian-oriented, 12-step support group for those recovering from alcohol or chemical dependency. It offers information and referrals, literature, phone support, conferences, support group meetings, and a newsletter.
4501 Troost Street
Kansas City, MO 64110-4127
816-561-0567
http://www.alcoholicsvictorious.org

Calix Society
This is a 12-step fellowship of Catholic alcoholics who help one another maintain sobriety through Alcoholics Anonymous. The group is concerned with total abstinence, spiritual development, and sanctification of the whole personality of each member.
3881 Highland Avenue, Suite 201
White Bear Lake, MN 55110
800-398-0524
651-773-3117
http://www.calixsociety.org

Catholic Charities, USA
This membership association provides vital social services to people in need, regardless of their religious, social, or economic backgrounds.
66 Canal Center Plaza, Suite 600
Alexandria, VA 22314
703-549-1390
http://www.catholiccharitiesusa.org

Celebrate Recovery®
This is a worldwide Christ-centered recovery ministry. By working the 12 steps, their Biblical principles, and the corresponding 8 Recovery Principles found in the Beatitudes, individuals find freedom from past hurts and harmful addictive and dysfunctional behaviors.
1 Saddleback Parkway
Lake Forest, CA 92630
949-609-8334
http://www.celebraterecovery.com

Church of Jesus Christ of Latter-Day Saints
This Mormon organization promotes strong family relationships.
2520 L Street NW, Second Floor
Washington, DC 20037
202-448-3333
http://www.lds.org

Clergy Recovery Network
This network mentors ministry professionals through personal crises and early recovery. It seeks to help clergy guide their ministries toward spiritual and organizational health before, during, and after a leadership crisis.
P.O. Box 52
Joplin, MT 59531
406-292-3322
http://www.clergyrecovery.com

Cyber Recovery Fellowship
For a full description, refer to Recovery Support Groups.

Faith Partners
This organization promotes the prevention of alcohol, tobacco, and other drug abuse. It provides tools, training, materials, and assistance to congregations in several States.
511 Cargill Drive
Spicewood, TX 78669
512-394-9101
http://www.faith-partners.org

Faith WORKS
This organization facilitates the involvement of faith-based communities in the implementation of welfare reform.
2825 West Street, #1
Redding, CA 96001
530-242-1492
http://www.faith-works.cc

Institute for Public Health Faith Collaborations
Rollins School of Public Health, Emory University
This institute promotes vital learning at the intersecting boundaries where faith and health overlap, merge, and emerge transformed.
1256 Briarcliff Road
Atlanta, GA 30306
404-727-5246
http://www.ihpnet.org

Intercongregational Alcoholism Program (ICAP)
This network is for recovering alcoholic women in religious orders. The group aims to help Roman Catholic women who are, or have been, members of religious orders who are in need due to alcoholism or chemical dependencies.
7777 Lake Street, Suite 115
River Forest, IL 60305-1734
708-488-9770

Jewish Alcoholics, Chemically Dependent Persons and Significant Others (JACS)
A Program of the Jewish Board of Family and Children Services (JBFCS)
This program's mission is to help both individuals and the Jewish community at large effectively treat and prevent addiction. JACS provides a supportive network of Jews who are successfully in recovery, as well as the communal professionals, clergy, and educators who help them. The organization is a resource center where individuals, families, groups, and community institutions can turn for helpful, comforting guidance.
135 West 50th Street, Sixth Floor
New York, NY 10020
212-632-4600
http://www.jbfcs.org/programs-services/jewish-community-services-2/jacs/

Jewish Big Brother and Big Sister League
This league is an outpatient treatment program for adolescents, adults, and families suffering from alcohol, drug, or other addictions.
5750 Park Heights Avenue
Baltimore, MD 21208
410-466-9200
http://www.jfs.org

Lutheran Services in America
This organization advocates for sound and compassionate public policies on behalf of Lutheran social ministry organizations and the people they serve.
700 Light Street
Baltimore, MD 21230-3850
800-664-3848
http://www.lutheranservices.org

Multifaith Works
For a full description, refer to Recovery Support Groups.

National Council of Churches
The council helps parents communicate with their children about alcohol, tobacco, and illegal drugs.
475 Riverside Drive, Suite 800
New York, NY 10115
212-870-2228
http://www.ncccusa.org

Odyssey Networks
This network is the Nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.
The Interchurch Center
475 Riverside Drive
New York, NY 10115
212-870-1030
http://www.odysseynetworks.org

Overcomers In Christ (OIC)
This recovery program deals with every aspect of addiction and dysfunction (spiritual, physical, mental, emotional, and social). Members overcome obstacles using Christ-centered motivations.
P.O. Box 34460
Omaha, NE 68134
402-573-0966
http://www.overcomersinchrist.org

Overcomers Outreach, Inc.
This group provides Christ-centered, 12-step support for people with any compulsive behavior, their families, and friends. It uses the 12 steps of Alcoholics Anonymous and applies them to the Scriptures.
12828 Acheson Drive
Whittier, CA 90601
800-310-3001
877-968-3726
http://www.overcomersoutreach.org

Pathways to Promise
This organization is an interfaith technical assistance and resource center that offers liturgical and educational materials, program models, and networking information to promote a caring ministry with people with mental illness and their families. These resources are used by people at all levels of faith group structures from local congregations to regional and national staff.
5400 Arsenal Street
St. Louis, MO 63139
http://www.pathways2promise.org

Presbyterians for Addiction Action (PAA)
Presbyterian Health, Education and Welfare Association
This association assists Presbyterians as they minister in an increasingly addictive society to restore people of the Presbyterian faith.
100 Witherspoon Street
Louisville, KY 40202
888-728-7228, ext. 5800
http://www.pcusa.org/phewa/paa.htm

Recovery Consultants of Atlanta, Inc. (RCA)
This is a nonprofit, faith-based organization founded by concerned, committed, and spiritually centered members of metro-Atlanta's recovery community. It collaborates with faith (primarily churches) and community-based organizations, develops peer-to-peer support services and programs, and works to build a network of recovering individuals.
3423 Covington Drive, Suite B
Decatur, GA 30032
404-289-0313
http://www.recoveryconsultants.org

Recovery Ministries of the Episcopal Church
This is a national membership organization that raises awareness throughout the church community about addictions and the hope of recovery from these illnesses.
2872 Hannon Hill Drive
Tallahassee, FL 32309
866-306-1542
http://www.episcopalrecovery.org

Reviving the Human Spirit: A Faith Community Initiative
Health Foundation of Greater Cincinnati
This independent foundation is dedicated to improving community health in Cincinnati and 20 surrounding counties.
Rookwood Tower
3805 Edwards Road, Suite 500
Cincinnati, OH 45209-1948
513-458-6640
http://www.asapcenter.org

Salvation Army
This organization provides a broad array of social services that include providing food for the hungry, relief for disaster victims, assistance for the disabled, outreach to the elderly and ill, clothing and shelter to the homeless, and opportunities for underprivileged children.
615 Slaters Lane
P.O. Box 269
Alexandria, VA 22313
703-684-5500
http://www.salvationarmyusa.org

Save Our Selves (SOS Clearinghouse)
This organization is dedicated to providing a path to sobriety, an alternative to those paths depending upon supernatural or religious beliefs.
4773 Hollywood Boulevard
Hollywood, CA 90027
323-666-4295
http://www.cfiwest.org/sos/index.htm

Seventh-Day Adventist Church
Through the Adventist Development and Relief Agency and other programs, this church operates youth camps, community service projects, family life counseling, and Health and Temperance Programs, which include substance use disorder prevention/ treatment and recovery options as a continuum.
12501 Old Columbia Pike
Silver Spring, MD 20904
301-680-6000
http://www.adventist.org

Shinnyo-en Foundation
This organization helps build more caring communities by supporting educational programs that engage and inspire young people in meaningful acts of service. The foundation was established in 1994 by Shinnyo-en, a lay Buddhist order whose members strive to live with utmost sincerity and respect for others.
201 Mission Street, Suite 2450
San Francisco, CA 94105
415-777-1977
http://www.sef.org

St. Paul's Episcopal Church
This church has hosted 12-step programs and other affiliate programs for more than 15 years.
221 34th Street
Newport News, VA 23607
757-247-5086
http://www.stpaulsnn.org

The Springs Rescue Mission
The mission reaches the poor and needy of Colorado Springs by providing for their physical needs while ministering restoration to their spirit, soul, and body.
5 West Las Vegas Street
Colorado Springs, CO 80903
719-632-1822
http://www.springsrescuemission.org

Teen Challenge International
This network of 240 centers throughout the United States (and in 82 nations) provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems. The Teen Challenge Training Centers are 8- to 14-month comprehensive residential recovery programs that deal with drug and alcohol addictions, offered at minimal cost to participants.
5250 North Towne Centre Drive
Ozark, MO 65721
417-581-2181
http://www.teenchallengeusa.com

United Methodist Church – General Board of Church and Society of the United Methodist Church
This agency of the United Methodist Church offers faith-based substance use prevention advocacy training for local churches, as well as faith-based programs for churches to de-stigmatize addiction and provide church-wide training on substance use disorders.
100 Maryland Avenue NE
Washington, DC 20002
202-488-5600
http://www.umc-gbcs.org

Volunteers of America
This is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and health care, the group helps nearly 2 million people in over 400 communities.
1660 Duke Street
Alexandria, VA 22314
800-899-0089
703-341-5000
http://www.voa.org

Family and Social Services

These organizations offer resources for the entire family, in addition to supporting the child welfare system.

Alliance for Children and Families
This alliance provides services to the nonprofit child and family sectors and economic empowerment organizations.
11700 West Lake Park Drive
Milwaukee, WI 53244-3099
414-359-1040
http://www.alliance1.org

American Council for Drug Education (ACDE)
For a full description, refer to Prevention.

Elks Drug Awareness Resource Center
This program is the largest volunteer drug awareness program in the country. It is committed to eliminating the use of illegal drugs by all members of its society.
2750 North Lakeview Avenue
Chicago, IL 60614-1889
773-755-4700
http://www.elks.org

Child Welfare League of America (CWLA)
This membership organization has more than 1,100 public and private nonprofit agencies promoting the well-being of children, youth, and their families, and protecting every child from harm.
2345 Crystal Drive, Suite 250
Arlington, VA 22202
703-412-2400
http://www.cwla.org

Children's Defense Fund
This fund provides child welfare and health programs.
25 E Street NW
Washington, DC 20001
800-233-1200
202-628-8787
http://www.childrensdefense.org

Children's Health Initiative (CHI)
This program produces innovative digital media projects combining television and Internet technologies. CHI focuses on issues affecting the health of at-risk groups, such as those living in poverty; families that don't typically graduate from high school; teen parents; families with a high incidence of substance use; and adults who grew up in violent homes. CHI believes that the health of a community can only be measured by the health of its children. The initiative's purpose is to help families create and sustain stable, wholly healthy (physical, mental, emotional, and social well-being) homes for children.
P.O. Box 24123
New Orleans, LA 70184
985-892-7571
http://www.childrenshealthinitiative.net

Federation of Families for Children's Mental Health
This national parent-run organization focuses on the needs of children and youth with emotional, behavioral, or mental illness, and their families.
9605 Medical Center Drive
Rockville, MD 20850
240-403-1901
http://www.ffcmh.org

Intervention 911
This group works with families nationwide to bring loved ones suffering from addiction to treatment. The organization also gives family and friends the tools they need to heal during the recovery process.
170 North Vista Street
Los Angeles, CA 90036
866-888-4911
http://www.intervention911.com

Kennedy Krieger Family Center
This center provides mental health and support services for children, adolescents, and families who experience trauma through the effects of abuse, neglect, and environmental factors.
2901 East Biddle Street
Baltimore, MD 21213
443-923-5800
http://www.kennedykrieger.org/kki_cp.jsp?pid=1400

National Alliance to End Homelessness
This is a nationwide coalition of public, private, and nonprofit organizations devoted to ending homelessness.
1518 K Street NW, Suite 410
Washington, DC 20005
202-638-1526
http://www.endhomelessness.org

National Alliance on Mental Illness (NAMI)
For a full description, refer to Mental Health.

National Association for Children of Alcoholics (NACoA)
For a full description, refer to Recovery Support Groups.

National Association of Public Child Welfare Administrators (NAPCWA)
This association is devoted solely to representing administrators of State and local public child welfare agencies, bringing an informed view of the problems facing families today to the formulation of child welfare policy.
810 First Street NE, Suite 500
Washington, DC 20002
202-682-0100
http://www.aphsa.org/napcwa

North American Family Renewal Institute, Inc. (NAFRI)
This institute researches, treats, and educates on all forms of addictive behaviors, and provides therapist training, public policy awareness, and specialized networking weekends for individuals in the recovery community.
8503 Schultz Road
Clinton, MD 20735
301-877-1577

Sigma Gamma Rho Sorority, Inc.
This sorority offers social services for communities around the Nation.
1000 South Hill Drive, Suite 200
Cary, NC 27513
888-747-1922
http://www.sgrho1922.org

U.S. DEPARTMENT OF AGRICULTURE, 4-H
For a full description, refer to Schools/Youth under Federal Agencies.

University of Baltimore
Center for Families, Children and the Courts
This group's mission is to create, foster, and support a national movement to integrate communities, families, and the justice system to improve the lives of families and the health of the community.
1420 North Charles Street
Baltimore, MD 21201
410-837-5737
http://www.courts.ca.gov/programs.htm

Young Men's and Young Women's Hebrew Association/92nd Street Y
This organization is committed to sharing its programs with all New Yorkers regardless of economic circumstance. It provides financial assistance and an outreach program that brings the arts into the lives of economically disadvantaged local schoolchildren and keeps them off the streets.
1395 Lexington Avenue
New York, NY 10128
212-415-5500
http://www.92y.org

Young Men's Christian Association of the U.S.A. (YMCA)
The group provides health and social services for men, women, and children.
101 North Wacker Drive
Chicago, IL 60606
800-872-9622
http://www.ymca.net

Young Women's Christian Association of the U.S.A. (YWCA)
This organization offers health and social services for women and their families.
2025 M Street NW, Suite 550
Washington, DC 20036
800-YWCA-US1 (992-2871)
202-467-0801
http://www.ywca.org

YOUTH M.O.V.E.
This youth-led national organization is devoted to improving services and systems that support positive growth and development. It unites the voices of individuals who have experience in various systems, including mental health, juvenile justice, education, and child welfare.
9605 Medical Center Drive, Suite 280
Rockville, MD 20850
240-403-1901
http://www.youthmovenational.org

Health Care

These organizations work to increase access to health care services and provide support to provider organizations.

American Holistic Health Association (AHHA)
This association encourages physicians and practitioners to incorporate holistic principles into their practices and educate the public on the power of the holistic approach.
P.O. Box 17400
Anaheim, CA 92817
714-779-6152
http://www.ahha.org

DrugWatch
This comprehensive website database features extensive information about thousands of different medications and drugs currently on the market or previously available worldwide. By providing FDA alerts, drug interactions, and potential side effects, this site provides patients with valuable knowledge that could enhance their ability to voice concerns with their doctors and improve their quality of care.
800-452-0949
http://www.drugwatch.com

Families USA
This organization provides resources on access to high-quality, affordable health care as well as senior citizen issues.
1201 New York Avenue NW, Suite 1100
Washington, DC 20005
202-628-3030
http://www.familiesusa.org

George Washington University Ensuring Solutions to Alcohol Problems Initiative
This program works to increase access to treatment for individuals with alcohol problems by collaborating with policymakers, employers, and concerned citizens.
2021 K Street NW, Suite 800
Washington, DC 20006
202-296-6922
http://www.gwumc.edu/sphhs/institutescenters/ensuring_solutions_to_alcohol_problems.cfm

Haight Ashbury Free Clinics, Inc.
The mission of these clinics is to increase access to health care for all and improve the health and well-being of their clients. More than 34,000 individuals and their loved ones depend on the clinics every year to provide free, high-quality, demystified, and comprehensive health care that is culturally sensitive, nonjudgmental, and accessible to all in need.
P.O. Box 29917
San Francisco, CA 94129
415-746-1967
http://www.hafci.org

National Association of Community Health Centers (NACHC)
This association collaborates with community, migrant, and homeless health centers that provide health care to the poor and medically underserved.
7200 Wisconsin Avenue, Suite 210
Bethesda, MD 20814
301-347-0400
http://www.nachc.com

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)
This nonprofit membership organization is comprised of county/local behavioral health authorities who plan and deliver mental health, developmental disability, and substance use disorder services, as well as the State associations that represent their interests.
25 Massachusetts Avenue NW, Suite 500
Washington, DC 20001
202-661-8816
http://www.nacbhd.org

National Committee for Quality Assurance (NCQA)
This group provides information about the quality of the Nation's managed care plans.
1100 13th Street NW, Suite 1000
Washington, DC 20005
202-955-3500
http://www.ncqa.org

National Council on Patient Information and Education (NCPIE)
This multi-disciplinary coalition works together to stimulate and improve communication of information on safe and appropriate medicine use to consumers and health care professionals.
200-A Monroe Street, Suite 212
Rockville, MD 20850-4448
301-340-3940
http://www.talkaboutrx.org

National Health Law Program
This national program provides resources on health care for uninsured or underinsured low-income people.
1444 Eye Street NW, Suite 1105
Washington, DC 20005
202-289-7661
http://www.healthlaw.org

Health Consumer Alliance (HCA)
HCA is a partnership of consumer assistance programs operated by community-based legal sevices organizations. The Alliance's common mission is to help low-income people obtain essential healthcare.
2639 South La Cienega Boulevard
Los Angeles, CA 90034
310-204-4900
http://www.healthconsumer.org

National Minority AIDS Council
For a full description, refer to Culture Specific.

Justice/Legal System

These organizations provide support and resources for those involved in the criminal justice and legal systems.

American Bar Association (ABA)
Standing Committee on Substance Abuse
This committee promotes justice system reform that addresses problems associated with the illegal use of drugs and alcohol in this country. To carry out this mission, the Standing Committee collaborates with other ABA entities, Federal, State, and local public/private organizations, and State, local, and territorial bar associations.
740 15th Street NW
Washington, DC 20005-1019
202-662-1000
http://www.abanet.org/subabuse

American Correctional Association (ACA)
This organization provides resources for practitioners in the correctional profession and those interested in improving the justice system.
206 North Washington Street, Suite 200
Alexandria, VA 22314
800-ACA-JOIN (222-5646)
703-224-0000
http://www.aca.org

Bazelon Center
The Bazelon Center for Mental Health Law is a nonprofit organization devoted to improving the lives of people with mental illnesses through changes in policy and law.
1101 15th Street, NW, Suite 1212
Washington, DC 20005
202-467-5730
http://www.bazelon.org

Center for Community Alternatives: Recovery Network of New York
For full description, refer to Recovery Support Groups.

Center for Families, Children and the Courts
This center is dedicated to improving the quality of justice and services to meet the diverse needs of children, youth, families, and self-represented litigants in the California courts.
455 Golden Gate Avenue, Sixth Floor
San Francisco, CA 94102-3660
415-865-7739
http://www.courts.ca.gov

Center on Juvenile and Criminal Justice
This center focuses on reducing reliance on incarceration as a solution to social problems.
440 Ninth Street
San Francisco, CA 94103
415-621-5661
http://www.cjcj.org

DC Bar – Lawyers Assistance Program
Established in 1985, this is a free and confidential program assisting lawyers, judges, and law students who experience problems that interfere with their personal lives or their ability to serve as counsel or officers of the court.
1101 K Street NW, Suite 200
Washington, DC 20005
202-737-4700
http://www.dcbar.org/for_lawyers/bar_services/counseling/index.cfm

Drug Court Clearinghouse
This group provides technical assistance for drug court programs.
Justice Programs Office, School of Public Affairs,
American University, Brandywine Building
4400 Massachusetts Avenue NW, Suite 100
Washington, DC 20016-8159
202-885-2875
http://www1.spa.american.edu/justice/project.php?ID=1

International Community Corrections Association (ICCA)
To enhance the quality of services and supervision for offenders in community corrections programs, this association offers information, training, and other services.
8701 Georgia Avenue, Suite 402
Silver Spring, MD 20910
301-585-6090
http://www.iccaweb.org

The Legal Action Center (LAC)
This nonprofit law and policy organization fights discrimination against people with histories of substance use disorders, HIV/AIDS, or criminal records, and advocates for sound public policies in these areas.
225 Varick Street
New York, NY 10014
800-223-4044
212-243-1313
http://www.lac.org

National Association of Drug Court Professionals (NADCP)
This association seeks to reduce substance use, crime, and recidivism by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance, and mutual support to association members.
4900 Seminary Road, Suite 320
Alexandria, VA 22311
703-575-9400
http://www.nadcp.org

National Council of Juvenile and Family Court Judges
The council supplies publications and information about juvenile and family courts.
P.O. Box 8970
Reno, NV 89507
775-784-6012
http://www.ncjfcj.org

National Drug Court Institute (NDCI)
This institute promotes education, research, and scholarship for drug court and other court-based intervention programs.
4900 Seminary Road, Suite 320
Alexandria, VA 22311
703-575-9400
http://www.ndci.org

National Sheriffs' Association
This association offers crime prevention programs that help sheriffs better serve the people of their cities, counties, or jurisdictions.
1450 Duke Street
Alexandria, VA 22314-3490
800-424-7827
http://www.sheriffs.org

National Treatment Accountability for Safer Communities (TASC)
This membership organization represents individuals and programs dedicated to the professional delivery of treatment and case management services to populations with substance use disorders.
1025 Connecticut Avenue NW, Suite 605
Washington, DC 20036
202-293-8657
http://www.nationaltasc.org

The Sentencing Project
This project conducts research on sentencing and incarceration.
514 10th Street NW, Suite 1000
Washington, DC 20004
202-628-0871
http://www.sentencingproject.org

TASC, Inc. of Illinois
For a full description, refer to Recovery Support Groups.

Vera Institute of Justice, La Bodega de la Familia
This institute offers family- and community-based recovery services for people on parole or probation.
233 Broadway, 12th Floor
New York, NY 10279
212-334-1300
http://www.vera.org

Mental Health

These organizations provide mental health services and education, as well as work to increase awareness of mental health conditions.

American College of Mental Health Administration (ACMHA)
ACMHA is focused on equipping behavioral health leaders for a field that is rapidly changing in extraordinary times. The membership is a diverse working network of influential leaders and emerging leaders from across systems. Members are concerned with mental health and substance use conditions representing public and private administrators of services; national, State, and county government; professional organizations; managed behavioral health care organizations; research and academia; and consumer and family advocacy organizations.
7804 Loma del Norte Road NE
Albuquerque, NM 87109-5419
505-822-5038
http://www.acmha.org

Connecticut Department of Mental Health Addiction Services (DMHAS)
This organization promotes and administers comprehensive, recovery-oriented services in the areas of mental health treatment and substance use disorder prevention and treatment throughout Connecticut.
410 Capitol Avenue
P.O. Box 341431
Hartford, CT 06134
800-446-7348
860-418-7000
http://www.dmhas.state.ct.us

Depression and Bipolar Support Alliance (DBSA)
This group's mission is to provide hope, help, and support to improve the lives of people living with depression or bipolar disorder. The DBSA pursues and accomplishes this mission through peer-based, recovery-oriented, empowering services and resources when people want them, where they want them, and how they want them.
730 North Franklin Street, Suite 501
Chicago, IL 60654-7225
800-826-3632
http://www.dbsalliance.org

The Family Café
This organization brings together individuals with disabilities, as well as their families, with state agencies, nonprofit organizations and other service providers, so families can network, learn what services are available, and find out the best way to access those services.
1332 North Duval Street
Tallahassee, FL 32303
850-224-4670
http://familycafe.net

Mental Health America (MHA)
MHA is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With nearly 300 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.
2000 North Beauregard Street, Sixth Floor
Alexandria, VA 22311
800-969-6642
703-684-7722
http://www.mentalhealthamerica.net
http://www.mentalhealthamerica.net/go/recovery

Mental Health Self-Assessment
This site is dedicated to families and service members who need a private and confidential assessment for conditions such as depression, post-traumatic stress disorder, anxiety disorder, bipolar disorder, and alcohol abuse.
http://www.militarymentalhealth.org/Welcome.aspx

National Alliance on Mental Illness (NAMI)
This is a nonprofit support and advocacy organization of consumers, families, and friends of people with severe mental illnesses. NAMI works to achieve equitable services and treatment for more than 15 million Americans living with severe mental illnesses and their families.
3803 North Fairfax Drive, Suite 100
Arlington, VA 22203
703-524-7600
http://www.nami.org

National Association for Children of Alcoholics (NACoA)
For a full description, refer to Recovery Support Groups.

NACoA, Just 4 Kids
This resource is devoted to helping kids who are affected by substance use in their homes or families. The resource is sponsored by NACoA, a nonprofit membership and affiliate organization, which works on behalf of children of alcohol- and drug-dependent parents. NACoA's mission is to eliminate the adverse impact of alcohol and drug use on children and families by working to raise public awareness and provide leadership in public policy at the national, State, and local levels.
10920 Connecticut Avenue, Suite 1000
Kensington, MD 20895
301-468-0985
http://www.nacoa.org/kidspage.htm

The National Association of State Mental Health Program Directors (NASMHPD)
This association is the only member organization representing State executives responsible for the $36.7 billion public mental health service delivery system serving 6.4 million people annually in all 50 States, 4 Territories, and the District of Columbia. NASMHPD operates under a cooperative agreement with the National Governors Association.
66 Canal Center Plaza, Suite 302
Alexandria, VA 22314
703-739-9333
www.nasmhpd.org

National Association of School Psychologists (NASP)
For a full description, refer to Provider and Professional Organizations.

NASP, Ready to Learn, Empowered to Teach
This organization offers an education policy platform, "Ready to Learn, Empowered to Teach: Excellence in Education for the 21st Century," which outlines five principles necessary to ensure excellence in education by lowering barriers to learning and teaching.
4340 East West Highway, Suite 402
Bethesda, MD 20814
301-657-0270
http://www.nasponline.org/advocacy/readytolearn.aspx

National Coalition for Mental Health Recovery (NCMHR)
This coalition ensures that consumers/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the State and national levels, empowering people to recover and lead a full life in the community.
1101 15th Street NW, #1212
Washington, DC 20005
877-246-9058
http://www.ncmhr.org

National Consumer Supporter Technical Assistance Center at Mental Health America (MHA)
This technical assistance center at MHA strengthens mental health consumer organizations and provider agencies by providing technical assistance in the form of research, informational materials, and training.
2000 North Beauregard Street, Sixth Floor
Alexandria, VA 22311
866-439-9465
http://www.ncstac.org

National Empowerment Center (NEC)
NEC carries a message of recovery, empowerment, hope, and healing to people who have experienced mental health issues, trauma, and extreme states.
599 Canal Street
Lawrence, MA 01840
800-POWER2U (769-3728)
http://www.power2u.org

National Mental Health Consumers' Self-Help Clearinghouse
The clearinghouse works toward the development of the mental health consumer movement, which strives for dignity, respect, and opportunity for those with mental illnesses.
1211 Chestnut Street, Suite 1207
Philadelphia, PA 19107
215-751-1810
800-553-4539
http://www.mhselfhelp.org

New York City Department of Health and Mental Hygiene
Office of Consumer Affairs
This office responds directly to consumers' needs in three distinct disability areas: mental health, mental retardation/developmental disabilities, and chemical dependency. The office has a dual mission – to ensure that consumer voices and perspectives are heard and integrated at all levels, and to empower consumers through education and exposure to resources. It works towards incorporating recovery principles and practices into the City's mental health system, including the Division of Mental Hygiene.
93 Worth Street, Room 1205
New York, NY 10013
212-219-5393
http://www.nyc.gov/html/doh/html/dmh/dmh-oca.shtml

The Providence Center
This organization is the largest community mental health center in Rhode Island providing comprehensive services to adults, adolescents, and children experiencing mental health, substance use, emotional, and behavioral difficulties.
528 North Main Street
Providence, RI 02904
401-528-0123
http://www.providencecenter.org

The Star Center
This center provides support, technical assistance and resources to improve cultural competence and diversity in the context of mental health recovery and consumer self-help and self-empowerment.
3803 North Fairfax Drive, Suite 100
Arlington, VA 22203
866-537-STAR (7827)
http://www.consumerstar.org

State Consumer Networks
This group provides direct services, advocacy, and technical assistance to smaller, consumer-operated services that have emerged over the past 15 years. As States seek to include the "consumer voice" in systems transformation and to support consumer-operated services, the expertise, community-organizing, and advocacy skills offered by networks are assets to all stakeholders.
1000 Wilson Boulevard, Suite 1825
Arlington, VA 22209-3901
800-368-5777
http://psychservices.psychiatryonline.org/cgi/content/full/60/3/291

Suicide Prevention Resource Center
Education Development Center, Inc. (SPRC)
This center provides prevention support, training, and resources to assist organizations and individuals to develop suicide prevention programs, interventions, and policies, and to advance the National Strategy for Suicide Prevention.
55 Chapel Street
Newton, MA 02458
800-273-TALK (8255) (SAMHSA's Helpline)
877-438-7772
617-964-5448 (TTY)
http://www.sprc.org

Western Psychiatric Institute and Clinic
The institute provides behavioral health services for children, families, schools, and communities.
3811 O'Hara Street
Pittsburgh, PA 15213
412-624-1000
http://wpic.upmc.com/default.htm

Military/Veterans

These organizations offer support services to active military, veterans, and their families.

AMVETS
This organization provides support for veterans and the active military in procuring their earned entitlements. It also offers community services that enhance the quality of life for this Nation's citizens.
4647 Forbes Boulevard
Lanham, MD 20706-4380
877-726-8387
301-459-9600
http://www.amvets.org

Center for Veterans Issues, Inc. (CVI)
The organization supports the concerns of all veterans. The CVI provides information, resources, leadership training, technical assistance, organizational development and volunteer services coordination to Veteran Service Organizations. It also provides identification of funding and grant opportunities, along with staffing and housing support.
3312 West Wells Street
Milwaukee, WI 53208
414-345-3917
http://www.cvivet.org/index.html

Disabled American Veterans (DAV)
This organization is the official voice of America's service-connected disabled veterans—a strong, insistent voice that represents all of America's 2.1 million disabled veterans, their families, and survivors. Its nationwide network of services, which is free of charge to all veterans and members of their families, is completely supported by membership dues and contributions from the American public.
3725 Alexandria Pike
Cold Springs, KY 41076
877-426-2838
http://www.dav.org

Iraq & Afghanistan Veterans of America (IAVA)
This is an organization that addresses critical issues facing new veterans and their families.
292 Madison Avenue, 10th Floor
New York, NY 10017
212-982-9699
http://iava.org

Mental Health Self-Assessment
For a full description, refer to Mental Health.

National Coalition for Homeless Veterans (NCHV)
This is a 501(c)(3) nonprofit organization that serves as the resource and technical assistance center for a national network of community-based service providers and local, State, and Federal agencies. These groups provide emergency and supportive housing, food, health services, job training and placement assistance, and legal aid and case management support for hundreds of thousands of homeless veterans each year.
333 ½ Pennsylvania Avenue SE
Washington, DC 20003-1148
800-VET-HELP (838-4357)
http://www.nchv.org

National Veterans Foundation (NVF)
This group's mission is to serve the crisis management, information, and referral needs of all U.S. veterans and their families. It operates the Nation's only toll-free helpline for all veterans and their families.
9841 Airport Boulevard, Suite 512
Los Angeles, CA 90045
877-777-4443
http://www.nvf.org

New Directions
This is a long-term drug and alcohol treatment program that provides food, shelter, and rehabilitation to homeless veterans at four Los Angeles-area locations. An estimated 27,000 homeless veterans live in Los Angeles, which is home to the country's largest Veteran's Affairs hospital. Some suffer from both substance use and mental disorders.
11303 Wilshire Boulevard, VA Building 116
Los Angeles, CA 90073-1003
310-914-4045
http://www.newdirectionsinc.org

Swords to Plowshares
This group promotes and protects the rights of veterans through advocacy, public education, and partnerships with local, State, and national entities.
1060 Howard Street
San Francisco, CA 94103
415-252-4788
http://www.swords-to-plowshares.org

Vets4Vets
This is a national, nonprofit veteran organization that organizes peer support groups for Iraq- and Afghanistan-era veterans to help them feel good about themselves and heal from any negative aspects of service and war.
4192 East Boulder Springs Way
Tucson, AZ 85712
520-319-5500
http://www.vets4vets.us

Vet to Vet
This is an alliance of family members, professionals, and other mental health consumers who work together to improve and increase mental health services through community education and service.
203-623-0731
http://vet2vetusa.org

Veterans of Foreign Wars (VFW)
This organization's members mentor youth groups, help in community food kitchens, volunteer in blood drives, and visit hospitalized veterans. Other members help veterans file compensation claims or "voice their vote" with elected officials.
406 West 34th Street
Kansas City, MO 64111
816-756-3390
http://www.vfw.org

Policy

These organizations influence mental and/or substance use disorder policy initiatives and raise awareness of behavioral health issues.

Alliance for Recovery Advocates
This organization empowers people to become advocates for recovery.
6601 Grand Teton Plaza, Suite A
Madison, WI 53719
608-829-1032
http://www.waaoda.org/advocacy.html

American Council on Alcohol Problems
This federation of 37 State affiliates seeks long-range solutions to alcohol-related problems using educational and legislative approaches.
2376 Lakeside Drive
Birmingham, AL 35244
205-985-9062
http://sapacap.com

American Medical Association (AMA) Office of Alcohol and Other Drug Abuse
This collaboration of the AMA and The Robert Wood Johnson Foundation works to reduce underage alcohol use.
515 North State Street
Chicago, IL 60654
800-621-8335
312-464-5000
http://www.ama-assn.org/ama/pub/category/3337.html

American Public Human Services Association (APHSA)
This association develops, promotes, and implements public human service policies and practices that improve the health and well-being of families, children, and adults.
1133 19th Street NW, Suite 400
Washington, DC 20036
202-682-0100
http://www.aphsa.org/Home

Association of State and Territorial Health Officials
This association develops programs and policies for State health departments to promote health and prevent disease.
2231 Crystal Drive, Suite 450
Arlington, VA 22202
202-371-9090
http://www.astho.org

Capitol Decisions, Inc.
This full-service government relations and public affairs firm provides counsel in distinct issue areas, including State and local government, public works, health care, and public health.
101 Constitution Avenue NW, Suite 675 East
Washington, DC 20001
202-638-0326
http://www.capitoldecisions.com

Center for Alcohol and Drug Research and Education
This international nonprofit organization provides public information and technical assistance, guidance, information, and expert service to individuals, organizations, governmental agencies, and a variety of nonprofit organizations in the private sector to improve the quality of their response to substance use disorders.
6200 North Charles Street
Baltimore, MD 21212-1112
410-377-8992

Corporation for Supportive Housing (CSH)
This organization, established in 1991, advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.
50 Broadway, 17th Floor
New York, NY 10004
212-986-2966
http://www.csh.org

The Council of State Governments (CSG)
This council is our Nation's only organization serving all three branches of State government. The CSG is a region-based forum that fosters the exchange of insights and ideas to help State officials shape public policy.
2760 Research Park Drive
P.O. Box 11910
Lexington, KY 40578-1910
859-244-8000
http://www.csg.org

Drug Free America Foundation, Inc.
This drug prevention and policy organization is committed to developing, promoting, and sustaining global strategies, policies, and laws that will reduce illegal drug use, drug addiction, drug-related injury, and death. Drug Free America Foundation is a Non-Governmental Organization (NGO) in Special Consultative Status with the Economic and Social Council of the United Nations.
5999 Central Avenue, Suite 301
Saint Petersburg, FL 33710
727-828-0211
http://www.dfaf.org

Faces & Voices of Recovery
This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, as well as their families, friends, and allies, in campaigns to end discrimination and make recovery a reality for even more Americans.
1010 Vermont Avenue NW, Suite 618
Washington, DC 20005
202-737-0690
http://www.facesandvoicesofrecovery.org

Friends of SAMHSA
This organization engages in communication, education, and grassroots advocacy in an effort to increase awareness and advance the agenda of SAMHSA. This independent coalition is dedicated to bringing awareness to the important role that behavioral health plays in overall health. It believes that SAMHSA should be a major contributor to the formation of health policy and also seeks to work with SAMHSA's leadership to improve its dialogue with those in the field, so that in the end the consumer will benefit. This organization is not affiliated with SAMHSA.
P.O. Box 1315
Annandale, VA 22003
571-426-0297
http://friendsofsamhsa.goodbarry.com

Georgetown University Health Policy Institute
This is a multi-disciplinary group of faculty and staff dedicated to conducting research on key issues in health policy and health services research. Institute members are engaged in diverse projects focusing on issues relating to health care financing, the uninsured, Federal health insurance reforms, quality of care and outcomes research, mental health services research, and the impact of changes in the health care market on providers and patients.
P.O. Box 571444
3300 Whitehaven Street NW, Suite 5000
Washington, DC 20057-1485
202-687-0880
http://ihcrp.georgetown.edu

Georgetown University Health Policy Institute, Center on an Aging Society
The center is a nonpartisan public policy institute that fosters critical thinking about the implications of an aging society and studies the impact of demographic changes on public and private institutions and families of all ages.
P.O. Box 571444
3300 Whitehaven Street NW, Suite 5000
Washington, DC 20057
202-687-0880
http://ihcrp.georgetown.edu/agingsociety

Health Matrix, Inc.
This organization develops communications programs that inform the debate on key issues in science, policy, and health care.
7918 Jones Branch Drive, Suite 600
Mclean, VA 22102
703-918-4930
http://www.healthmatrixinc.com

Kaiser Family Foundation
This organization is a nonprofit, private operating foundation focusing on the major health care issues facing the Nation. The foundation is an independent voice and source of facts and analysis for policymakers, the media, the health care community, and the general public.
2400 Sand Hill Road
Menlo Park, CA 94025
650-854-9400
http://www.kff.org

National Association of Counties
This association offers national legislative, research, technical, and public affairs assistance for U.S. counties.
25 Massachusetts Avenue NW, Suite 500
Washington, DC 20001
202-393-6226
http://www.naco.org

National Civic League (NCL)
This is a nonprofit, nonpartisan membership organization dedicated to strengthening citizen democracy by transforming democratic institutions. It fosters innovative community building and political reform, assists local governments, and recognizes collaborative community achievements.
1889 York Street
Denver, CO 80206
303-571-4343
http://www.ncl.org

National Commission Against Drunk Driving (NCADD)
By uniting a broad-based coalition of public and private sector organizations and others, the commission works to reduce impaired driving and its tragic consequences.
8403 Colesville Road, Suite 370
Silver Spring, MD 20910
240-247-6004

National Conference of State Legislatures (NCSL)
This is a bipartisan organization that serves the legislators and staffs of the Nation's 50 States, its commonwealths, and Territories. It provides research, technical assistance, and opportunities for policymakers to exchange ideas on the most pressing State issues.
444 North Capitol Street NW, Suite 515
Washington, DC 20001
202-624-5400
http://www.ncsl.org

National Governors Association (NGA) Center for Best Practices
This bipartisan nonprofit association represents the collective voice of the Nation's governors. Its mission is to help shape and implement national policy and help governors and their policy staff develop and implement innovative solutions to the challenges facing their States.
444 North Capitol Street, Suite 267
Washington, DC 20001
202-624-5300
http://www.nga.org/center

National League of Cities (NLC)
The overall purpose of the NLC is to strengthen and promote cities as centers of opportunity, leadership, and governance.
1301 Pennsylvania Avenue NW, Suite 550
Washington, DC 20004
202-626-3000
www.nlc.org

Parent/Professional Advocacy League (PAL)
This group provides support, education, and advocacy around issues related to children's mental health.
45 Bromfield Street, 10th Floor
Boston, MA 02018
617-542-7860
http://ppal.net

Physicians and Lawyers for National Drug Policy
This organization conducts research and provides information to the public on drug use disorders, and works to put a new emphasis on national drug policy by substantially refocusing the investment in the prevention and treatment of harmful drug use.
PLNDP National Project Office
Center for Alcohol and Addiction Studies
Brown University Box G-S121-4
Providence, RI 02912
401-863-6635
http://www.plndp.org

Save Our Society from Drugs
This is a legislative and congressional affairs organization that fights against permissive drug policy that negatively impacts society.
5999 Central Avenue, Suite 301
St. Petersburg, FL 33710
727-828-0211
http://www.saveoursociety.org

United for Recovery
This nonprofit organization is an advocacy group for people in treatment and in recovery. It works to broaden public awareness and understanding of addiction and recovery and increase opportunities for people to get the help they need.
210 Gateway, Third Floor
Lincoln, NE 68505
402-434-2730
http://www.unitedforrecovery.org

U.S. Conference of Mayors
This forum provides mayors with the opportunity to share ideas and recommend policy positions.
1620 Eye Street NW, Suite 400
Washington, DC 20006
202-293-7330
http://www.usmayors.org

Prevention

These organizations emphasize prevention of mental and/or substance use disorders through educational programs, awareness campaigns, and other materials.

Alcohol Justice
This policy-focused advocacy organization offers training and publications primarily concerned with alcohol marketing practices and counter strategies, and works closely with the World Health Organization and other groups to promote environmental prevention.
24 Belvedere Street
San Rafael, CA 94901
415-456-5692
http://www.alcoholjustice.org

American Council for Drug Education (ACDE)
This substance abuse prevention and education agency develops programs and materials based on the most current scientific research on drug use and its impact on society.
50 Jay Street
Brooklyn, NY 11201
646-505-2061
http://www.acde.org

Community Anti-Drug Coalitions of America (CADCA)
This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.
625 Slaters Lane, Suite 300
Alexandria, VA 22314
800-54-CADCA (542-2322)
703-706-0560
http://www.cadca.org

Campaign for Tobacco-Free Kids
For a full description, refer to Schools/Youth.

FACE® Initiative
This national nonprofit organization is focused on alcohol issues. It works in media development and training for the reduction of alcohol-related problems. Since 1989, FACE® has stood for Facing Alcohol Concerns through Education, but it no longer uses a full name. FACE® offers trainings and products, including full-color bookmarks, posters, and cards.
105 West Fourth Street
Clare, MI 48617
888-822-3223
989-386-2315
http://www.faceproject.org

Fetal Alcohol and Drug Unit
This group is dedicated to the prevention, intervention, and treatment of fetal alcohol syndrome and fetal alcohol effects.
180 Nickerson Street, Suite 309
Seattle, WA 98109
206-543-7155
http://depts.washington.edu/fadu

Five Moms Campaign
This group of five women is spreading the word about cough medicine abuse. The campaign's mission is to have each person tell five more moms about this nationwide problem, who will then tell another five, and another five beyond that.
http://www.fivemoms.com

Hands Across Cultures
This organization works to improve the health, education, and well-being of the people of northern New Mexico through family-centered approaches deeply rooted in the multicultural traditions of their communities.
P.O. Box 2215
Espanola, NM 87532
505-747-1889
http://www.handsacrosscultures.org

Leadership to Keep Children Alcohol Free Foundation
The purpose of this coalition of Governors' spouses and public and private organizations is to prevent alcohol use by children between 9 and 15 years old.
http://www.alcoholfreechildren.org

National Association of State Alcohol and Drug Abuse Directors (NASADAD)
This association supports the development of effective prevention and treatment programs throughout every State.
1025 Connecticut Avenue NW, Suite 605
Washington, DC 20036
202-293-0090
http://www.nasadad.org

National Center for Prevention and Research Solutions (NCPRS)
This center operates a drug prevention and education program called Race Against Drugs, and has a nationwide network of volunteers and DEA/FBI agents assisting the program by conducting community and school events throughout the country.
3132 South Ridgewood Avenue
South Daytona, FL 32119
86-NCPRS-NOW (62777-669)
386-760-2254
http://www.ncprs.org

National Education Association Health Information Network (NEAHIN)
This association offers resources on youth alcohol and drug use prevention.
1201 16th Street NW, Suite 216
Washington, DC 20036
202-822-7570
http://www.neahin.org

National Inhalant Prevention Coalition (NIPC)
This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. The coalition serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.
506 Barton Avenue
Chattanooga, TN 37405
800-269-4237
423-265-4662
http://www.inhalants.org

National Organization on Fetal Alcohol Syndrome (NOFAS)
This organization provides education and awareness about the prevention of birth defects caused by alcohol consumption during pregnancy.
1200 Eton Court NW, Third Floor
Washington, DC 20007
202-785-4585
http://www.nofas.org

National Parent Teacher Association (PTA) Drug and Alcohol Abuse Prevention Project
This project presents drug facts, parenting tips, and family activities on protecting children from drugs and alcohol.
541 North Fairbanks Court, Suite 1300
Chicago, IL 60611-3396
312-670-6782
http://www.pta.org

The Partnership at Drugfree.org
For a full description, refer to Schools/Youth.

Partnership for Prevention (PFP)
This organization seeks to coordinate and focus the efforts of members to make prevention a visible and viable means for improving the Nation's health. The PFP website includes a Tools and Resources area with archived files of publications of interest to substance abuse prevention professionals and advocates. Publications include "What Policymakers Need to Know About Cost Effectiveness" and "Guide to Smart Prevention Investments," both published in 2002.
1015 18th Street NW, Suite 300
Washington, DC 20036
202-833-0009
http://www.prevent.org

Society for Adolescent Medicine
This organization offers advice for teens and parents on how to avoid alcohol and drug dependency.
111 Deer Lake Road, Suite 100
Deerfield, IL 60015
847-753-5226
http://www.adolescenthealth.org

Society for Prevention Research
The Society for Prevention Research is a professional organization that focuses on the advancement of science-based prevention programs and policies through empirical research. The organization's members include scientists, practitioners, advocates, administrators, and policymakers. The group holds an annual meeting and publishes "Prevention Science Journal."
11240 Waples Mill Road, Suite 200
Fairfax, VA, 22030
703-934-4850
http://www.preventionresearch.org

Substance Abuse Librarians and Information Specialists (SALIS)
Established in 1978, this international association of individuals and organizations has special interests in the exchange and dissemination of alcohol, tobacco, and other drug information. SALIS holds an annual conference, publishes a quarterly newsletter, maintains a members-only listserv facilitating rapid exchanges of substance abuse information, and maintains a comprehensive list of bibliographic, statistical, and related databases covering all aspects of substance abuse. The group works closely with its counterpart association in Europe, ELISAD (http://www.elisad.eu).
P.O. Box 9513
Berkeley, CA 94709-0513
510-769-1831
http://www.salis.org

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)
This is a nonprofit organization focused on support for prevention and treatment in Africa from alcohol and other drug problems, serving as a resource to improve the well-being of individuals, families, and communities.
1040 Main Street, Suite 103
Napa, CA 94559
609-466-8101
http://www.sapta.or.ke/home

Provider and Professional Organizations

These groups support individuals and organizations that offer health care services in an effort to enhance quality of care.

The ACTION Campaign
This campaign is a cross-sector partnership among nongovernmental organizations, foundations, and Government agencies, including SAMHSA, the State Associations of Addiction Services, the Network for the Improvement of Addiction Treatment, and the National Association of State Alcohol and Drug Abuse Directors (NASADAD).
Mechanical Engineering Room 4021
1513 University Avenue
Madison, WI 53706
608-890-1445
http://www.actioncampaign.org

Alcoholism and Substance Abuse Providers of New York State (ASAP)
This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.
1 Columbia Place, Suite 400
Albany, NY 12207
518-426-3122
http://www.asapnys.org

American Academy of Addiction Psychiatry (AAAP)
The academy offers continuing education for substance use disorder treatment professionals.
400 Massasoit Ave, Suite 307, Second Floor
Providence, RI 02914
401-524-3076
http://www.aaap.org

American Academy of Child and Adolescent Psychiatry (AACAP)
This academy provides information for AACAP members, parents, and families about the treatment of developmental, behavioral, and mental health problems.
3615 Wisconsin Avenue NW
Washington, DC 20016
202-966-7300
http://www.aacap.org

American Academy of Pediatrics (AAP)
This organization serves as a forum for pediatricians to address children's health needs.
141 Northwest Point Boulevard
Elk Grove Village, IL 60007
847-434-4000
http://www.aap.org

American Association for Marriage and Family Therapy (AAMFT)
This association represents the professional interests of more than 25,000 marriage and family therapists throughout the United States, Canada, and abroad.
112 South Alfred Street
Alexandria, VA 22314-3061
703-838-9808
http://www.aamft.org

American Association for the Treatment of Opioid Dependence (AATOD)
This group was founded in 1984 to enhance the quality of patient care in treatment programs by promoting the growth and development of comprehensive methadone treatment services throughout the United States.
225 Varick Street, Fourth Floor
New York, NY 10014
212-566-5555
http://www.aatod.org

American Association of Pastoral Counselors (AAPC)
AAPC represents and sets professional standards for more than 3,000 pastoral counselors and 100 pastoral counseling centers in North America and around the world. This association provides and promotes theologically informed, spiritually sensitive, ethically sound, and clinically competent counseling as an extension of the ministry of faith communities.
9504A Lee Highway
Fairfax, VA 22031
703-385-6967
http://www.aapc.org

American Dental Association (ADA)
This group is the world's oldest and largest national dental society, representing more than 156,000 dentists throughout the United States. The ADA is committed to helping its members better identify, understand, and accommodate the special health care needs of patients with substance use disorders, and to facilitating the journey of recovery for dentists and their office staffs.
211 East Chicago Avenue
Chicago, IL 60611-2678
312-440-2500
http://www.ada.org

American Legacy Foundation (Legacy)
This foundation works with those interested in decreasing the use of tobacco by Americans. Among Legacy's top priorities are to reduce tobacco use by young people and support programs that help people quit smoking. Legacy works to limit people's exposure to secondhand smoke. Legacy supports the Tobacco Technical Assistance Consortium to help develop and evaluate new tobacco prevention programs and provide technical support.
1724 Massachusetts Ave, NW
Washington, DC 20036
202-454-5555
http://www.legacyforhealth.org

American Medical Women's Association
This national association offers publications and information related to women's health.
100 North 20th Street, Fourth Floor
Philadelphia, PA 19103
215-320-3716
http://www.amwa-doc.org

American Mental Health Counselors Association (AMHCA)
This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice, promotes mental health awareness, and builds the profession of mental health counseling nationally.
801 North Fairfax Street, Suite 304
Alexandria, VA 22314
800-326-2642
703-548-6002
http://www.amhca.org

American Psychiatric Association (APA)
This association offers mental health information for professionals, individuals, and families.
1000 Wilson Boulevard, Suite 1825
Arlington, VA 22209
888-357-7924
703-907-7300
http://www.psych.org

American Psychiatric Nurses Association (APNA)
This is a resource for psychiatric mental health nursing. A professional organization with 7,000 members, it is committed to the specialty practice of psychiatric mental health nursing, health promotion through identification of mental health issues, prevention of mental health problems, and the care and treatment of people with psychiatric disorders. APNA is a resource for psychiatric mental health nursing and was recently named as one of American Chronicle's Top 10 Industry Associations in Nursing.
1555 Wilson Boulevard, Suite 530
Arlington, VA 22209
703-243-2443
http://www.apna.org

American Psychological Association (APA)
This organization is the largest scientific and professional organization representing psychology in the United States. Its membership includes more than 150,000 researchers, educators, clinicians, consultants, and students.
750 First Street NE
Washington, DC 20002
800-374-2721
202-336-5500
http://www.apa.org

American Public Health Association (APHA)
This association influences policies and priorities to set public health practice standards and to improve health worldwide.
800 Eye Street NW
Washington, DC 20001
202-777-2742
http://www.apha.org

APHA, Alcohol, Tobacco, and Other Drugs Section (ATOD)
A portion of the APHA website that offers downloadable newsletters; each year's program for the Alcohol, Tobacco and Other Drugs (ATOD) Section at the APHA Convention; and a leadership directory of email links to active members of the ATOD Section.
http://www.apha.org/membergroups/sections/aphasections/atod

American Society of Addiction Medicine (ASAM)
This is an association of 3,000 physicians nationwide dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting research and prevention, and enlightening and informing the medical community and the public about these issues.
4601 North Park Avenue
Upper Arcade, Suite 101
Chevy Chase, MD 20815
301-656-3920
http://www.asam.org

Association for Medical Education and Research in Substance Abuse (AMERSA)
This association offers training and materials for medical professionals, students, and all primary health professional disciplines.
125 Whipple Street, Suite 300
Providence, RI 02908
401-243-8460
http://www.amersa.org

The Association of Lesbian and Gay Addiction Professionals and Their Allies (NALGAP)
NALGAP is a membership organization founded in 1979 and dedicated to the prevention and treatment of alcoholism, substance abuse, and other addictions in lesbian, gay, bisexual, transgender, and queer communities.
1001 North Fairfax Street, Suite 201
Alexandria, VA 22314
800-548-0497
http://www.nalgap.org

Association of State and Territorial Health Officials
For a full description, refer to Policy.

Children of Alcoholics Foundation (COAF)
For a full description, refer to Family and Social Services.

Child Welfare League of America (CWLA)
For a full description, refer to Family and Social Services.

Coalition of Behavioral Health Services
This collaboration of organizations and individuals in the Houston metropolitan area is working to bridge the gap between substance use and mental health treatment resources and residents in need of such services.
501 Garden Oaks Boulevard
Houston, TX 77018
713-426-2637, ext. 4511
http://www.cbhshouston.org

Community Intervention
This organization offers educational materials, training, and consultation for professionals working with children ages 5 to 18.
2412 University Avenue SE, Suite B
Minneapolis, MN 55414
800-328-0417
http://www.communityintervention.org

Drug Strategies
This organization promotes more effective approaches to the Nation's drug problems and supports private and public efforts to reduce the demand for drugs through prevention, education, treatment, law enforcement, and community initiatives. The group has issued numerous reports assessing the effectiveness of various public and private substance abuse prevention efforts.
1616 P Street NW, Suite 220
Washington, DC 20036
800-559-9503
202-289-9070
http://www.drugstrategies.org

Health Communications, Inc. (HCI)
Founded in 1976, this company publishes several new titles per year for professionals and consumers. It provides information and education to addiction and mental health professionals through "Counselor, The Magazine for Addiction Professionals."
3201 SW 15th Street
Deerfield Beach, FL 33442
800-851-9100
http://www.counselormagazine.com

Institute for the Advancement of Human Behavior
This organzation provides continuing medical education for mental health, chemical dependency, and substance use disorder treatment providers in the United States and Canada.
4370 Alpine Road, Suite 209
Portola Valley, CA 94028
800-258-8411
http://www.iahb.org

International Certification and Reciprocity Consortium/Alcohol and Other Drug Abuse
This nonprofit, voluntary membership organization is comprised of certifying agencies involved in credentialing alcohol and drug use counselors, clinical supervisors, and prevention specialists.
298 South Progress Avenue
Harrisburg, PA 17109
717-540-4457
http://www.icrcaoda.org

International Nurses Society on Addictions
This professional specialty organization offers information and education for nurses concerning prevention, intervention, treatment, and management of substance use disorders.
P.O. Box 14846
Lenexa, KS 66285-4846
877-646-8672
http://www.intnsa.org

Miami Coalition for a Safe and Drug-Free Community
University of Miami/North South Center
This broadly based community organization is committed to reducing the problems of substance use disorders and directly related social issues by serving as a community convener and facilitator.
2490 Coral Way, Fourth Floor
Miami, FL 33415
305-854-4515
http://www.miamicoalition.org

NAADAC, The Association for Addiction Professionals
This is a national nonprofit membership organization, with over 52 affiliates across the United States, American Territories, and internationally. It focuses on empowering addiction professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, and professional development and research.
1001 North Fairfax Street, Suite 201
Alexandria, VA 22314
800-548-0497
703-741-7686
http://www.naadac.org

National Association of Addiction Treatment Providers (NAATP)
This association represents private substance use disorder treatment programs throughout the United States.
313 West Liberty Street, Suite 129
Lancaster, PA 17603
717-392-8480
http://www.naatp.org

National Association of Peer Specialists
This organization is dedicated to promoting peer specialists throughout the United States. This group of dedicated peer specialists seeks ways to improve the effectiveness of the mental health system through the hiring of other peer specialists.
755 Alta Dale SE
Ada, MI 49301
616-676-9230
http://www.naops.org

National Association of Rural Health Clinics
This association offers information on how to improve the delivery of quality, cost-effective health care in rural, underserved areas.
Two East Main Street
Fremont, MI 49412
866-306-1961
http://www.narhc.org

National Association of School Psychologists
The association provides resources focused on enhancing the mental health and educational competence of all children.
4340 East West Highway, Suite 402
Bethesda, MD 20814
301-657-0270
http://www.nasponline.org

National Association of Social Workers (NASW)
As the largest membership organization of professional social workers in the world, this organization works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.
750 First Street NE, Suite 700
Washington, DC 20002
202-408-8600
http://www.socialworkers.org

National Association of State Medicaid Directors (NASMD)
This is a bipartisan, professional, nonprofit organization of representatives of State Medicaid agencies, affiliated with the American Public Human Services Association (APHSA). The primary purposes of this group are to serve as a focal point of communication between the States and the Federal Government, and to provide an information network among the States on issues pertinent to the Medicaid program.
1133 19th Street NW, Suite 400
Washington, DC 20036
202-682-0100
http://www.nasmd.org

National Council for Community Behavioral Healthcare
This group is the national association of community providers who together care for 6 million adults and children across the country who suffer from mental illnesses, developmental disabilities, and substance use disorders. Its members employ more than 250,000 staff and provide mental and substance use disorder treatment, rehabilitation, housing, and community support services.
1701 K Street NW, Suite 400
Washington, DC 20006
202-684-7457
http://www.thenationalcouncil.org

National Inhalant Prevention Coalition (NIPC)
For a full description, refer to Prevention.

Network for the Improvement of Addiction Treatment (NIATx)
This network is a partnership between the Robert Wood Johnson Foundation's Paths to Recovery program, the Center for Substance Abuse Treatment's Strengthening Treatment Access and Retention (STAR) program, the National Institute on Drug Abuse, and a number of independent addiction treatment organizations. It works with treatment providers to make more efficient use of their capacity and shares strategies for improving treatment access and retention.
1513 University Avenue
Mechanical Engineering, Room 4121
Madison, WI 53706
608-265-0063
http://www.niatx.net

Portland State University Graduate School of Social Work
This program offers the only graduate social work education programs in Oregon accredited by the Council on Social Work Education. The three major functions of the school are teaching, research, and community service.
P.O. Box 751
Portland, OR 97207
503-725-4712
http://www.ssw.pdx.edu

ReStart, Inc.
This nationally accredited, full-service behavioral health care provider offers a wide range of diagnostic and treatment services tailored to meet individual needs, including community support services for adults, children, and adolescents. It offers diagnostic assessments, child and adult therapy, family and group sessions, assessments and counseling, residential treatment for girls, behavioral therapy, assertive community treatment teams, psychological evaluations, intensive in-home services, and community support teams.
2602 Courtier Drive
Greenville, NC 27858
252-355-4725
http://www.restarthumanservices.com

Society for Adolescent Substance Abuse Treatment Effectiveness
This is a voluntary and informal network of researchers, evaluators, providers, and policymakers interested in pooling their knowledge and resources to improve the field.
301-587-1600
http://www.chestnut.org/LI/APSS/SASATE

State Associations of Addiction Services (SAAS)
This is the national organization of State provider associations representing treatment and prevention programs for substance use disorders.
236 Massachusetts Avenue NE, Suite 505
Washington, DC 20002
202-546-4600
http://www.saasnet.org

Texas Department of State Health Services Community Mental Health and Substance Abuse Services
This department works to improve the health and well-being of people living in Texas. The department built an extensive research and reference collection in the area of substance abuse prevention and treatment, which is available online.
909 West 45th Street
Austin, TX 78751
512-458-7111
http://www.dshs.state.tx.us/default.shtm

US Psychiatric Rehabilitation Association (USPRA)
The USPRA and its members developed and defined the practice of psychosocial/psychiatric rehabilitation, establishing these services as integral to community-based treatment and leading the recovery movement. With nearly 1,400 members, this association seeks to advance the availability and practice of psychiatric rehabilitation so that all individuals with a serious mental illness have access to the supports they need to recover.
1760 Old Meadow Road, Suite 500
McLean, VA 22102
410-789-7054
http://www.uspra.org

Research

These organizations conduct scientific research on behavioral health conditions, as well as offer mental and/or substance use disorder training and education services.

Addiction Technology Transfer Center (ATTC) Network National Office
To advance public health and wellness, SAMHSA's ATTC Network accelerates lasting change in behavioral health care systems by translating, disseminating, and promoting the adoption and implementation of effective and culturally sensitive clinical practices. A list of ATTC Regional Centers, the States they serve, and contact information can be found on the ATTC Network website.
University of Missouri – Kansas City
5100 Rockhill Road
Kansas City, MO 64110
816-235-6888
http://www.ATTCnetwork.org

Caribbean Basin and Hispanic ATTC (serving Puerto Rico and the U.S. Virgin Islands)
Centro de Estudios en Adiccion
Universidad Central del Caribe Call Box 60-327
Bayamon, PR 00960-6032
787-785-4211
http://cbattc.uccaribe.edu

Central East ATTC (serving DE, DC, MD, NJ)
8737 Colesville Road, Suite 300
Silver Spring, MD 20910
240-645-1145
http://www.ceattc.org

Great Lakes ATTC (serving IL, OH, IN, MI)
Jane Addams College of Social Work
University of Illinois at Chicago
1640 West Roosevelt Road, Suite 511
Chicago, IL 60608-1316
312-996-1373
http://www.nattc.org/regcenters/index_greatlakes.asp

Gulf Coast ATTC (serving TX, LA, NM)
University of Texas School of Social Work Center for Social Work Research
1717 West Sixth Street, Suite 335
Austin, TX 78703
512-232-0616
http://www.utattc.net

Mid-America ATTC (serving AR, KS, MO, OK, NE)
University of Missouri-Kansas City
5100 Rockhill Road
Kansas City, MO 64110-2499
816-482-1100
http://www.mattc.org

Mid-Atlantic ATTC (serving VA, WV, KY, TN)
4907 Fitzhugh, Suite 202
Richmond, VA 23230
804-367-7720
http://www.attcnetwork.org/midatlantic

Mountain West ATTC (serving NV, MT, WY, UT, CO, ID)
University of Nevada, Reno
CASAT/MWATTC Mailstop 279
Reno, NV 89557
775-784-6265
http://www.attcnetwork.org/regcenters/index_mountainwest.asp

New England ATTC (serving ME, NH, VT, MA, CT, RI)
Center for Alcohol and Addiction Studies, Brown University
Box G-S121
Providence, RI 02912
401-863-6486
http://www.attc-ne.org

Northeast ATTC (serving NY, PA)
Institute for Research, Education & Training in Addictions
425 Sixth Avenue, Suite 1710
Pittsburgh, PA 15219
866-246-5344
http://www.nattc.org/regcenters/index_northeast.asp

Northwest Frontier ATTC (serving AK, WA, OR, HI, Pacific Islands)
810 D Street NE
Salem, OR 97301
503-373-1322
http://www.nfattc.org

Pacific Southwest ATTC (serving CA, AZ)
UCLA Integrated Substance Abuse Programs
1640 South Sepulveda Boulevard, Suite 200
Los Angeles, CA 90025
310-267-5408
http://www.psattc.org

Prairielands ATTC (serving IA, MN, ND, SD, WI)
University of Iowa
1207 Westlawn
Iowa City, IA 52242
319-335-5368
http://www.pattc.org

Southeast ATTC (serving GA, NC, SC)
National Center for Primary Care at Morehouse School of Medicine
720 Westview Drive SW
Atlanta, GA 30310-1495
404-752-1016
http://www.sattc.org

Southern Coast ATTC (serving FL, AL, MS)
Florida Certification Board
1715 South Gadsden Street
Tallahassee, FL 32301
850-222-6731
http://www.attcnetwork.org/regcenters/index_southerncoast.asp

Center for Science in the Public Interest: Alcohol Policies Project
This center conducts policy development and technical research for the prevention of alcohol use disorders at local, State, and national levels.
1875 Connecticut Avenue NW, Suite 300
Washington, DC 20009
202-332-9110
http://www.cspinet.org

Center for Substance Abuse Research
This research center provides information on substance use disorders and their impact on individuals, families, and communities.
4321 Hartwick Road, Suite 501
College Park, MD 20740
301-405-9770
http://www.cesar.umd.edu

CompassPoint Addiction Foundation
This foundation performs research about the causes and nature of substance use disorders.
P.O. Box 2800-338
Carefree, AZ 85377
480-368-2688
http://www.addictionresearch.com

Harvard Medical School Division on Addictions
This center provides education and training to health care workers who treat substance use disorders and to scientists who study them.
101 Station Landing, Second Floor
Medford, MA 02155
781-306-8600
http://www.divisiononaddictions.org

The Journal of Global Drug Policy and Practice
This journal is a peer-reviewed, scientific, free online publication that helps public and private entities to participate in the exchange of valuable information about drug policy and practice, while sharing different cultural attitudes and perspectives.
2600 Ninth Street North, Suite 200
St. Petersburg, FL 33704
727-828-0211
http://www.globaldrugpolicy.org

National Center on Addiction and Substance Abuse at Columbia University (CASA)
This organization is the only nationwide entity that brings together all the professional disciplines needed to study and combat the abuse of all substances—alcohol and nicotine as well as illegal, prescription, and performance-enhancing drugs—in all sectors of society.
633 Third Avenue, 19th Floor
New York, NY 10017
212-841-5200
http://www.casacolumbia.org

National Development and Research Institutes, Inc. (NDRI)
A National Institute on Drug Abuse grantee, this nonprofit research and educational organization is dedicated to advancing scientific knowledge in the areas of alcohol and drug use, treatment, and recovery; HIV, AIDS, and HCV; therapeutic communities; youth at risk; and related areas of public health, mental health, criminal justice, urban problems, prevention, and epidemiology.
71 West 23rd Street, Eighth Floor
New York, NY 10010
212-845-4400
http://www.ndri.org

Physicians and Lawyers for National Drug Policy
For a full description, refer to Policy.

The Robert Wood Johnson Foundation
This foundation offers grants for training, education, and research.
P.O. Box 2316
College Road East and Route 1
Princeton, NJ 08543-2316
877-843-7953
http://www.rwjf.org

Substance Abuse and Mental Health Data Archive (SAMHDA)
This data archive contains substance use disorder and mental health research data.
ICPSR University of Michigan Institute for Social Research
P.O. Box 1248
Ann Arbor, MI 48106-1248
888-741-7242
http://www.icpsr.umich.edu/SAMHDA

The Urban Institute
This institute conducts economic and social policy research on a range of issues, including substance use disorders, health insurance, and community-based health care.
2100 M Street NW
Washington, DC 20037
202-833-7200
http://www.urban.org

Schools/Youth

These organizations provide mental and/or substance use disorder education and support to youth, parents, and educators.

AnswersForTeens.com
This website provides information for teenagers seeking help if they are living with a parent who may be abusing alcohol/drugs. It provides information, helps teenagers think through their problems with their parents, and outlines places where teenagers can go for help. It builds off of Edith Lynn Hornik-Beer's book, "For Teenagers Living With a Parent Who Abuse Alcohol/Drugs."
http://www.answersforteens.com

Association of Recovery Schools (ARS)
This organization advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery. ARS exists to support such schools which, as components of the recovery continuum of care, enroll students committed to being abstinent from alcohol and other drugs and working a program of recovery.
1231 Highland Avenue
Ft. Washington, PA 19034
215-628-8600
http://www.recoveryschools.org

Augsburg College's StepUP Program
This program provides ongoing support to students in recovery who are willing and able to progress toward an academic degree through separate chemical-free housing, weekly individual support meetings, and community activities.
2211 Riverside Avenue South
Minneapolis, MN 55454
612-330-1000
http://www.augsburg.edu

Big Brothers/Big Sisters of America
This youth mentoring organization helps at-risk youth overcome the many challenges they face.
230 North 13th Street
Philadelphia, PA 19107
215-567-7000
http://www.bbbsa.org

Boy Scouts of America
This group offers character development programs and leadership training for boys.
1325 West Walnut Hill Lane
Irving, TX 75015
972-580-2000
http://www.scouting.org

Boys and Girls Clubs of America
This organization provides opportunities for recreation and companionship for children at home with no adult care or supervision.
1230 West Peachtree Street NE
Atlanta, GA 30309-3506
404-487-5700
http://www.bgca.org

Camp Fire USA
This group offers services in areas such as youth leadership, self-reliance, after-school groups, camping, and environmental education.
1100 Walnut Street, Suite 1900
Kansas City, MO 64106-2197
816-285-2010
http://www.campfireusa.org

Campaign for Tobacco-Free Kids
This campaign works to protect children from tobacco use and exposure to secondhand smoke.
1400 Eye Street NW, Suite 1200
Washington, DC 20005
202-296-5469
http://www.tobaccofreekids.org

Community Alliances for Drug-Free Youth, Inc. (CADFY)/Californians for Drug-Free Youth
Through community mobilization, CADFY co-develops and provides effective and comprehensive youth, adult, and family prevention/intervention/treatment and recovery community support services that are deployed through its national outreach bureau, CADFY.
1010 Second Avenue, Suite 1900
San Diego, CA 92101
619-557-5753
http://www.cadfy.org

Connecticut Turning to Youth and Families (CTYF)
This is a nonprofit organization established to strengthen prevention, treatment, and recovery support services for youth and families. Using the power of youth and families with their own stories, this organization offers peer-to-peer programs and services that are natural recovery supports for other youth and families.
135 West Road
Marlborough, CT 06447
860-838-3553
http://www.ctyouthandfamilies.org/ctyf

D.A.R.E
This program is a police officer-led series of classroom lessons that teaches children from kindergarten through 12th grade how to resist peer pressure and live productive drug- and violence-free lives.
P.O. Box 512090
Los Angeles, CA 90051
800-223-DARE (3273)
http://www.dare.org

Drug Free America Foundation, Inc.
This is an international drug policy and prevention organization.
5999 Central Avenue, Suite 301
St. Petersburg, FL 33710
727-828-0211
http://www.dfaf.org

Girl Scouts of the USA
The Girl Scouts are dedicated to helping all girls everywhere build character and gain skills for success in the real world.
420 Fifth Avenue
New York, NY 10018-2798
800-478-7248
212-852-8000
http://www.girlscouts.org

Junior Achievement
This organization educates and inspires young people to value free enterprise, business, and economics.
1 Education Way
Colorado Springs, CO 80906
719-540-8000
http://www.ja.org

La Joya ISD
This independent school district in La Joya, TX, offers programs and counseling for substance use prevention, education, and intervention.
201 East Expressway 83
La Joya, TX 78560
956-580-5000
http://www.lajoyaisd.com

MENTOR/National Mentoring Partnership
This group is widely acknowledged as the Nation's premier advocate and resource for the expansion of mentoring initiatives nationwide. MENTOR leverages resources and provides the support and tools that mentoring organizations need to effectively serve young people in their communities.
1600 Duke Street, Suite 300
Alexandria, VA 22314
703-224-2200
http://www.mentoring.org

National Parent Teacher Association (PTA) Drug and Alcohol Abuse Prevention Project
For a full description, refer to Prevention.

National Student Assistance Association (NSAA)
This national membership organization of student assistance professionals offers early intervention and training on alcohol- and drug-related problems in thousands of schools across the country.
1704 Charlotte Pike, Suite 200
Nashville, TN 37203
800-257-6310
http://www.nasap.org

Network on Transitions to Adulthood
This group, supported by the John D. and Catherine T. MacArthur Foundation, examines the changing nature of early adulthood (ages 18-34), and the policies, programs, and institutions that support young people as they move into adulthood.
University of Pennsylvania Department of Sociology
3718 Locust Walk
Philadelphia, PA 19104-6299
215-898-1569
http://www.transad.pop.upenn.edu

Parents 4 A Change
This website works to raise awareness about the use of opiates and heroin among teenagers.
http://www.parents4achange.com

The Partnership at Drugfree.org
This nonprofit organization helps parents prevent, intervene in, and find treatment for drug and alcohol use by their children. Bringing together renowned scientists, parent experts, and communications professionals, this public health nonprofit translates current research on teen behavior, parenting, addiction, and treatment into easy-to-understand resources at drugfree.org. The organization also reaches families through its community education programs, which focus on local drug and alcohol issues of concern for parents, youth, and the Hispanic community.
405 Lexington Avenue, Suite 1601
New York, NY 10174
212-922-1560
http://www.drugfree.org

Students Against Destructive Decisions (SADD)
This organization provides students with prevention tools to deal with underage drinking, other drug use, impaired driving, and other destructive decisions.
255 Main Street
Marlborough, MA 01752
877-SADD-INC (7233-462)
http://www.sadd.org

Students Taking Action Not Drugs (STAND)
This college-level substance abuse prevention marketing program educates students about the dangers of addictive drugs and mobilizes them to reduce substance use on their campuses.
5999 Central Avenue, Suite 301
St. Petersburg, FL 33710
727-828-0211
http://www.studentstakingaction.org

U.S. DEPARTMENT OF AGRICULTURE (USDA), 4-H
For a full description, refer to Schools/Youth under Federal Agencies.

U-Turn of SAARA, Inc.
This organization is dedicated to empowering disadvantaged people, especially youth, to improve their lives, thus enabling them to improve their communities and ultimately society.
306 Turner Road, Suite P
Richmond, VA 23225
804-762-4445
http://www.saaracenter.org

Treatment/Recovery

These organizations are focused on providing treatment and recovery resources, support, and services to individuals with mental and/or substance use disorders, as well as their families.

About Recovery
This website offers recovery resources and provides a national helpline that is available 24 hours a day.
877-345-3370
http://www.aboutrecovery.com

Addiction Survivors
This group is dedicated to providing online peer support communities for those with addiction, their families, and friends.
P.O. Box 333
Farmington, CT 06034
http://www.addictionsurvivors.org

Addiction Treatment Centers
This website offers information about drug treatment centers, rehab programs, and dual diagnosis treatment resources, including blogs, forums, video sharing, and a comprehensive directory of more than 11,000 treatment facilities.
356 Santana Row, #310
San Jose, CA 95128
877-335-4673
408-210-4910
http://www.treatment-centers.net

Addiction Treatment Watchdog
This website is a resource for educating medication-assisted treatment patients and others about the disease and treatment of opiate addiction.
http://atwatchdog.lefora.com

Advocates for Recovery Through Medicine (ARM)
This organization's goals are to end stigma and discrimination against people who use medications to treat addictions and to move addiction treatment, especially opiate treatment, into mainstream medicine.
P.O. Box 90337
Burton, MI 48509
810-250-9064
http://www.armme.org

Advocates for the Integration of Recovery and Methadone (AFIRM)
This group supports methadone as an effective tool of recovery that can be enhanced through the integration of other treatment approaches. It promotes the development of Methadone Anonymous (MA) and other 12-step fellowships, as well as clinical treatment alternatives, such as incorporating spirituality modalities into traditional treatment settings.
455 East Bay Drive
Long Beach, NY 11561
516-897-1330 (days)
516-889-8142 (evenings)
http://www.methadonetoday.org/afirm.html

The Alexandria Community Services Board (CSB)
This group provides effective and cost-efficient mental health, mental retardation, and substance use prevention and treatment services that measurably improve the quality of life for Alexandria, VA's neediest citizens.
720 North Saint Asaph Street, Fourth Floor
Alexandria, VA 22314
703-746-3400
http://www.alexandriava.gov/mhmrsa

Aliviane NO-AD, Inc.
This nonprofit community-based organization is dedicated to the provision of HIV and substance use disorder prevention, intervention, treatment, education, and follow-up care to the residents of western Texas.
10690 Socorro Road
Socorro, TX 09927
915-858-6208

The American Association of Poison Control Centers (AAPCC)
This association is a nationwide organization of poison centers and interested individuals.
515 King Street, Suite 510
Alexandria, VA 22314
703-894-1858
http://www.aapcc.org

Association of Recovery Schools (ARS)
For full description, refer to Schools/Youth.

Elks Drug Awareness Resource Center
For a full description, refer to Family and Social Services.

C4 Recovery Solutions, Inc.
This nonprofit was established to promote the design, provision, and monitoring of outcomes-based services that initiate and sustain recovery from substance use disorders, as well as improve prevention and harm reduction strategies that mitigate addiction's effects.
http://www.c4recoverysolutions.org

California Association of Addiction Recovery Resources (CAARR)
This association educates and provides statewide recovery resources for alcoholics and people with addiction problems living in California.
2400 Marconi Avenue
P.O. Box 214127
Sacramento, CA 95821
916-338-9460
http://www.caarr.org

Community Connections, Inc.
This group is the largest not-for-profit mental health agency serving men, women, and children in the Nation's capital. Community Connections combines a commitment to quality mental health care with a passion for research and education that has led to its status as a recognized national leader in the delivery of creative and constantly evolving, evidence-based services for consumers and the community.
801 Pennsylvania Avenue SE, Suite 201
Washington, DC 20003
202-546-1512
http://www.communityconnectionsdc.org

Exponents, Inc.
This organization is dedicated to improving the quality of life of individuals affected by drug addiction, incarceration, and HIV/AIDS. Programs are designed to support successful life transitions through engagement in services that ignite hope and promote awareness.
151 West 26th Street, Third Floor
New York, NY 10001
212-243-3434
http://www.exponents.org

Faces & Voices of Recovery
For a full description, refer to Policy.

Griffin Recovery Enterprises
This enterprise consists of books, presentations, and a blog. Griffin's latest book, "A Man's Way Through the Twelve Steps," uses interviews with men in various stages of recovery, along with his own experience, to offer a holistic approach to sobriety for men.
4549 Park Avenue
Minneapolis, MN 55407
612-701-5842
http://www.dangriffin.com

Hope Networks
This group supports community efforts regarding treatment, job skills, living skills, and retraining programs to reduce poverty, crime, and illiteracy found in untreated communities.
8867 Highland Road, Suite 320
Baton Rouge, LA 70808
866-859-3513
http://www.hopenetworks.org

In the Rooms, Inc.
This social networking website is for the recovery community worldwide. Its mantra is H.I.T.C.H.—Help, Inform, Touch, Connect, and Heal—for those already in recovery, seeking recovery, and family and friends around the world.
http://www.intherooms.com

The McShin Foundation
This foundation is Virginia's fastest growing peer-to-peer recovery community organization. Founded in 2004, The McShin Foundation is a nonprofit committed to serving individuals and families in their fight against substance use disorders.
2300 Dumbarton Road
Richmond, VA 23228
804-249-1845
http://www.mcshinfoundation.org

Medical Assisted Treatment of America
This website aims to raise awareness and understanding of substance use, the problems it creates, and the ways to deal with these problems.
368 Johnston Parkway
Kennesaw, GA 30152-4445
770-428-0871
http://www.medicalassistedtreatment.org

Methadone Support Organization (MSO)
This group is a support organization for medically assisted treatment available for people addicted or dependent on opiates for any reason. Its provider- and patient-friendly online support resources include information on methadone and pregnancy, Methadone Anonymous, support forums, on-site experts to answer questions, and more.
http://www.methadonesupport.org/board.html

Minnesota Department of Human Services Alcohol and Drug Abuse Division
This department develops and maintains an effective chemical health service system in Minnesota that encourages and supports research-informed practices surrounding substance use disorders.
651-431-2460
http://www.dhs.state.mn.us

National Alliance for Medication Assisted Recovery (NAMA Recovery)
This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.
435 Second Avenue
New York, NY 10010
212-595-NAMA (6262)
http://www.methadone.org

National Alliance of Advocates for Buprenorphine Treatment (NAABT)
This nonprofit organization has the mission to educate the public about the disease of opioid addiction and the buprenorphine treatment option, to help reduce discrimination associated with patients with addiction disorders, and to serve as a conduit for connecting patients in need of treatment to qualified treatment providers.
P.O. Box 333
Farmington, CT 06034
860-269-4390
http://www.naabt.org

National Association on Alcohol, Drugs and Disability, Inc. (NAADD)
This association promotes awareness and education about substance use disorders among people with physical, sensory, cognitive, and developmental disabilities.
2165 Bunker Hill Drive
San Mateo, CA 94402
650-578-8047
http://www.naadd.org

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)
Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the Nation's #1 health problem—alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease of alcoholism and drug dependence through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.
244 East 58th Street, Fourth Floor
New York, NY 10022
800-NCA-CALL (622-2255)
212-269-7797
http://www.ncadd.org

New York State Office of Alcoholism and Substance Abuse Services
This organization works to improve the lives of residents of New York by leading a system of addiction services through prevention, treatment, and recovery.
1450 Western Avenue
Albany, NY 12203-3526
518-473-3460
http://www.oasas.ny.gov

North Carolina Department of Health and Human Services
Division of Mental Health
Developmental Disabilities and Substance Abuse
This office is primarily responsible for leadership, guidance, and management of relationships with the local management entities who contract directly for addiction treatment services. It also collaborates with a wide variety of public and private partners and customers to promote recovery through the adoption of recovery-oriented systems of care and the promotion of a reduction to barriers to services.
919-733-4534
http://www.dhhs.state.nc.us/MHDDSAS

Oxford House, Inc.
This is the umbrella organization for a network of more than 1,200 democratically run, self-supporting, and drug-free group homes throughout the country.
1010 Wayne Avenue, Suite 300
Silver Spring, MD 20910
800-689-6411
301-587-2916
http://www.oxfordhouse.org

Partnership for a Drug-Free NC, Inc.
This partnership coordinates statewide resources and provides services to reduce the negative impact of substance use and mental illness on North Carolina's individuals, families, and communities.
665 West Fourth Street
Winston-Salem, NC 27101
888-732-3362
336-725-8389
http://www.drugfreenc.org

Partnership for Recovery (PFR)
This coalition includes the Betty Ford Center, Bradford Health Systems, Cumberland Heights, Father Martin's Ashley, Gateway Rehabilitation Center, Hazelden Foundation, Valley Hope Association, and the National Association of Addiction Treatment Providers.
101 Constitution Avenue NW, Suite 675 East
Washington, DC 20001
202-737-8167
http://www.partnershipforrecovery.org

Pennsylvania Department of Health
Bureau of Drug and Alcohol Programs
This State government agency develops and implements a comprehensive health, education, and rehabilitation program for the prevention, intervention, treatment, and case management of substance use disorders.
02 Kline Plaza, Suite B
Harrisburg, PA 17104
717-783-8200
http://www.health.state.pa.us/bdap

PRO-ACT
This grassroots recovery support initiative in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties) has provided prevention, intervention and recovery support services, as well as education and advocacy to the community for 11 years. It has been providing a growing matrix of peer-to-peer support services, which has led to the opening of three Recovery Community Centers, now a hub for all recovery services.
252 West Swamp Road, Suite 12
Doylestown, PA 18901
800-221-6333
http://www.proact.org

The Providence Center
For a full description, refer to Mental Health.

Psychology Today
This organization is dedicated to helping people understand their addiction, the issues behind it, and how to overcome the challenge.
115 East 23rd Street, Ninth Floor
New York, NY 10010
212-260-7210
http://www.psychologytoday.com

Recovery Works
This group offers resources for recovery from various forms of addiction.
http://www.recoveryworks.info

The Second Road Inc.
This is a 24-hour, web-based, nonprofit group to help those in recovery (and the families of those affected by addiction) learn to live with the challenges presented by everyday life and continue on a fulfilling road of recovery. The site offers a community of trust and understanding, inspiring stories from people of diverse cultures and backgrounds, the knowledge of many experts in the addiction treatment field, and the tools to resist relapse in a secure, non-threatening environment.
P.O. Box 1506
Charlottesville, VA 22902
434-295-9595
http://www.thesecondroad.org

State Associations of Addiction Services (SAAS)
This is the national organization of State provider associations representing treatment and prevention programs for substance use disorders.
236 Massachusetts Avenue NE, Suite 505
Washington, DC 20002
202-546-4600
http://www.saasnet.org

The T.A. LIBBY Group
This group provides addiction science education and recovery advocacy through published work, continuing education workshops, conference presentations, and visibility events.
2003 Tundra Court
Annapolis, MD 21401
443-822-6791
http://www.talibby.com

Treatment Communities of America (TCA)
This national nonprofit membership association represents more than 650 substance use and mental health treatment programs that provide a variety of services to substance use and co-occurring disorder clients with a range of special needs.
1601 Connecticut Avenue NW, Suite 803
Washington, DC 20009
202-296-3503
http://www.therapeuticcommunitiesofamerica.org

Vera Institute of Justice, La Bodega de la Familia
For a full description, refer to Justice/Legal System.

Education

These organizations help to inform individuals, families, and the public about mental and/or substance use disorders.

A&E Network
Inspired by the overwhelming response to its Emmy-nominated series Intervention, this television network created The Recovery Project, a multi-year campaign designed to generate widespread awareness that addiction is a treatable disease and recovery is possible.
http://www.therecoveryproject.com

American Council on Alcoholism (ACA)
This group is dedicated to educating the public about the effects of alcohol, alcoholism, alcohol abuse, and the need for prompt, effective, readily available, and affordable alcoholism treatment.
1000 East Indian School Road
Phoenix, AZ 85014
800-527-5344
http://www.aca-usa.org

Boston University Center for Psychiatric Rehabilitation
The center is a research, training, and service organization dedicated to improving the lives of people who have psychiatric disabilities.
940 Commonwealth Avenue West
Boston, MA 02215
617-353-3549
http://www.bu.edu/cpr

Boston University School of Medicine (BUMC)
The school provides summaries of the latest clinically relevant research on alcohol and health, particularly in the area of health disparities. The newsletter, "Alcohol and Health: Current Evidence," is published by BUMC.
801 Massachusetts Avenue, Second Floor
Boston, MA 02118
617-638-5300
http://www.bu.edu/act/alcoholandhealth/index.html

Boston University School of Public Health
This school works to improve the health of local, national, and international populations, particularly the disadvantaged, underserved, and vulnerable, through excellence and innovation in education, research, and service.
715 Albany Street
Boston, MA 02118
617-638-4640
http://www.bumc.bu.edu

Connecticut Clearinghouse
This organization serves as Connecticut's resource center for information about alcohol, tobacco, drugs, and related issues.
334 Farmington Avenue
Plainville, CT 06062
800-232-4424
860-793-9791(TTY)
http://www.ctclearinghouse.org

Discover Films
This company produces award-winning health and educational videos for students, educators, and group leaders.
P.O. Box 1745
Covington, LA 70434
985-892-7571
http://www.discover-films.com

DrugAlert.org
This comprehensive database features information and news alerts about potentially dangerous drugs currently on the market or previously available worldwide. The website is dedicated to keeping the public informed about drug recalls, side effects, and pending litigation associated with various drugs and their manufacturers.
http://www.drugalert.org

Drug Strategies
This group develops publications and programs focused on effective approaches to the Nation's drug problems. It publishes a guide to treating youth with substance use disorders titled "Treating Youth: A Guide to Adolescent Drug Programs."
1616 P Street NW, Suite 220
Washington, DC 20036
800-559-9503
202-289-9070
http://www.drugstrategies.org

Entertainment Industries Council, Inc. (EIC)
This nonprofit organization works within the film, television, and music industries to promote the accurate depiction of health and social issues in entertainment productions.
EIC East Coast
1856 Old Reston Avenue, Suite 215
Reston, VA 20190-3305
703-481-1414

EIC West Coast
3000 West Alameda Avenue
Administrative Building, Suite 225
Burbank, CA 91523
818-840-2016
http://www.eiconline.org

Join Together
This national resource for communities working to reduce substance use disorders offers a comprehensive website, daily news updates, publications, and technical assistance.
580 Harrison Avenue, Third Floor
Boston, MA 02118
617-437-1500
http://www.jointogether.org

Mental Help, Educate and Advocate
This website is a compilation of information gathered by members of the Massachusetts Department of Mental Health (DMH) Southwest Suburban Site Board. Its mission is to learn about, educate, and advocate for all people living with mental illness.
http://www.mentalhelpinfo.org

National Association of Attorneys General (NAAG)
This association offers information about statewide tobacco settlements.
2030 M Street NW, Eighth Floor
Washington, DC 20036
202-326-6000
http://www.naag.org

National Alliance for Medication Assisted Recovery (NAMA Recovery)
This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.
435 Second Avenue
New York, NY 10010
212-595-NAMA (6262)
http://www.methadone.org

Odyssey Networks
This network is the Nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.
475 Riverside Drive
New York, NY 10115
212-870-1030
http://www.odysseynetworks.org

OpenMindsOpenDoors
This initiative is aimed at ending discrimination against people with mental illness and is coordinated by the Mental Health Association in Pennsylvania. The campaign is centered on educating the public about mental illness and the legal rights of people living with a mental illness.
c/o MHAPA
1414 North Cameron Street, First Floor
Harrisburg, PA 17103
717-346-0549
http://www.openmindsopendoors.com

Pressing the Issue
This site's goal is to educate people about the ins and outs of the problems of drug addiction and diseases associated with using drugs.
http://www.pressingtheissue.com

Recovery Living Network
This global communications network focuses on addiction recovery and prevention, using the power of personal experience, celebrity influence, and mass media communication to help individuals when alcohol, drugs, or other excessive behaviors have become a problem in their lives. Its mission is to remove misconceptions from the public psyche to change the perception and image of addiction by talking about it openly and honestly, and by sharing personal stories of hope and inspiration.
949-887-0242
310-600-3079

Recovery Network Foundation (RNF)
This foundation develops recovery-dedicated projects in print, radio, TV, film, and video formats. "Under the Influence: The Film Series" is a national touring festival that showcases films in which addiction and recovery play leading roles.
P.O. Box 8969
Briarcliff Manor
New York, NY 10510-8969
914-941-2863
http://www.recoverynetworkfoundation.org

RecoveryNC
*Initiated in September 2008 to coincide with the celebration of **Recovery Month**, this campaign allows North Carolinians in recovery to emerge together, along with their families, friends, advocates, and the treatment and recovery provider community.*
1730 Varsity Drive, Suite 105
Raleigh, NC 27606
919-802-7972
http://www.recoverync.org

Talk Therapy Television
Talk Therapy Television, Inc. or Talk Therapy TV is a private, not-for-profit organization that produces and broadcasts weekly television programming dedicated to promoting behavioral health awareness, treatment, and recovery. Additionally, Talk Therapy TV promotes creative and innovative ideas that generate public dialogue and discussion, and reduce the stigma associated with these disorders.
95-21 106 Street
Ozone Park, NY 11416
631-780-2807
http://www.talktherapytv.org

Wisconsin Clearinghouse for Prevention Resources
The clearinghouse provides substance use prevention resources for youth, parents, schools, and communities.
University Health Services, UW-Madison
333 East Campus Mall, #8104
Madison, WI 53715-1381
800-248-9244
608-262-9157
http://wch.uhs.wisc.edu

Recovery Support Groups

These organizations include peer-to-peer organizations, mutual support groups, and counseling services that offer support to individuals recovering from mental and/or substance use disorders.

16 Steps of Discovery and Empowerment
This group offers support for a wide variety of quality of life issues, such as addiction, codependency, abuse, and empowerment. The 16 Steps focus on a positive approach to help members celebrate personal strengths, stand up for themselves, heal physically, express love, and see themselves as part of the entire community, not just the recovery community.
P.O. Box 1302
Lolo, MT 59847
406-273-6080
http://www.charlottekasl.com

Abraham Low Self-Help System (ALSHS, formerly Recovery Inc.)
These meeting groups are safe places to talk about life's struggles with others who have experienced similar struggles in their lives.
105 West Adams Street, Suite 2940
Chicago, IL 60603
866-221-0302
http://www.recovery-inc.com

Adult Children of Alcoholics (ACA) World Service Organization (WSO)
This is a 12-step, 12-tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Members meet with each other in a mutually respectful, safe environment and acknowledge common experiences.
P.O. Box 3216
Torrance, CA 90510
562-595-7831
http://www.adultchildren.org

AIDS Service Center of New York City
This organization's comprehensive programs include state-of-the-art peer education and training, harm reduction, specialized women's services, HIV counseling and testing, mental health services, medical and holistic care, case management, support groups, and many other innovative programs that help New York City's most vulnerable individuals and families to survive and thrive in the face of HIV/AIDS.
41 East 11th Street, Fifth Floor
New York, NY 10003
212-645-0875
http://www.ascnyc.org

Al-Anon/Alateen
This 12-step mutual support program provides groups for adults and teenagers who are the families and friends of alcoholics.
Al-Anon Family Group Headquarters, Inc.
1600 Corporate Landing Parkway
Virginia Beach, VA 23454-5617
757-563-1600
http://www.al-anon.alateen.org

Alcohol and Drug Council of Middle Tennessee: Nashville Area Recovery Alliance (NARA)
This grassroots membership-based organization is comprised of individuals in recovery, as well as their families, friends, and allies.
P.O. Box 330189
Nashville, TN 37203
615-269-0029
http://www.adcmt.org

Alcoholics Anonymous (AA)
This support group provides sponsorship and a 12-step program for life without alcohol.
P.O. Box 459
New York, NY 10163
212-870-3400
http://www.aa.org

Alcoholics Victorious
For a full description, refer to Faith-Based Organizations.

All Addicts Anonymous
This program is available to help all addicts who suffer from a range of addictions (alcohol, drugs, tobacco, sex, lying, etc.) recover. Participants adopt the Four Absolutes, the 12 Steps, and the Ten Points as a way of life.
P.O. Box 500
Hankins, NY 12741
888-4 AAA GROUP (422-2476)
http://www.alladdictsanonymous.org

American Self-Help Sourcebook
This is a searchable database of more than 1,100 national, international, and online self-help support groups for addictions, bereavement, health, mental health, disabilities, abuse, parenting, caregiver concerns, and other stressful life situations.
Saint Clare's Health Services
100 East Hanover Avenue, Suite 202
Cedarknolls, NJ 07927-2020
973-326-6789
http://www.mentalhelp.net/selfhelp

Anesthetists in Recovery (AIR)
This is a network of recovering nurse anesthetists. Members support one another through phone support, information, and referrals to groups and treatment.
222 South Prospect Avenue
Park Ridge, IL 60068
847-692-7050
http://www.aana.com/Resources.aspx?id=1224

Asian Counseling and Referral Service, Inc.
This service provides a culturally competent, linguistically accessible community recovery center for Asian and Pacific Americans and other immigrants and refugees with a history of substance use disorders.
3639 Martin Luther King Jr. Way South
Seattle, WA 98144
206-695-7600
http://www.acrs.org

Association of Persons Affected by Addiction (APAA)
This nonprofit recovery community organization is designed to engage the faces and voices of the recovery community in reducing stigma. It provides peer-to-peer recovery community support services.
2438 Butler Street, Suite 120
Dallas, TX 75235
214-634-APAA (2722)
http://www.apaarecovery.org

Benzodiazepine Anonymous (BA)
This is a mutual support group for people in recovery from addiction to benzodiazepines (Xanax®, Halcion®, Valium®, Ativan®, Dalmane®, Librium®, etc.) or any other addicting prescription drug. BA uses its own lists of 12 steps and 12 goals.
11507 Cumpston Street
North Hollywood, CA 91601
818-667-1070

Bucks County Council on Alcoholism
The council is an independent nonprofit organization whose mission is to provide resources and opportunities to reduce the impact of addiction and to improve related health issues for the entire community. It provides services such as consultation, assessment, intervention, and treatment.
252 West Swamp Road, Suite 12
Doylestown, PA 18901
800-221-6333
215-345-6644
http://www.bccadd.org

Calix Society
For a full description, refer to Faith-Based Organizations.

Center for Community Alternatives: Recovery Network of New York
This project organizes recovering individuals who have a history of involvement in the criminal justice system to improve the delivery of treatment to offenders and ex-offenders and to help reduce the dual stigmatization of ex-offenders in recovery.
115 East Jefferson Street, Suite 300
Syracuse, NY 13202
315-422-5638, ext. 222
http://www.communityalternatives.org

Center for the Application of Substance Abuse Technologies (CASAT)
Frontier Recovery Network
The staff and peer volunteers of the Frontier Recovery Network assist recovering individuals in Reno, NV, with education about or referral for treatment, housing, transportation, child care, and life skills.
Mail Stop 279
University of Nevada, Reno
Reno, NV 89557-0258
775-784-6265
http://casat.unr.edu

Central City Concern: Recovery Association Project (RAP)
This peer-led recovery community organization focuses on building leadership and power among people in recovery. Its strengths-based peer services are available to other groups, including trainings on organizing recovering people with a focus on leadership and active citizenship, and implementing a peer-led recovery mentor program.
18438 Southeast Pine Street
Portland, OR 97233
503-489-0470
http://www.centralcityconcern.org
http://www.rap-nw.org

Chapter Nine Group of Hollywood, MD
This is a 12-step program of recovering couples in which partners work together. The group name comes from chapter nine of the Alcoholics Anonymous Big Book "The Family Afterwards," which is based on the belief that members of the family or couples should meet on the common ground of tolerance, understanding, and love.
1168 White Sands Drive
Lusby, MD 20657
410-586-1425

Chemically Dependent Anonymous (CDA)
This group's purpose is to carry the message of recovery to the chemically dependent person for those with a desire to abstain from alcohol and drugs.
P.O. Box 423
Severna Park, MD 21146
888-CDA-HOPE (232-4673)
http://www.cdaweb.org

Clark Associates: The Detroit Recovery Project
This organization offers useful information, training, and city-wide support and resources for making communities safe and drug free.
1151 Taylor Street, Room 317B
Detroit, MI 48202
313-876-0770
http://www.drugfreedetroit.org

Co-Anon Family Groups
This is a fellowship of men and women who are husbands, wives, parents, relatives, or close friends of someone who is chemically dependent. The program is primarily a 12-step program that combines self and mutual support systems.
P.O. Box 12722
Tucson, AZ 85732-2722
800-898-9985
http://www.co-anon.org

Cocaine Anonymous World Services
This is a fellowship of men and women who share their experience, strength, and hope with each other so that they may solve their common problem and help others to recover from their addiction.
3740 Overland Avenue, Suite C
Los Angeles, CA 90034
800-347-8998
310-559-5833
http://www.ca.org

Collaborative Support Programs of New Jersey, Inc. Institute for Wellness and Recovery Initiatives
This organization is a nonprofit, statewide agency managed and operated by and for consumers of mental health services. The organization has four service areas that provide a full range of services throughout New Jersey: 1) community outreach and self-help center services; 2) supportive housing services and housing development; 3) supported employment; and 4) technical assistance/training focused on the Eight Dimension Wellness Model.
Eight Spring Street
Freehold NJ, 07728
732-677-1682
http://www.cspnj.org
http://www.welltacc.org

Connecticut Community for Addiction Recovery (CCAR)
A community of people in recovery, family members, friends, and allies, this group is organized to put a positive face and voice on recovery from substance use disorders.
198 Wethersfield Avenue
Hartford, CT 06114
860-224-2227
http://www.ccar.us

Connecticut Department of Mental Health Addiction Services (DMHAS)
For a full description, refer to Mental Health.

Council of Southeast Pennsylvania, Inc.
This is a private nonprofit prevention, education, advocacy, assessment, intervention, and recovery support organization, serving the counties of Bucks, Chester, Delaware, Montgomery, and Philadelphia. The Council provides a wide range of services to reduce the impact of addiction and improve related health issues for the entire community, including families, schools, businesses, individuals, and the community, regardless of ability to pay, ethnicity, race, gender, age, or sexual orientation.
252 Swamp Road, Suite 12
Doylestown, PA 18901
215-345-6644
http://www.councilsepa.org

Council on Alcoholism and Drug Abuse
The council provides peer-led recovery support services in Santa Barbara, CA.
232 East Canon Perdido Street, P.O. Box 28
Santa Barbara, CA 93102
805-963-1433
http://www.cadasb.org

Crystal Meth Anonymous
This program is a 12-step fellowship for those in recovery from addiction to crystal meth. The only requirement for membership is the desire to stop using crystal meth.
4470 West Sunset Boulevard, Suite 107 PMB 555
Los Angeles, CA 90027-6302
213-488-4455
http://www.crystalmeth.org

Council on Substance Abuse (COSA-NCADD)
This is a nonprofit voluntary organization combating alcoholism, other drug addictions, and related problems. COSA-NCADD's major programs include prevention and education, information and referral, advocacy, public awareness, and technical assistance. COSA-NCADD is a member and the state association for the Community Anti-Drug Coalitions of America (CADCA).
828 Forest Avenue
Montgomery, AL 36106
334-262-1629
http://www.cosancadd.org

Cyber Recovery Fellowship
This website offers faith-based support forums for people in recovery.
http://www.cyberrecovery.net/forums

Detroit Recovery Project
This organization provides an array of support services, such as cognitive behavioral therapy; rapid HIV testing; hepatitis vaccinations; family re-integration; 12-step support groups; alcohol, tobacco, and other drug prevention; employment training; GED classes; and outpatient treatment to thousands of Detroiters every year. The ultimate goal is to encourage those seeking recovery to achieve and maintain long-term recovery and live productive, drug-free lifestyles.
1121 E. McNichols
Detroit, MI 48203
877-937-9377
http://recovery4detroit.com/?menu=home

DC Bar – Lawyer's Assistance Program
For a full description, refer to Justice/Legal System.

Double Trouble Recovery, Inc.
This is a fellowship of men and women who share their experience, strength, hope with each other so that they may solve their common problems, and help others to recover from their particular substance use and mental disorders.
P.O. Box 245055
Brooklyn, NY 11224
718-373-2684
http://www.doubletroubleinrecovery.org

Dual Diagnosis Anonymous World Services, Inc.: Dual Diagnosis Anonymous Expansion Project
This project addresses the needs of individuals diagnosed with co-occurring substance use disorders and mental illness.
P.O. Box 8107
Prairie Village, KS 66208
909-888-9282
http://draonline.org

Dual Recovery Anonymous (DRA)
This is a self-help program for individuals who experience a dual disorder of chemical dependency and a psychiatric or emotional illness. The group is based on the principles of the 12 steps and the personal experiences of individuals in dual recovery.
P.O. Box 8107
Prairie Village, KS 66208
877-883-2332
913-991-2703
http://www.draonline.org

Eastern Band of Cherokee Indians: A-Ye-Ga: Awakening the Recovery Spirit
This recovery community organization is of, by, and for the Eastern Band of Cherokee Indians.
P.O. Box 455
Cherokee, NC 28719
828-497-7000
http://www.nc-cherokee.com

Easy Does It, Inc.: Full Circle
This group organizes committees that focus on a holistic approach to the process of personal growth within the recovery process.
1300 Hilltop Road
Leesport, PA 19533
610-373-2463
http://www.easydoesitinc.org

eGetGoing
eGetGoing's mission is to bring high-quality, affordable, and confidential treatment to a much larger segment of the population, where and when they need it.
20400 Stevens Creek Boulevard
Cupertino, CA 95014
877-757-6237
408-998-3040
http://www.egetgoing.com

Emotions Anonymous (EA)
This is a 12-step organization, similar to Alcoholics Anonymous. The fellowship is composed of people who come together in weekly meetings to work toward recovery from emotional difficulties. EA members are from many walks of life and are of diverse ages, economic statuses, and social and educational backgrounds. The only requirement for membership is a desire to become well emotionally.
P.O. Box 4245
St. Paul MN 55104-0245
651-647-9712
http://emotionsanonymous.org

Exponents, Inc.
This minority-led organization is dedicated to improving the quality of life of individuals affected by drug addiction, incarceration, and HIV/AIDS. Programs assist individuals and their families through difficult transitions from addiction to recovery, from incarceration to civilian life, and from welfare to work.
151 West 26th Street, Third Floor
New York, NY 10001
212-243-3434
http://www.exponents.org

Families Anonymous (FA)
This is a 12-step self-help recovery fellowship of support groups for relatives and friends of those who have alcohol, drug, or behavioral problems. The group is a nonprofit mutual help organization and is not affiliated with any religion or institution.
P.O. Box 3475
Culver City, CA 90231-3475
800-736-9805
http://www.familiesanonymous.org

Family Empowerment Network (FEN)
This network offers support, education, and training for families of children with fetal alcohol syndrome or fetal alcohol effects, as well as interested professionals. The group creates a network of families that support one another and hosts annual family retreats.
1100 Delaplaine Court
Madison, WI 53715
800-462-5254
608-261-1419
http://pregnancyandalcohol.org/index.asp?menuID=142&firstlevelmenuID=142&siteID=1

Fathers Against Drunk Driving (FADD)
This organization's mission is to reduce the alcohol-related deaths within the community. FADD has over 7,000 members nationwide, in addition to members in Canada and in Mexico.
311 Conley Street
Porterville, CA 93257
559-756-1748
http://www.faddintl.org

Fetal Alcohol Syndrome Family Resource Institute (FASFRI)
This is a grassroots coalition of families and professionals concerned with fetal alcohol syndrome effects. The group offers educational programs, brochures, information packets, group meetings, phone support, conferences, and referrals.
P.O. Box 2525
Lynnwood, WA 98036
800-999-3429
http://www.fetalalcoholsyndrome.org

Foundation for Recovery
This organization promotes the positive impact recovery has in the community and in the lives of individuals and families affected by substance use and/or mental health conditions. Its programs, services, and partnerships open pathways for recovery by removing social barriers and creating opportunities for those seeking recovery.
4750 West Sahara Avenue, Suite 10
Las Vegas, NV 89102
702-257-8199
http://www.forrecovery.org

Free-N-One
This support group teaches people to be free mentally and spiritually, as well as free from drugs and alcohol. It offers information and referrals, phone support, literature, and conferences.
538 South Overhill Drive
Los Angeles, CA 90043
323-359-0009
http://www.free-n-one.org

GROUP Ministries, Inc.
This project provides peer recovery support services focused primarily on African Americans and other people of color.
799 Jefferson Avenue
Buffalo, NY 14203
716-883-4367
http://gmibuffalo.org

Heartland Cares, Inc.
This project promotes effective long-term recovery among HIV-positive people in rural areas of Kentucky and Illinois.
3025 Clay Street
Paducah, KY 42001
877-444-8183
270-444-8183
http://www.hcares.org

Hypoics Not Anonymous (HNA)
HNA is for anyone with any type of addiction. The group uses the philosophy that addictions are caused by neurological mechanisms rather than personal weaknesses.
8779 Misty Creek Drive
Sarasota, FL 34241
941-929-0893
http://www.nvo.com/hypoism/hypoicsnotanonymous

Inter-Congregational Alcoholism Program (ICAP)
For a full description, refer to Faith-Based Organizations.

International Doctors in Alcoholics Anonymous (IDAA)
This is a group of approximately 4,500 recovering health care professionals of doctorate level who help one another achieve and maintain sobriety from addictions.
2616 NW 25th Place
Gainesville, FL 32605-2826
352-375-0240
http://www.idaa.org

International Lawyers in Alcoholics Anonymous (ILAA)
This organization serves as a clearinghouse for support groups for lawyers who are recovering from alcohol or other chemical dependencies.
416-925-0734
http://www.ilaa.org

International Pharmacists Anonymous (IPA)
This is a 12-step fellowship of pharmacists and pharmacy students recovering from any addiction.
11 Dewey Lane
Glen Gardner, NJ 08826-3102
908-537-4295
http://mywebpages.comcast.net/ipa/ipapage.htm

KeepComingBack.com
This website provides the latest news and research about addiction and recovery, interviews with experts on recovery, and the ability to join a network of people seeking recovery.
http://www.keepcomingback.com

Lesbian, Gay, Bisexual and Transgender Community Center SpeakOUT!: Voices for Recovery
This center works to create safe and welcoming spaces for lesbian, gay, bisexual, and transgender people in recovery.
208 West 13th Street
New York, NY 10011
212-620-7310
http://www.gaycenter.org

LifeRing
This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. LifeRing welcomes people from all faiths, or none, but those beliefs are private. LifeRing brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications, and interactive online resources.
1217 23rd Street
Sacramento, CA 95816
800-811-4142
http://www.lifering.org

Los Angeles Recovery Guide
The Los Angeles Recovery Guide is a comprehensive directory of sober events in the Los Angeles area. Considered one of the best cities in the world for 12-step fellowship, The Los Angeles Recovery Guide gives you an inside look into what's going on and where it's happening. LA has over 1500 meetings a week; our detailed meeting directory is a quick and easy stop to find the one that's right for you. From local hotspots to the biggest sober parties, conventions and events in the city, the LA Recovery Guide is your go to directory for everything sobriety has to offer.
http://www.castrecovery.com/larecoveryguide.php

MAP Accountability Services, LLC
This organization is the creator of the revolutionary 12-step based MAP Program. Through its Monitoring & Accountability Program, MAP is changing the field of recovery by successfully detecting early relapse behaviors and course correcting before a substance use event occurs. The result is multi-dimensional; alcoholics and addicts achieve a balanced life of long-term sobriety, and treatment centers are provided invaluable outcome data regarding the recovery rates of their alumni.
855-627-1010
www.relapseprevention.org

Marijuana Anonymous World Services
This is a fellowship of men and women who share a desire to stop using marijuana. They accomplish their goals by using the basic 12 steps of recovery founded by Alcoholics Anonymous.
P.O. Box 2912
Van Nuys, CA 91404
800-766-6779
http://www.marijuana-anonymous.org

Massachusetts Organization for Addiction Recovery (MOAR)
This organization is a collective voice of people in recovery, families, and friends who are helping each other educate the public about the value of living in recovery and the resources to support recovery.
30 Winter Street, Third Floor
Boston, MA 02108
617-423-6627
http://www.moar-recovery.org

Men Against Destruction Defending Against Drugs and Social Disorder (MADD DADS Inc.)
This organization provides family activities, community education, speaking engagements, and "surrogate fathers" who listen to and care about street teens.
5732 Normandy Boulevard
Jacksonville, FL 32205
904-781-0905
http://www.maddads.com

Men for Sobriety
This organization's purpose is to help all men recover from problem drinking through the discovery of self, gained by sharing experiences, hopes, and encouragement with other men in similar circumstances.
P.O. Box 618
Quakertown, PA 18951-0618
215-536-8026

Minnesota Recovery Connection (MRC)
MRC is a community comprised of individuals, families, and entire communities seeking recovery. MRC offers hope and help for recovery for those who need it, for those who want it, and for those who can give it.
253 State Street
St. Paul, MN 55107
651-233-2080
http://www.minnesotarecovery.org

Mothers Against Drunk Driving (MADD)
This group's mission is to stop drunk driving, support victims, and prevent underage drinking.
511 East John Carpenter Freeway, Suite 700
Irving, TX 75062
800-GET-MADD (438-6233)
http://www.madd.org

Multifaith Works
This group unites communities of compassionate care and inclusive spirituality with people living in isolation and loneliness. The network provides administrative, emotional, and supervisory support, as well as volunteer recruitment, training, and leadership skill development for peer volunteers.
115 16th Avenue
Seattle, WA 98122
206-324-1520
http://www.multifaith.org

MusiCares
This program provides a safety net of critical assistance for people in times of need. Its services and resources cover a wide range of financial, medical, and personal topics. It also focuses the resources and attention of the music industry on human service issues that directly impact the health and welfare of the music community.
11 West 42nd Street, 27th Floor
New York, NY 10036-8002
310-392-3777 (West Region)
212-245-7840 (East Region)
615-327-0050 (South Region)
http://www.musicares.com

Nar-Anon/Narateen
This organization provides support for families and friends of drug users.
22527 Crenshaw Boulevard, Suite 200 B
Torrance, CA 90505
800-477-6291
310-534-8188
http://www.nar-anon.org

Narcotics Anonymous World Services (NA)
This is a nonprofit fellowship society of men and women for whom drugs had become a major problem. Membership is open to all, regardless of the particular drug or combination of drugs used.
P.O. Box 9999
Van Nuys, CA 91409
818-773-9999
http://www.na.org

National Association for Children of Alcoholics (NACoA)
This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.
10920 Connecticut Avenue, Suite 100
Kensington, MD 20895
888-55-4COAS (2627)
301-468-0985
http://www.nacoa.org

National Council on Alcoholism and Drug Dependence – Greater Detroit Area (NCADD-GDA)
This council provides effective alcohol and drug abuse intervention, prevention, and treatment services to children and adults with substance use disorders in the Detroit area.
2400 E. McNichols
Detroit, MI 48212
313-868-1340
http://www.ncadd-detroit.org

National Council on Alcoholism and Drug Dependence - New Jersey, Inc. (NCADD-NJ): Friends of Addiction Recovery-New Jersey (FOAR-NJ)
This organization promotes recovery and builds leadership skills and capacity in the recovery community.
360 Corporate Boulevard
Robbinsville, NJ 08691
609-689-0599
http://www.ncaddnj.org

National Families in Action (NFIA)
This website includes the group's Guide to the Drug-Prevention Movement, Guide to the Drug-Legalization Movement, Guide to Drug-Related State-Ballot Initiatives, and many substance-specific fact sheets about the effects of each drug on the brain. The site also offers the "NFIA Drug Abuse Update" digest.
P.O. Box 133136
Atlanta, GA 30333-3136
404-248-9676
http://www.nationalfamilies.org

National Family Partnership (NFP)
This partnership is a coalition of families working for substance use prevention. The group hosts a number of prevention activities, including the Red Ribbon Campaign and the Plant the Promise Campaign.
2490 Coral Way, Suite 501
Miami, FL 33145
800-705-8997
305-856-4886
http://www.nfp.org

National Home Infusion Association (NHIA)
This trade association represents and advances the interests of organizations that provide infusion and specialized pharmacy services and products to the entire spectrum of home-based patients.
100 Daingerfield Road
Alexandria, VA 22314
703-549-3740
http://www.nhia.org

National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN)
This private, nonprofit foundation promotes networking between rural programs and professionals, along with providing liaisons to key Federal and State government agencies and private resources.
University of Wisconsin-Stout
221 10th Avenue East
Menomonie, WI 54751-0790
715-232-2793
www.uwstout.edu/outreach/nri

National Women's Health Resource Center (NWHRC)
This nonprofit organization, which is dedicated to helping women make informed decisions about their health, encourages women to embrace healthy lifestyles to promote well-being and prevent disease. The NWHRC website offers an extensive alphabetical listing of health topics—such as HIV/AIDS, substance abuse, smoking, and violence against women—that provide science-based information on their topics. Each section includes a link to the source reference documents used for developing the topic materials.
157 Broad Street, Suite 106
Red Bank, NJ 07701
877-986-9472
http://www.healthywomen.org

New England Institute of Addiction Studies (NEIAS) and New England Alliance for Addiction Recovery (NEAAR): Expanding the New England Alliance for Addiction Recovery
This collaboration of statewide recovery community organizations is dedicated to the promotion and enhancement of recovery and to improving public awareness about substance use disorders.
75 Stone Street
Augusta, ME 04330
207-621-2549
http://www.neias.org

North Carolina Voices for Recovery
This organization seeks to change public perceptions of recovery, demonstrate that recovery works for millions of Americans, and provide support to individuals in recovery, as well as their families.
http://www.ncv4recovery.org

Northern Ohio Recovery Association (NORA)
This project provides faith-based recovery support services across three Ohio counties.
3746 Prospect Avenue
Cleveland, OH 44115
216-391-6672
http://www.norainc.org

Oklahoma Citizen Advocates for Recovery and Treatment
This group's mission is to empower recovering people and their families through physical, emotional, and spiritual growth to make significant contributions to society.
2808 Northwest 31st Street
Oklahoma City, OK 73112
866-848-7555
http://www.ocarta.org

Overcomers In Christ (OIC)
For a full description, refer to Faith-Based Organizations.

Overcomers Outreach, Inc.
For a full description, refer to Faith-Based Organizations.

Pascua Yaqui Tribe of Arizona: Community Change Oriented Recovery Effort (C-CORE)
This program provides quality, competent, and culturally compatible peer services to tribal and community members.
7474 South Camino De Oeste
Tucson, AZ 85757
520-883-5000
http://www.pascuayaqui-nsn.gov

Pennsylvania Recovery Organizations Alliance, Inc. (PRO-A)
Statewide/Regional Community Mobilization Project
This project supports recovery through peer-driven support services and education.
900 South Arlington Avenue, Suite 119
Harrisburg, PA 17109
717-545-8929
http://www.pro-a.org

Pills Anonymous (PA)
This self-help, self-supporting, anonymous 12-step program is based on Alcoholics Anonymous. It is designed for those who want to help themselves and others recover from chemical addiction.
http://www.pillsanonymous.org/

Pima Prevention Partnership: A Recovery Movement For and About Young People
This partnership aims to reduce relapse and supports wellness using a strength-based approach to recovery for Native Americans.
2525 East Broadway, Suite 100
Tucson, AZ 85716
520-624-5800
http://www.thepartnership.us

Pinal Hispanic Council: Proyecto Bienestar (Project WellBeing)
This project seeks to empower members to assist others, motivating them to sustain recovery through education and training.
712 North Main Street
Eloy, AZ 85231
520-466-7765
http://www.pinalhispaniccouncil.org/grants/RCSPGrant.htm

Psychologists Helping Psychologists (PHP)
This mutual support group is for doctoral-level psychologists or students who have had a personal experience with alcohol or drugs.
3484 South Utah Street
Arlington, VA 22206
703-243-4470

The RASE Project
This project in south central Pennsylvania provides recovery support services, events, training and education, supportive housing, and intervention services. The RASE Project also offers the Buprenorphine Coordinator Program, providing recovery support for those in medication-assisted treatment for opioid addiction.
1820 Linglestown Road, Suite 101
Harrisburg, PA 17110
717-232-8535
http://www.raseproject.org

Rational Recovery Systems (RRS)
This is a program of self-recovery from addiction to alcohol and other drugs through planned, permanent abstinence using Addictive Voice Recognition Technique (AVRT).
P.O. Box 800
Lotus, CA 95651
530-621-2667
http://www.rational.org

Recovering Your Body
An organization awareness of the benefits of fitness, nutrition, athletics and energy healing in the recovery process through a website, articles, videos and, with the help of others, concrete programs.
4 Ridgedell Ave.
Hastings-on-Hudson, NY 10706
914-478-5048
http://recoveringyourbody.com

Recovery Alliance of El Paso
The alliance was organized in 1998 to fight stigma for people in recovery from substance use disorders and is now dedicated to providing peer-to-peer recovery support services.
P.O. Box 9669
El Paso, TX 79995
866-535-7276
915-594-7000
http://www.recoveryalliance.net

Recovery Consultants of Atlanta, Inc.
For a full description, refer to Faith-Based Organizations.

RecoveryNC
For a full description, refer to Education.

Recovery Resource Center
This comprehensive recovery resource center links individuals in recovery to an array of holistic recovery supports, with special emphasis on meeting the needs of women in recovery.
1140 Lake Street, Suite 500
Oak Park, IL 60301
708-445-0500

Relief Nurseries, Inc.: Accessing Success
This project targets parents of children in high-risk families and provides recovery support services.
1720 West 25th Avenue
Eugene, OR 97405
541-343-9706
http://www.reliefnursery.org

Rehab Programs Inc.
This community service provider helps find the right rehab program for those suffering from drug and alcohol addictions. With over 20 years in the substance abuse field, Rehab Programs Inc. understands the needs of people and their families.
866-501-3366
http://www.rehab-programs.org

Remove Intoxicated Drivers (RID)
This group's mission is to deter impaired driving and teen binge drinking that often leads to intense trauma for all concerned. Its members advocate for victims, enablers of tough laws, and watchdogs for law enforcement and adjudication in the courts.
P.O. Box 520
Schenectady, NY 12301
888-283-5144
518-372-0034
http://www.rid-usa.org

Rockland Council on Alcoholism & Other Drug Dependence, Inc.: Friends of Recovery-Rockland (FOR-Rockland)
The council challenges stereotypes about addiction recovery.
25 Smith Street, Suite 101
Nanuet, NY 10954
845-215-9788
http://www.rcadd.org

ROCKSTAR SUPERSTAR PROJECT (RSSS)
In a culture pervasive with messaging and branding that encourages risky behavior, twin brothers who legally changed their names to "Rock Star" and "Super Star" are on a mission to rebrand sobriety, inspiring responsible choices and dream catching. The brothers believe we have an obligation and an opportunity to inspire teens to make responsible choices and go boldly toward their dreams. RSSS programs encourage those crucial conversations.
http://www.rockstarsuperstarproject.com

Rosehedge/Multifaith Works
This group serves vulnerable men and women living with HIV/AIDS by providing housing, compassionate health care, and supportive services that enhance the quality of their lives. Rosehedge/Multifaith Works unites communities of compassionate care and inclusive spirituality with people living in isolation and loneliness.
115 16th Avenue
Seattle, WA 98112
206-324-1520
http://www.rosehedge.org/rosehedge-multifaith-works-home

Schizophrenia Anonymous (SA)
This is a self-help support group for people diagnosed with schizophrenia or a schizophrenia-related illness. SA was founded in the Detroit area in July 1985, and since that time, thousands of people have participated in meetings. There are currently more than 150 groups meeting throughout 31 States as well as Australia, Brazil, Canada, Mexico, France, India, and Venezuela.
P.O. Box 941222
Houston, TX 77094-8222
240-423-9432
http://www.sardaa.org/sa_main.html

Serving Children and Adolescents in Need
This youth outreach group is developing the "Futuros Saludables Recovery Services Program," which will enhance substance use treatment by promoting recovery, reducing relapse, and intervening when relapse does occur. The program will provide peer-designed and peer-led services with an emphasis on leadership development, principles of self-care, and cultural diversity among participants.
2347 E. Saunders, Suite B
Laredo, Texas 78401
800-355-7226
http://www.scan-inc.org

Shouting Inside
This website helps young people who misuse substances share their stories and their struggles with like-minded young people.
http://www.shoutinginside.com

SMART Recovery®
This international nonprofit organization offers free, self-empowering, science-based mutual help groups for abstaining from any substance or activity addiction. SMART stands for Self Management and Recovery Training. The SMART Recovery 4-Point Program® helps people recover from all types of addictive behaviors, including alcohol, drugs, substance abuse, gambling addiction, and addiction to other substances and activities. SMART Recovery currently sponsors more than 650 face-to-face meetings around the world and more than 16 online meetings per week, including a weekly online meeting for family and friends.
7304 Mentor Avenue, Suite F
Mentor, OH 44060
866-951-5357
440-951-5357
http://www.smartrecovery.org

Sober.com
This website is committed to providing those in need of drug rehab programs, alcoholism treatment, and substance abuse services with the most accurate information available.
http://www.sober.com

The Sober Recovery Community
This website offers support forums for people in recovery, as well as friends and family members affected by someone's substance use.
http://www.soberrecovery.com/forums

SOBRIETY TELEVISION
This is a YouTube channel with videos about addiction and recovery, as well as stories of recovery, the 12 steps, addiction topics, independent films, and more.
301-455-8381
http://youtube.com/sobrietytelevision

Social Workers Helping Social Workers (SWHSW)
This group supports people's recovery from alcohol or other chemical dependence, either their own or that of a significant other, among social workers, BSW/MSW, or MSW matriculating students. Social workers with other addictions are welcome to attend meetings.
http://www.socialworkershelping.org

Southcentral Foundation: Alaska Women's Recovery Project (AWRP)
This project provides leadership training, mentoring, and support for recovering women.
4501 Diplomacy Drive
Anchorage, AK 99508
907-729-4955
http://www.southcentralfoundation.com

Steppin' Out Radio
The goal of this one-of-a-kind radio show is to produce powerful radio broadcasts and provide an outlet for participants in 12-step meetings to share their stories.
845-359-3299
http://www.steppinoutradio.com

The Substance Abuse and Addiction Recovery Alliance (SAARA)
This is a community-based grassroots membership organization of individuals in recovery from substance use disorders, their families, friends, and committed community supporters.
306 Turner Road, Suite P
Richmond, VA 23225
804-762-4445
http://www.saara.org

TASC, Inc. of Illinois
This nonprofit organization conducts research, advances public policy, and provides services to ensure that individuals with substance use and mental health problems receive treatment and access to recovery.
1500 North Halsted Street
Chicago, IL 60642
312-787-0208
http://www.tasc.org

Tohono O'Odham Nation
This tribal government is establishing a recovery community service project and peer-to-peer system.
P.O. Box 837
Sells, AZ 85634
520-603-2477
http://www.tonation-nsn.gov

Veterinarians in Recovery (VIR)
This group is a support network for veterinarians in recovery from alcoholism and other addictions. VIR provides information and referrals, phone support, and newsletters.
104 Maple Trace
Birmingham, AL 35244
651-261-4029
http://www.veterinarians-in-recovery.com

The Waianae Men in Recovery
This program offers what is known as a "clean and sober house," which provides a clean and sober living environment for men in recovery from alcoholism and other addictions.
P.O. Box 458
Waianae, HI 96792
wmir@hawaii.rr.com

Walden House, Inc.: PROSPER (Peers Reaching Out Supporting Peers to Embrace Recovery)
This project provides strength-based peer-to-peer recovery services to people and their families who face the challenges of recovery and re-entry into society from prison.
1550 Evans Avenue
San Francisco, CA 94124
415-554-1100
http://www.waldenhouse.org

Welcome Home Ministries: Face to Face
This faith-based program is for women who face the dual challenges of recovery and re-entry to society from incarceration.
P.O. Box 184
Richmond, OH 43944
740-765-4959
http://www.welcomehomeministries.org

White Bison, Inc.
For a full description, refer to Native Americans under Culture Specific.

Women for Sobriety, Inc.
This nonprofit organization is dedicated to helping women overcome alcoholism and other addictions.
P.O. Box 618
Quakertown, PA 18951-0618
215-536-8026
http://www.womenforsobriety.org

Women in New Recovery: Our Common Welfare
This recovery community organization is a residential treatment facility for women in Arizona and New Mexico.
860 North Center Street
Mesa, AZ 85201
480-464-5764
http://www.winr.org

Treatment Organizations

These organizations include traditional treatment facilities that offer inpatient and outpatient treatment and continuing care.

Alcohol and Drug Rehab Treatment Resource Center
This online center provides information on key issues about alcohol and drug abuse, including intentions, rehab, and treatment. Visitors must enter identifying information to participate in this website.
http://www.addict-help.com

Behavioral Health Services (BHS)
This nonprofit organization has provided a continuum of substance use, mental health, and senior services since 1973. Each of its 11 facilities (located throughout Los Angeles County) is based on its mission of transforming lives by offering hope and opportunities for recovery, wellness, and independence.
15519 Crenshaw Boulevard
Gardena, CA 90249
310-679-9126
310-675-4431
http://www.bhs-inc.org

Betty Ford Center
This center provides treatment for chemical dependency, as well as support and educational resources for family members and children of clients.
39000 Bob Hope Drive
Rancho Mirage, CA 92270
800-434-7365
760-773-4100
http://www.bettyfordcenter.org

Beit T'Shuvah
Beit T'Shuvah is a facility where approximately 120 residents interact with clinical staff in a healing atmosphere that emphasizes faith-based recovery and the values of the Jewish community. The organization's goal is to reduce the incidence of addiction and other harmful behaviors through individual and family education.
8831 Venice Boulevard
Los Angeles, CA 90034
310-204-5200
http://www.beittshuvah.org

Caron Treatment Center
This center offers detoxification, gender-separate rehabilitation, relapse treatment, and extended care for adults and adolescents; educational programs for family members; and student assistance services.
243 North Galen Hall Road
Wernersville, PA 19565
800-854-6023
http://www.caron.org

Community Bridges
This is a private nonprofit organization that provides services throughout Arizona, including a full continuum of the highest quality substance abuse and mental health treatment, lifesaving interventions, support for women and children, outreach to help the homeless, and community-based prevention and education services for youth and families.
1811 South Alma School Road, Suite 160
Mesa, AZ 85210
877-931-9142
http://communitybridgesaz.org

CRC Health Group
This group offers the most comprehensive network of specialized behavioral care services in the Nation, serving more than 30,000 people each day in 140 facilities, as well as providing healing and hope in the lives of patients, students, and families. For more than two decades, CRC programs have helped individuals and families reclaim and enrich their lives.
20400 Stevens Creek Boulevard, Sixth Floor
Cupertino, CA 95014
877-272-8668
408-998-7260
http://www.crchealth.com

Fairview Recovery Services
Fairview offers individually tailored services for people suffering from chemical dependency.
5 Merrick Street
Binghamton, NY 13904
607-722-8987
http://www.frsinc.org

Father Martin's Ashley
This is a private, nonprofit facility for the treatment of substance use disorders serving people aged 18 and over since 1987. It offers a comprehensive program of services for individuals and families afflicted by the disease of addiction.
800 Tydings Lane
Havre de Grace, MD 21078
800-799-4673
410-273-6600
http://www.fathermartinsashley.com

Foundations Associates
This is a treatment and advocacy organization dedicated solely to the treatment and recovery of people with co-occurring substance use and mental disorders. The agency has a full continuum of care, with locations in Memphis and Nashville, TN.
210 Westwood Place
Brentwood, TN 37027
877-345-3357
615-345-3200
http://www.dualdiagnosis.org

Gateway Foundation
This foundation is a private, nonprofit organization providing substance use treatment; each year, 29,000 clients are provided care in community-based and correctional settings.
55 East Jackson Boulevard, Suite 1500
Chicago, IL 60604
312-663-1130
http://www.gatewayfoundation.org

Gaudenzia, Inc.
This group helps people affected by chemical dependency, mental health problems, and related conditions to achieve a better quality of life – allowing them to live as productive and accountable individuals.
106 West Main Street
Norristown, PA 19401
610-239-9600
http://www.gaudenzia.org

Grace Street Recovery Services
This organization assists those seeking recovery by providing pathways out of addictions and into new landscapes shaped by dignity and grace. We are a recovery-oriented sanctuary anchored in the heart of our community.
105 Middle Street
Lewiston, ME. 04240
207-795-0149

Hazelden Foundation
This national nonprofit organization founded in 1949 helps people reclaim their lives from the disease of addiction. Hazelden's comprehensive approach to addiction addresses the full range of patient, family, and professional needs, including treatment and continuing care, research, higher learning, public education and advocacy, and publishing.
P.O. Box 11
Center City, MN 55012
800-257-7810
651-213-4200
http://www.hazelden.org

Mayo Clinic, Addiction Psychiatry
This addiction psychiatry unit offers chemical dependency programs for people with substance use disorders.
200 First Street SW
Rochester, MN 55905
507-284-2220
http://www.mayoclinic.org

Mount Saint John Home & School for Boys
This residential treatment center is for boys with behavioral and learning problems.
135 Kirtland Street
Deep River, CT 06417
860-343-1300
http://www.mtstjohn.org

Narconon
This is a nonprofit drug rehab program dedicated to eliminating drug abuse and drug addiction through drug prevention, education, and rehabilitation.
4652 Hollywood Boulevard
Hollywood, CA 90027
800-775-8750
323-962-2404
http://www.narconon.org

Narconon of Oklahoma
This group is located in Oklahoma and is part of the larger Narconon International group. It uses a full approach to treatment and recovery by teaching participants how to live a drug-free life.
800-468-6933
918-339-5800
http://www.stopaddiction.com

Newport Academy
This treatment center is dedicated to providing comprehensive, gender-specific, integrated treatment programs for adolescent males and females in an environment of caring and compassion by which teens and their families may recover from the destructive effects of substance use disorders and related behavioral health issues. It offers separate residential facilities and has an active after-school program in Orange County, CA.
866-382-6651
http://www.newport-academy.com

Phoenix House
This nonprofit organization serves individuals throughout the country who are struggling with substance use and/or mental disorders. Phoenix House provides residential and outpatient treatment along with prevention and recovery support services.
164 West 74th Street
New York, NY 10023
800-DRUG-HELP (3784-4357)
http://www.phoenixhouse.org

Reality House, Inc.
This organization provides culturally appropriate substance abuse and HIV treatment and prevention services to New Yorkers living mainly in Harlem, Washington Heights, and the South Bronx.
34-51 Vernon Boulevard
Long Island City, NY 11106
212-281-6004
http://www.realityhouseny.org

Recovery Connection
This is a comprehensive addiction treatment resource and drug rehabilitation referral service. The organization has staff across the country available 24 hours a day to answer all concerns about substance use, addiction treatment, and rehabilitation.
4825 North Dixie Highway
Oakland Park, FL 33334
800-993-3869
954-491-1771
http://www.recoveryconnection.org

Resolution Ranch
This is a therapeutic camp in Texas for troubled teen boys ages 13 to 17.
254-231-2207
http://www.resolutionranch.com

Ridgeview Institute
This institute provides substance use and mental health treatment services in Georgia.
3995 South Cobb Drive
Symrna, GA 30080
800-329-9775
770-434-4567
http://www.ridgeviewinstitute.com

Rimrock Foundation
This foundation offers community-developed treatment services for substance use disorders.
1231 North 29th Street
Billings, MT 59101
800-227-3953
406-248-3175
http://www.rimrock.org

Sagebrush
This holistic residential treatment center for adults provides a small, individualized clinical program to give an ideal recovery environment where one can focus on mental, physical, and spiritual well-being.
P.O. Box 554
Great Falls, VA 22066
888-406-7444
http://www.sagebrushva.com

Stepping Stone of San Diego
This group provides treatment and recovery services focusing on the lesbian, gay, bisexual, and transgender communities.
3969 Fourth Avenue, Suite 201
San Diego, CA 92103
619-279-0777
http://www.steppingstonesd.org

Valley Hope Association
This nonprofit organization has provided quality substance use disorder treatment services since 1967. It operates treatment facilities in Arizona, Colorado, Kansas, Missouri, Nebraska, Oklahoma, and Texas.
P.O. Box 510
Norton, KS 67654
800-654-0486 (General Information)
800-544-5101 (Admissions)
http://www.valleyhope.com

Vanguard Services Unlimited
This nonprofit, community-based organization offers high-quality treatment and recovery to individuals and their families with substance use disorders.
521 North Quincy Street
Arlington, VA 22203
703-841-0703
http://www.vanguardservices.org

The Village South
This group offers substance use disorder treatment programs and referrals for job training, shelter, and HIV testing for the diverse communities of Miami-Dade County, FL.
3050 Biscayne Boulevard, Ninth Floor
Miami, FL 33137
800-443-3784
305-573-3784
http://www.villagesouth.com

The Watershed
This is a group of recovery facilities that provide services including detoxification, residential rehabilitation, intensive outpatient treatment, prevention, and education.
P.O. Box 7185
Columbia, SC 29202
800-861-1768
http://www.thewatershed.com

Women in New Recovery (WINR)
This organization provides a beautiful residential environment where women recovering from alcohol and drug dependency are supported by professional staff and other women who have been successful in recovery.
860 North Center Street
Mesa, AZ 85201
480-464-5764
http://www.winr.org

Workplace

These organizations provide support to help address mental and/or substance use disorders that arise in the workplace.

A Safe Haven Foundation
This foundation supports an individual as he or she enters into and sustains long-term recovery from substance use. It works with each person to develop a personal "Continuum of Housing and Care."
2750 West Roosevelt Road
Chicago, IL 60608-1048
312-372-3820
http://www.asafehaven.com

America in Recovery
This program offers a no-charge hiring website that helps employers and potential employees who are in recovery find each other.
P.O. Box 38589
Houston, TX 77238-8589
http://www.americainrecovery.org

American Federation of Government Employees (AFGE)
This group is the largest Federal employee union representing 600,000 Federal and Washington, DC, Government workers nationwide and overseas. Workers in virtually all functions of Government at every Federal agency depend on AFGE for legal representation, legislative advocacy, technical expertise, and informational services.
80 F Street NW
Washington, DC 20001
202-737-8700
http://www.afge.org

American Federation of State, County and Municipal Employees (AFSCME)
This group is the Nation's largest and fastest-growing public service employees' union. It has 1.4 million members and is made up of people who serve the public every day in all areas of Government, health, education, and other services, both public and private.
1625 L Street NW
Washington, DC 20036-5687
202-429-1000
202-659-0446 (TTY)
http://www.afscme.org

American Psychological Association
For a full description, refer to Provider and Professional Organizations.

America's Health Insurance Plans
This is a health plan association representing more than 1,000 health plans throughout the country. It provides information on managed care organization educational programs, health care delivery, research, services, and products.
601 Pennsylvania Avenue NW
South Building, Suite 500
Washington, DC 20004
202-778-3200
http://www.ahip.org

Communities of Tomorrow's Economic Development (CT)
This organization cooperates with industry players, associations, regional economic development authorities, and other stakeholders to create economic development in the private sector. It focuses on the expansion of existing enterprises and the creation of new enterprises to drive economic growth and maximize return on investment in innovation.
250-10 Research Drive, Innovation Place
Regina, Saskatchewan S4S 7J7, Canada
306-522-6699
http://www.communitiesoftomorrow.ca

Corporation for Supportive Housing
Since 1991, CHS advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.
50 Broadway, 17th Floor
New York, NY 10004
212- 986-2966
http://www.csh.org

DC Bar – Lawyers Assistance Program
For a full description, refer to Justice/Legal System.

Drug Free Business Houston/Drug Free Business Texas
This organization helps companies increase safety and productivity through the establishment of comprehensive drug-free workplace programs.
303 Jackson Hill Street
Houston, TX 77007
713-942-4100
http://www.council-houston.org/Workplace_Services/Workplace_Services.aqf

Employee Assistance Professionals Association, Inc. (EAPA)
This membership organization offers resources to employee assistance professionals.
4350 North Fairfax Drive, Suite 410
Arlington, VA 22203
703-387-1000
http://www.eap-association.com

Employee Assistance Society of North America
This society provides information for EAP professionals and organizations.
2001 Jefferson Davis Highway, Suite 1004
Arlington, VA 22202-3617
703-416-0060
http://www.easna.org

Employee Health Programs
This group, a subsidiary of First Advantage Corporation, designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.
P.O. Box 2430
Rockville, MD 20827
800-821-4473
http://www.ehp.com

Federation of State Physician Health Programs (FSPHP)
This organization evolved from initiatives taken by the American Medical Association (AMA) and individual State physician health programs, focusing upon rehabilitation and monitoring of physicians with psychoactive substance use disorders as well as mental and physical illness.
c/o American Medical Association
515 North State Street, Room 8584
Chicago, IL 60654
312-464-4574
http://www.fsphp.org

Institute for a Drug-Free Workplace
This institute emphasizes the need for drug-free workplace programs and educates employers and the public at large about the rights and responsibilities of employers and employees with regard to substance use disorders and the workplace.
10701 Parkridge Boulevard, Suite 300
Reston, VA 20191
703-391-7222
http://www.drugfreeworkplace.org

International Brotherhood of Electrical Workers (IBEW)
This group represents approximately 750,000 members who work in a wide variety of fields, including utilities, construction, telecommunications, broadcasting, manufacturing, railroads, and government.
900 Seventh Street NW
Washington, DC 20001
202-833-7000
http://www.ibew.org

Labor Assistance Professionals (LAP)
This organization is composed of members of trade and industrial unions involved in the provision or administration of member assistance programs, with special emphasis on issues of chemical abuse or dependency. It is dedicated to obtaining comprehensive alcohol and drug treatment and all other mental health services for its members at a reasonable and fair price.
13 Bolton Gardens
Bronxville, NY 10708
914-961-5867
http://www.laborassistanceprofessionals.com/index.html

Laborers' Health and Safety Fund of North America (LHSFNA)
This group exists to enhance jobsite safety and health, improve the competitiveness of signatory employers of the Laborer's International Union of North America (LIUNA), and strengthen LIUNA.
905 16th Street NW
Washington, DC 20006
202-628-5465
http://www.lhsfna.org

Lawyers Helping Lawyers
This organization provides confidential, non-disciplinary help for lawyers, judges, law students, and their family members with substance use or mental disorders. Assistance may take many forms, such as assessment, professional consultation, information about and referral to treatment resources, informal and formal interventions, and monitoring.
700 East Main Street, Suite 2035
Richmond, VA 23219
804-644-3212
http://www.valhl.org

National Drug-Free Workplace Alliance
The alliance offers drug-free workplace program assistance and education.
2600 Ninth Street North, Suite 200
St. Petersburg, FL 33704
727-471-0009
http://www.ndwa.org

National Safety Council (NSC)
This council is a nonprofit public service organization dedicated to educating and influencing people to prevent accidental injuries and deaths.
1121 Spring Lake Drive
Itasca, IL 60143-3201
800-621-7615
http://www.nsc.org

Technical Assistance and Professional Training National Association on Drug Abuse Problems, Inc.
A private nonprofit organization founded by business and labor leaders, this office provides programs that assist at-risk and underserved individuals to become independent, self-sufficient, and employed.
355 Lexington Avenue
New York, NY 10017
212-986-1170
http://www.nadap.org

Society for Human Resource Management (SHRM)
This is the world's largest association devoted to human resource management.
1800 Duke Street
Alexandria, VA 22314
800-283-7476
http://www.shrm.org

U.S. Chamber of Commerce
The U.S. Chamber of Commerce provides resources for U.S. businesses, including information on EAPs and drug testing.
1615 H Street NW
Washington, DC 20062-2000
202-659-6000
http://www.uschamber.com

Washington State Labor Council (WSLC)
This council represents and provides services for hundreds of local unions and trade councils throughout Washington State. Its core programs are legislative advocacy, political action, communications and media relations, and assistance with organizing campaigns.
314 First Avenue West
Seattle, WA 98119
800-542-0904
206-281-8901
http://www.wslc.org

JOIN THE VOICES FOR RECOVERY It's Worth It

MENTAL AND SUBSTANCE USE DISORDERS: FAST FACTS

Each September during the ***National Recovery Month (Recovery Month)*** observance, the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), releases the ***National Survey on Drug Use and Health***. The survey is a prime source of information on the prevalence and impact of mental and/or substance use disorders across the country, as well as how many people seek treatment each year. The facts below from the survey and other relevant reports shed light on mental and/or substance use disorders and illustrate that prevention works, treatment is effective, and people recover from these conditions.

Mental Health Problems...

- In 2010, 20 percent of all adults aged 18 or older in this country had any mental illness in the past year[1] – similar to 19.9 percent of adults in 2009.[2]
- In 2010, an estimated 1.9 million youth aged 12 to 17 (8.0 percent) had a major depressive episode (MDE) in the past year. The condition kept them from completing chores, school, or work, and impacted their social lives and relationships with family.[3]
- Mental health problems such as depression, bipolar disorder, and schizophrenia are the leading cause of disability in the United States, and account for 25 percent of years lost to disability and premature mortality.[4]
- One estimate puts the total economic costs of mental, emotional, and behavioral disorders among youth in the United States at approximately $247 billion.[5]

Substance Use Disorders...

- In 2010, an estimated 22.6 million people aged 12 or older, or 8.9 percent of the population aged 12 or older, said they had used illicit drugs in the past month – an increase from 8.0 in 2008, a change largely attributed to a rise in marijuana use, from 14.4 million Americans in 2007 to 17.4 million Americans in 2010.[6]
- Nearly a quarter of Americans aged 12 or older (23.1 percent) said they participated in binge drinking, defined as having five or more drinks on the same occasion (i.e., at the same time or within a couple hours of each other) on at least one day in the past 30 days prior to the survey interview in 2010.[7] Among young adults aged 18 to 25, the rate of binge drinking was 40.6 percent in 2010.[8]
- There were an estimated 10.0 million underage drinkers in 2010 – people ages 12 to 20 who drank alcohol illegally.[9]

Resources

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People Affected...

- ### Veterans and Military Personnel:
  - Approximately 18.5 percent of service members returning from Iraq or Afghanistan have post-traumatic stress disorder (PTSD) or depression, and 19.5 percent report experiencing a traumatic brain injury (TBI) during deployment.[10]
  - Mental and/or substance use disorders caused more hospitalizations among U.S. troops in 2009 than any other cause.[11]
  - More than 1,100 members of the armed forces died by suicide from 2005 to 2009 – an average of 1 suicide by a member of the armed forces occurred every 36 hours.[12]
- ### Individuals in the Justice System:
  - Seventy-two percent of inmates meet the criteria for a co-occurring disorder (having both a mental and substance use disorder).[13]
  - In 2010, more than one quarter (27.0 percent) of the 1.5 million adults on parole or supervised release from prison were current illicit drug users, with 20.6 percent reporting current use of marijuana and 9.8 percent reporting current nonmedical use of psychotherapeutic drugs.[14]
- ### Families and Friends:
  - Youths aged 12 to 17 who perceived strong parental disapproval for trying marijuana or hashish once or twice were much less likely to have used marijuana in the past month than those who did not (4.4 percent vs. 32.8 percent, respectively).[15]
  - In 2010, 90.3 percent of youths aged 12 to 17 "strongly" or "somewhat" disapproved of their peers smoking one or more packs of cigarettes per day.[16]
- ### The Recovery Community:
  - There are more than 20 million people in recovery from substance use disorders.[17]
  - One-third of individuals with severe mental health problems who receive community mental health services after lengthy stays in a State hospital achieve full recovery, both in psychiatric status and in social function. Another third improve significantly in both areas, even without full recovery.[18]

Resources

Prevention Works...Treatment is Effective...People Recover... It's Worth It!

- In 2010, youths aged 12 to 17 whose parents were always or sometimes monitoring behaviors, such as helping with homework, were less likely to have used illicit drugs within the past month than those whose parents seldom or never engaged in such behaviors (8.4 percent versus 17.1 percent, respectively).[19]
- Two-thirds of Americans believe that treatment and support can help people with mental illnesses lead normal lives.[20]
- Approximately 80 percent of patients with depressive disorders improve significantly with treatment and recovery support services.[21]
- A majority of Americans (80 percent) have positive feelings about prevention and recovery from substance use disorders.[22] Approximately 75 percent of people in the United States believe that recovery is possible from dependence on substances including alcohol, prescription drugs, and marijuana.[23]
- In 2010, 31.3 million people aged 18 or older received mental services in the past year,[24] and 2.6 million people received specialty treatment for an illicit drug or alcohol use problem.[25]
- Half of all adults over age 18 know someone in recovery from an addiction to alcohol, illicit drugs, or prescription drugs.[26]

Resources

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JOIN THE VOICES FOR RECOVERY It's Worth It

NEW MEDIA GLOSSARY

New media complements traditional media as a way to share content and connect directly with your audience. Online tools are user-friendly and provide you with a great opportunity to promote ***National Recovery Month (Recovery Month)***, as well as the effectiveness of treatment and the possibility of recovery.

Every year, ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also highlights that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to friends, family, and others that prevention works, treatment is effective, and people recover.

To help you engage the online community and reach this year's target audiences (military personnel, the criminal justice system, families and friends, and people in recovery), review the following glossary for background information on key online terms:

Blog: A user-generated website – short for "web log" – that gives online users an opportunity to share news or opinions on a particular subject, such as a person's success in achieving recovery, the hardships of untreated mental and/or substance use disorders, questions individuals have about a problem, and what they can do to get help.

Blogger™: A free resource used to create a blog that enables users to design their profile, name their blog, and find others who share similar interests. Depending on privacy settings, the site allows others to offer feedback on posts. Blogger profiles can be created using a Google account username and password.

Discussion Board (or Message Board): A forum that contains conversations, or "threads," which are made up of multiple posts about specific topics. Members of the recovery community have started discussion board communities for support, such as In the Rooms, The Second Road, The Sober Recovery Community, and 2gether Forum.

Facebook: A social networking site where people and organizations create online profiles and "friend" people or "like" organizations or campaigns to form a network. You can share personal interests, photos, and other information in your profile. Join ***Recovery Month's*** Facebook page and engage others in the ongoing dialogue.

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Below are some terms specifically related to Facebook features:

- **Friend:** An action that allows you to add other individuals to your overall network.
- **Like:** An action that shows interest in and support of an organization's page or status; "liking" an organization's page will then allow users to receive the organization's status updates in their feed and may allow the users to comment on the page.
- **Wall:** The space on a profile or page that allows friends and users to post messages for the network to see.
- **Status**: A feature that allows you to display a short message of up to 420 characters. Your status can describe your whereabouts and actions and can also be used to "share" photos, videos, events, news, and links.
- **Event:** A page to post information about an event and send invites to your friends or network.
- **Tag:** A designation for photos that link directly to another Facebook user's profile or to an organization's page.
- **Messages:** A tool used to exchange private messages, emails, and mobile texts with friends.
- **Chat:** A feature that allows online users to send instant messages or call other friends who also are on Facebook. You can change your settings to be visible on chat only to certain friends.

Flickr: A popular site to share, store, and search photos posted. ***Recovery Month*** event photos can provide event ideas or help you find members for your coalition. Upload and share photos from your ***Recovery Month*** event and tag yourself and others in the photos.

Foursquare: A location-based social application that allows users to "check in" from locations using applications on smartphones (e.g., iPhone, BlackBerry, Android) or using mobile Internet (e.g., iPads). Each "check in" updates your location so that other Foursquare users can see if anyone else on the network is at the same location. People can "check in" at ***Recovery Month*** events to indicate a large following.

Google Blog Search: A search engine that offers a continuously updated search index. Results include blog posts and can be viewed and filtered by date.

Listserv: An electronic mailing list that congregates a set of email addresses so that a sender can use one email address to reach a variety of people.

Podcast: A digital media file that can be downloaded through web syndication and played back on a mobile device or computer. ***Recovery Month*** offers a large selection of audio and video podcasts that you can promote on your own website or to which you can subscribe.

Really Simple Syndication (RSS) or Web Syndication: A function that enables users to read all of their blogs on one website. An RSS reader, such as Google Reader, collects individual posts from blogs and news sites, and presents them as they arrive. When researching recent news as you prepare to plan an event or form a coalition, set up a feed to receive the latest news and blog posts from the recovery community directly to your inbox.

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Social Marketing: The action of using the Internet to brand a campaign or product. ***Recovery Month*** uses Facebook, Twitter, and YouTube as part of its social marketing campaign.

Social Network: A system that links individuals based on similar interests, beliefs, or relationships. Use social networks to build a coalition that spans communities across the country. (See Facebook, Twitter, or Flickr for specific examples of social networks.)

Technorati: An online search engine designed primarily for searching blogs and ranking their reach and influence in the blogosphere. The site includes blog posts created less than six months ago in its search results. Use Technorati to search for bloggers who cover mental and/or substance use issues. These bloggers may have an interest in helping plan a ***Recovery Month*** event.

Tumblr: A blog creation platform that allows users to build and custom design their own blog. On Tumblr, you can post text, photos, quotes, links, music, and videos from your browser, phone, desktop, or email.

Twibbon: A small image posted on Twitter profile pictures to signify support for a particular cause. To display your personal support for ***Recovery Month***, add the ***Recovery Month*** Twibbon to your Twitter profile picture.

Twitter: A social network and microblogging service that allows its users to send posts of a maximum of 140 characters to their profiles. These posts then appear on other members' homepages when they are subscribed to the user's feed. Follow ***Recovery Month's*** Twitter page and engage others in the ongoing dialogue. Search Twitter for other people who "tweet" about their ***Recovery Month*** events or talk about their personal recovery experiences. Below are some terms related to Twitter to help you navigate the site:

- **Following:** An action that allows you to subscribe to other Twitter users' feeds so their tweets will show up on your Twitter homepage.
- **Re-tweet:** An action that allows you to copy someone else's tweet and post it on your own account. It's usually done if you want to share someone else's tweet with your "followers," or add commentary on what was posted. You will usually see the letters "RT" in front of the text if it is a retweet.
- **Hashtag:** A symbol (#) that you can place in front of a phrase or word so it can be easily grouped and found through a search of that keyword. This is commonly seen in Twitter chats. An example of this would be #RecoveryChat, ***Recovery Month's*** unique hashtag for its chats.
- **@:** A symbol ("@") that you can place directly before a Twitter user's name to reply to a tweet or direct the tweet to a specific person.
- **Trending topics:** The most common phrases appearing in tweets; a list of trending topics can be found on the sidebar on the Twitter website.
- **Direct messages:** Private tweets sent between you and another Twitter user. Both accounts must be following each other to send or receive a direct message. This is sometimes referred to as a "DM."
- **Lists:** A feature that allows users to organize people they follow into particular groups and view tweets from specific people at once.
- **Twitter Chat:** An organized discussion on Twitter surrounding a particular topic and designated by a particular hashtag (#) to track users and participation.

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Webcast: An online file that allows people to tune in to your meeting or event.

Webinars: A type of online meeting that is transmitted over the web, and can include seminars, presentations, lectures, or workshops. Webinars allow for two-way communication between speakers and participants, while displaying visual information onscreen.

Widget: An online tool added to websites that displays or shares information from various sources. Instructions for adding ***Recovery Month*** widgets to your blog or site are available on ***http://www.recoverymonth.gov***. The ***Recovery Month*** event widget allows users to locate and learn about events in their area, while the ***Recovery Month*** quote widget gives users the capability to view and share an inspirational quote each day.

Wikipedia: A community-researched encyclopedia with more than 10 million entries and 77 million monthly visitors. The site's content is user-generated, and entries are compiled collectively. Organizations are discouraged from editing their own entries, as it is considered a conflict of interest.

YouTube: An online video-sharing site that allows users to post videos they've created. Users create their own channels that host all their videos and allow others to find them based on related interests. Check out ***Recovery Month's*** channel and SAMHSA's channel.

JOIN THE VOICES FOR RECOVERY It's Worth It

DEVELOP YOUR SOCIAL NETWORK

Social media is an increasingly popular method of communicating with other people, companies, and organizations. Through social media tools, you can connect with people who are committed to raising awareness of mental and/or substance use disorders and ***National Recovery Month (Recovery Month)***. Online tools such as Facebook, Twitter, and blogs help to more quickly communicate with a broader audience than by solely using traditional media.

The 23rd annual ***Recovery Month*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also highlights that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their community. They also prove to friends, family, and others that prevention works, treatment is effective, and people recover.

This guide is useful for both beginners and social media experts. It's meant to provide ideas to build your social media program from scratch or to enhance an existing program. If you are a social media beginner, refer to the "New Media Glossary" document in this toolkit, which explains relevant terms.

Get Started...

Before you join a social networking website, research the different types of networks to determine the best ones for you or your organization, depending on your needs and the audiences you want to reach. Also, set specific objectives when developing your network. For example, you could aim to increase your number of Twitter followers by 10 percent each month, or to write a new blog post each week.

Social media participation and blogging rely on interaction and networking with others on a consistent basis. Below are some tips that can help you develop support for your Facebook page, Twitter account, or blog:

- Post positive statements on another user's Facebook wall;
- "Like" other Facebook pages;
- Update your Facebook status to promote another page or initiative. By placing the "at" symbol ("@") in front of a user's name on Facebook – for example, ***@RecoveryMonth*** – you can link your status directly to the ***Recovery Month*** Facebook page;
- Recommend that your friends visit specific Facebook pages;
- Retweet a positive message about treatment or recovery issues;
- Promote another organization's event on your social media pages to support their efforts;

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- Comment on a blog post that you find helpful, and repost it on your blog;
- "Share" another page's Facebook status updates to show support;
- "Check in" on Facebook or Foursquare if you are at a place or event that pertains to the recovery community; or
- Join or host a Twitter chat.

Engage Through Blogs...

Creating your own blog is an opportunity to develop a voice within the recovery community and communicate with others who share similar interests and support the same causes. While blogging is a rewarding experience, it can require a substantial time commitment. The most successful blogs are ones that share fresh, new content at consistent and frequent intervals. For example, a blog that has new postings each week will likely have many more followers than blogs that only update content bi-weekly. If this degree of commitment is not realistic for you, engaging with already established bloggers and participating in blog conversations may be a better option.

Before you create a personal blog or one for your organization, research existing recovery blogs and the topics they discuss. After you've surveyed the current landscape, create a strategy to distinguish your blog from others, such as offering new content or providing a unique perspective.

To research blogs effectively, use the tools below:

- **Google Blog Search:** Provides real-time search results on what bloggers discuss. Follow the blogs you're interested in regularly to see the diversity of posts and to begin developing a relationship with the bloggers by adding your comments.
- **Blog Pulse:** Creates a graph of the number of online conversations taking place about a specific topic. This will help you identify ways to positively contribute to the conversation.
- **Technorati:** Searches blogs and ranks their reach and influence in the blogosphere. Technorati provides a comprehensive and current index of who and what is most popular in the blogosphere.
- **Social Mention:** Compiles user-generated content from across the Internet into a single stream of information. This site can monitor a variety of subjects, and allows you to easily track and measure topics that interest you.

If you decide to start your own blog, many websites, such as Wordpress, Blogger, or Tumblr, offer guidance. Once you name your blog and start to post, use Facebook or Twitter to promote it. When creating your own blog, keep in mind the following tips:

- **Be genuine.** Blogs can be a form of self-expression where you can provide your own or your organization's unique perspective. You have the opportunity to let readers hear your voice, so don't be afraid to show your passion and expertise. Additionally, blogs can be a form of news and discussion, where users go to learn the latest trends and community happenings.

Resources

- **Provide a wide scope of content.** Although it's best to focus each individual blog post on a specific topic, enhancing your written post with photos and videos will make your blog more engaging.
- **Link to other blogs.** The blogosphere is an online community built on sharing thoughts and ideas. Building relationships with bloggers who have similar interests and reading other blogs that discuss prevention, treatment, and recovery can provide you with ideas and drive more readers to your site.
- **Blog responsibly and courteously.** Keep in mind that your blog is publicly accessible, so carefully choose the content you post. Always be respectful of others' ideas, and be prepared to partake in thoughtful conversations with others.

If you don't have the time or desire to create your own blog, you can practice blogger engagement to participate in existing conversations about your issue. Consider the following ideas to help you connect with others on blogs:

- **Read and follow blogs that emphasize issues relevant to recovery.** Before engaging with certain bloggers, get a sense for who they are and what they write about. Visit SAMHSA's blog accessed at ***http://blog.samhsa.gov/*** to stay informed on mental health and substance use disorders, prevention, recovery support, and public awareness efforts.
- **Comment on other people's blog posts.** Let them know about the resources available to help people combat a mental health problem and/or a substance use disorder. Also, direct people to the ***Recovery Month*** website, accessed at ***http://www.recoverymonth.gov***.
- **Offer resources and support.** Treatment and recovery services are sometimes offered online and anonymous users may post messages about their recovery journeys. Respond with words of encouragement or helpful information and resources. Educate them about ***Recovery Month*** activities and ways to get involved to further the campaign's reach.

Activate on Facebook...

- Since its launch in 2004, Facebook has developed into a worldwide social networking website with more than 800 million members, 50 percent of whom log on to the site on any given day. Facebook allows you to create both personal and official page accounts:
- A **personal account** is started by signing up with your name and email address. Populate your account with personal interests, contact information, and other personal information, photos, and videos. You can change the privacy settings on your personal account page to limit or widen the visibility of what you want your friends or other Facebook users to see.
- Use an **official page** if you want your organization to join Facebook. These pages can help promote a company or an initiative and are visible to the public. That means that non-Facebook users can view your page and "like" your organization. On your page, you can post organization news, events, and promotional information.

Once you start a Facebook account, you can:

- Find other Facebook members by using the search function, and then "friend" or "like" any individuals and pages that address similar topics.
- Share resources or link to sites that are helpful to those visiting your page, such as treatment or recovery services in your area.

Resources

- Post pictures of ***Recovery Month*** events or activities that you attended or helped plan. You can also share videos from events or ones that feature others speaking about mental and/or substance use disorders. The ***Recovery Month*** YouTube Channel is an excellent source for video content.
- Create an "event page" and send invites to your friends to publicize a ***Recovery Month*** event.
  - Include the location, time and date, a brief description of the event, and any interesting or related links;
  - Make sure to stress the importance of RSVPing to the event by clicking the "yes," "maybe," or "not attending" buttons;
  - You can create an online event, such as a rally or a forum, and invite your Facebook friends who are interested in ***Recovery Month*** to join and chat with others who actively promote treatment and recovery; and
  - Repost your event invitation to your other social media properties, such as Twitter.

Tweet...

Another popular social networking site is Twitter. This platform can be used to quickly and briefly inform your followers or other users of general updates, events, or anything of interest to the treatment and recovery community. Twitter users communicate with others through "tweets," which are similar to status updates on Facebook, but are limited to 140 characters and are viewed on your profile page.

The site allows you to choose your Twitter name, or "handle," write a short biography, and choose an account icon image, or avatar. You can also sort accounts into "lists" to easily locate tweets on certain topics or a specific group of people. To connect with others, you can "follow" them so their tweets will appear on your Twitter homepage. The default privacy setting permits your personal tweets to be publicly accessible to anyone. On your homepage, you will be able to see tweets as they're posted from all accounts that you follow. However, you can change your settings to lock your profile so that only people you approve as followers can view your tweets.

Below are some ways you can use Twitter's features to help promote ***Recovery Month***:

- Use the **search function** to look up keywords related to ***Recovery Month***, and mental and/or substance use disorders to find relevant conversations. When you find Twitter users who have similar interests, follow them and reply to their tweets to gain followers.
- If you come across an appealing or informative tweet, retweet the information to share it with others. To do this, add the letters "RT" in front of the text so other Twitter users realize that it is a retweet, and feel free to add commentary if you support the message. For example, "YourUserName: Saw that, too! Quite a story! RT ***@RecoveryMonth***: Just watched an inspiring video on the ***Recovery Month*** YouTube Channel!" You can also click the "retweet" link under the user's tweet, which means the "RT" will be added automatically.
- Show support of Twitter users who mention you or your organization in their tweets, by **replying to their posts**. This can be done by using an "@" symbol directly before a Twitter user's name.

Resources

- Use or create a hashtag ("#" with a key phrase such as your organization's name) to allow users to easily search for you using this key phrase. Make sure to use #***RecoveryMonth*** whenever you want your tweet to link to the ***Recovery Month*** Twitter account. Hashtags that are often used when discussing ***Recovery Month*** include:
  - #mentalhealth
  - #prevention
  - #substanceabuse
  - #suicideprevention
- Send direct messages, or private tweets, to another Twitter user if you want to communicate privately. Otherwise, your tweets will be either public or at least visible to your approved followers.
- Include the ***Recovery Month*** "Twibbon" on your Twitter profile. A Twibbon is a small icon placed on your Twitter profile image (known as your avatar) to promote awareness about a specific cause. A ***Recovery Month*** icon on your profile will show your support of mental and/or substance use disorder prevention, treatment, and recovery.

To increase your involvement on Twitter, participate in a Twitter chat, which is an organized discussion on Twitter about a particular topic and is reminiscent of a chat room. Chats are usually designated in advance for a particular time and are assigned a unique hashtag to track users and participation. Participants add the designated hashtag at the end of each question or comment they submit to signify their involvement in the conversation. Twitter chats occur "in the open" as public messages appearing in a normal message stream. By searching for the designated hashtag, users can view just the conversation related to that hashtag and can follow the chat by refreshing the page.

Be sure to follow ***@RecoveryMonth*** for information about upcoming events, Twitter chats, personal stories of recovery, and general conversation about the benefits of treatment and recovery.

Use Other Outlets...

While Facebook, Twitter, and blogs dominate social networking, other social media applications can be used to successfully spread ideas and communicate the ***Recovery Month*** message through video, photo, and location-based communication. Below is a sample of these applications and how you can best use these tools:

- Use YouTube to post videos you've developed that relate to ***Recovery Month***, mental and/or substance use disorders, and the benefits of prevention, treatment, and recovery. To grow your fan base and find others who share similar interests, subscribe to different YouTube channels and comment on videos that you enjoy. When uploading videos, choose the appropriate category for your video, and use tags so other users can easily find your content.
- Use Flickr to show images and videos from ***Recovery Month*** events. Tag and title them with specific keywords, such as your organization or event name, so they can be found easily by using search engines. Join a Flickr group that has similar interests, and comment on the group's discussion boards or photos. You also can create your own group if you are unable to find one that relates to your organization or interests.
- Use Foursquare to "check in" at ***Recovery Month*** event locations using applications on smartphones (e.g., iPhone, BlackBerry, Android, Palm) or mobile Internet (e.g., iPads). This action allows other ***Recovery Month*** supporters to know your specific location at an event or networking opportunity in your community.

Resources

Engage Appropriately...

Social media is a powerful tool for promoting ***Recovery Month*** and increasing awareness about behavioral health issues. It's important to note that when working with social media, you are writing in a public forum. Keep in mind the following suggestions when communicating through public social media platforms:

- Be positive, and keep your posts or statuses current, optimistic, and thought-provoking.
- If a friend on Facebook or a follower on Twitter is offensive, simply "defriend," "unfollow," or even "block" him or her. If someone's actions are inappropriate or threatening, contact the social media network's administrator to file a report.
- View each social media platform's privacy and security settings and adjust your personal settings if you wish to restrict accessibility to your site.

Participate in Recovery Month and SAMHSA Platforms...

To keep up with the latest news and events about ***Recovery Month***, check out the following sites:

- ***Recovery Month*** Facebook Page, accessed at *http://www.facebook.com/RecoveryMonth*
- ***Recovery Month*** Twitter Page, accessed at *https://twitter.com/#!/RecoveryMonth*
- ***Recovery Month*** YouTube Channel, accessed at *http://www.youtube.com/recoverymonth*

To engage with the broader behavioral health community, visit the following sites:

- SAMHSA Facebook Page, accessed at *http://www.facebook.com/samhsa*
- SAMHSA Twitter Page, accessed at *https://twitter.com/#!/samhsagov*
- SAMHSA YouTube Channel, accessed at *http://www.youtube.com/SAMHSA*

JOIN THE VOICES FOR RECOVERY It's Worth It

BUILD COMMUNITY COALITIONS

Community coalitions and partnerships are key to the success of ***National Recovery Month (Recovery Month)***. Unite organizations in your community to recognize mental and/or substance use disorders and enhance your ***Recovery Month*** campaign. This document will guide you on how to form community coalitions or partnerships, starting with researching and identifying groups and individuals to partner with.

Coalitions are groups of organizations and individuals who represent different constituencies, but share common goals and interests. Coalitions combine the resources of multiple organizations and individuals to effectively convey the message that prevention works, treatment is effective, and people recover. Gain support from your extended community to educate others that mental and/or substance use disorders affect all types of people, regardless of age, race, or walk of life.

Every September, ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). The 23rd annual observance this September celebrates the effectiveness of treatment services and the reality of recovery. This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also highlights that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

Understand the Basics...

Coalitions bring a range of organizations together. Member individuals and organizations should include those that work on behalf of elected or appointed officials, as well as business, educational, health services, social or religious groups, and individuals from the prevention, treatment, and recovery community. They also can bring together grassroots groups or individuals who are involved with similar efforts. Individuals in your coalition do not need to be part of an official organization, but do need to express the same goals to promote mental and/or substance use disorder awareness.

To participate in coalition activities:

- Build your own if there is no active coalition established in your community; or
- Join and support the ***Recovery Month*** efforts of an existing coalition.

Building your own coalition gives you the flexibility to select organizations and individuals that are aligned with your goals, and also gives you control over the coalition's strategic direction. However, joining a pre-existing coalition will require less effort so you can hit the ground running more quickly. Your available time and desired outcomes will dictate the best option for you.

Resources

Resources

If you wish to achieve a specific objective and have a set time frame, consider forming a task force. While similar to coalitions, task forces are more temporary collaborations formed around a specific issue. Once a task force has reached an intended goal, the group usually disbands.

Create Your Coalition...

Refer to the tips below to establish a coalition that best meets your needs and supports ***Recovery Month's*** goals:

- **Determine the specific issues related to mental and/or substance use disorders that you want to address and the goals you hope to achieve.** Assess the mental health and substance use landscape in your community. What are the most prevalent issues, and how are they being addressed? For example, are there prevention, treatment, and recovery resources available in your community? Are certain populations underserved? After you research these issues, think about how your coalition will engage the criminal justice system, military personnel, friends, families, and the recovery community – which are specific audiences of focus for this year's ***Recovery Month*** celebration. These groups can initiate a dialogue around prevention resources, treatment options, and recovery support services.
- **Compare other organizations' goals with your own goals and capabilities to determine the best partners to engage.** Identify people and organizations that could make influential and positive contributions to your ***Recovery Month*** coalition. Locate State or local chapter affiliates of prominent national prevention, treatment, and recovery support organizations. Refer to the "Single State Agency Directory" in this toolkit for State and local services, as well as the ***Recovery Month*** "Prevention, Treatment, and Recovery Resources" list for national organizations, and the ***Recovery Month*** "Planning Partners" list for organizations dedicated to the ***Recovery Month*** effort.
- **Also, search online for recent news in your area about mental and/or substance use disorders, and see who is involved in the discussions on these issues.** Include a broad list of organizations, and partner with law enforcement and other social and educational agencies. Organizations and systems that have the resources and expertise needed to build a successful coalition around mental and/or substance use disorders include:
  - Adult independent-living communities;
  - Child welfare organizations;
  - Criminal justice system representatives and organizations;
  - Elected officials;
  - Foundations and volunteer groups;
  - Government agencies;
  - Health-related organizations;
  - Individual and family therapists;
  - Mental health organizations;
  - Military associations;
  - National and local media outlets;
  - Neighborhood clubs;
  - Nonprofit organizations;
  - Prevention groups;
  - Private companies/businesses;
  - Recovery bloggers;
  - Recovery community;
  - Recovery and peer-to-peer support groups;
  - Religious organizations;
  - Schools, universities, and the educational community;
  - Treatment and recovery organizations; and
  - Veterans' associations.

Resources

- **Before reaching out to an organization, research its mission and activities to confirm that it is aligned with your vision.** You can see whether an organization features the logos or press releases of other organizations on its website, which could indicate its policy on partnerships.

- **Recruit members to the coalition.** Contact your coalition's potential allies and invite them to join your coalition. If applicable, reference connections you have with members of their organizations. When you recruit people to participate in your effort, highlight the goals that you share and how your strategies are aligned. Be sure to have substantive materials to show them, detail the objective and mission of your proposed coalition, and be clear about the role they will have in the coalition. The following tools will help to reach potential members:

  - Social media, such as Facebook, YouTube, or Twitter;
  - Email;
  - A website encouraging people to join;
  - Virtual meetings; and
  - Online services to organize meetings simultaneously across the country, such as *http://www.meetup.com*.

- **Confirm the coalition participants and evaluate whether you have included a diverse panel of organizations representative of the community.** Participation commitments can be informal verbal agreements or formal written contracts among the members. For the coalition to be successful, keep in mind these guidelines:

  - Be respectful of time commitments;
  - Allow all members to have an active role in planning and decision-making;
  - Identify a leader to guide the process and make final decisions;
  - Set priorities and goals;
  - Agree on a communication process and responsibility for maintaining it;
  - Communicate and meet regularly;
  - Prepare a budget for activities and assign someone to manage it;
  - Have a main contact person to coordinate members; and
  - Decide the coalition's leadership early in the coalition's development.

  A solid leadership team needs to oversee the coalition and ensure the efficient and timely execution of the coalition's plan, as well as continually foster communication and provide a clear sense of direction. The leadership team can represent a wide range of your member organizations and individuals.

- **Hold regular meetings during the coalition-formation process.** Members must work collaboratively to ensure a mutually beneficial relationship. Due to people's busy schedules, bi-weekly or monthly meetings are probably more feasible than holding weekly meetings. For example, you may wish to hold your meetings on the first Tuesday of every month or every other Tuesday. Online tools such as Windows Live Meeting, WebEx, and iChat make it easier to collaborate and allow people to work remotely, rather than at the same location. After meetings, each person should walk away with a clear to-do list, as well as goals to accomplish before the next meeting.

Resources

- **Grade your coalition and celebrate its successes.** Community Anti-Drug Coalitions of America (CADCA) offers basic tools to develop an evaluation plan for your coalition. Post your event materials, photos, and videos on social media outlets such as the ***Recovery Month*** Facebook page, YouTube channel, and Twitter account to share your coalition's success with the ***Recovery Month*** community. Refer to the "New Media Glossary" and "Develop Your Social Network" documents in this toolkit for tips on how to use these online tools.

Learn From Examples...

Community coalitions have helped bring awareness to issues surrounding mental and/or substance use disorders for years. The ***Recovery Month*** campaign, now in its 23rd observance, uses a coalition of ***Recovery Month*** Planning Partners. Organized in 1997, the Planning Partners include more than 150 groups involved in the mental health and substance use field. The group meets quarterly to establish goals and set priorities for ***Recovery Month*** every year. For a list of the Planning Partners, refer to the "Planning Partners" directory in this toolkit.

Additionally, SAMHSA, the Office of National Drug Control Policy (ONDCP), and the U.S. Department of Justice fund hundreds of community partnerships throughout the country. In 2009, CADCA estimated that there were more than 5,000 operational anti-drug coalitions in the United States.

SAMHSA supports community prevention efforts to help States, Territories, and Tribal governments reduce the impact of mental and/or substance use disorders on communities. The aim is to build greater social connectedness and stronger community cohesion, strengthen family environments so future generations will live and grow, and develop a healthier and more effective workforce for the future.

The following are health-related coalitions that can help guide you in the coalition-building process:

National Family Partnership
This coalition was formed in 1980 as a grassroots organization, and has grown into a network of nearly 100 partners consisting of local coalitions, PTO groups, and parent committees. The group is a leader in drug awareness, prevention, education, and advocacy.
800-705-8997 (Toll-Free)
305-856-4886

National Alliance on Mental Illness of New York City
This organization aims to provide support throughout the New York metropolitan area on behalf of those affected by mental health problems and their families. The group works with community stakeholders to educate the public and advocate for legislation to improve the mental health system.
212-684-3264

Indiana Addictions Issues Coalition
This group consists of organizations and individuals across Indiana who provide a voice to those affected by addictive disorders. The coalition promotes recovery by reducing stigmas, broadening public understanding, and influencing public policy.
317-638-3501 Ext. 231

Resources

Consult Planning Partner Resources...

Recovery Month Planning Partner organizations provide resources to help create a successful coalition. Listed below are just a few partner organizations. For a full list, see the "Planning Partners" directory in this toolkit.

Alcoholism and Substance Abuse Providers of New York State (ASAPNY)

This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.
518-426-3122

American Mental Health Counselors Association (AMHCA)

This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice; promotes mental health awareness; and builds the profession of mental health counseling nationally. AMHCA is dedicated to helping mental health counselors expand their professional knowledge and network of professional peers.
800-326-2642 (Toll-Free)
703-548-6002

Community Anti-Drug Coalitions of America (CADCA)

This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.
800-54-CADCA (22322) (Toll-Free)
703-706-0560

Faces & Voices of Recovery

This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, as well as their families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.
202-737-0690

Mental Health America (MHA)

This is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With nearly 300 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service. The local affiliates provide public education, information and referral, support groups, rehabilitation services, socialization, and housing services to those confronting mental health problems and to their loved ones.
800-969-6642 (Toll-Free)
703-684-7722

National Alliance on Mental Health (NAMI)

This organization is dedicated to building better lives for the millions of Americans affected by mental illness. NAMI advocates for access to services, treatment, supports and research and is steadfast in its commitment to raising awareness and building a community of hope for all of those in need.
800-950-NAMI (6264) (Toll-Free)

Resources

National Association for Children of Alcoholics (NACoA)

This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.

888-55-4COAS (2627) (Toll-Free)
301-468-0985

National Coalition for Mental Health Recovery (NCMHR)

This organization ensures that consumer/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the state and national levels, empowering people to recover and lead a full life in the community.

877-246-9058

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)

Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the Nation's #1 health problem—alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services, and has helped millions of individuals and family members into recovery.

800-NCA-CALL (622-2255) (Hope Line) (Toll-Free)
212-269-7797

National Inhalant Prevention Coalition (NIPC)

This public-private effort promotes awareness and recognition of the underpublicized problem of inhalant use. It serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.

800-269-4237 (Toll-Free)
423-265-4662

JOIN THE VOICES FOR RECOVERY It's Worth It

SINGLE-STATE AGENCY DIRECTORY

Prevention and Treatment of Mental and/or Substance use Disorders

Each U.S. State and territory offers information and support regarding mental and/or substance use disorders through the local government offices listed below. The following facilities are licensed, certified, or otherwise approved for inclusion by their State's mental and/or substance use disorder treatment authority. Their role is to plan, carry out, and evaluate mental and/or substance use disorder prevention and treatment services provided to individuals and families. Specifically, they oversee treatment centers and counselors in their respective States and, in many cases, supply funding to providers, track State trends, and ensure that residents receive the services to which they are entitled. **Unless the mental and substance use offices are combined – as they are in many States – the mental health services office is listed first, followed by prevention services, then the substance use services office.**

Alabama

Mental Health and Substance Use

Tammy Peacock, Ph.D., L.C.S.W., C.A.D.P.
Associate Commissioner
Mental Illness and Substance Abuse
Alabama Department of Mental Health
RSA Union Building
P.O. Box 301410
Montgomery, AL 36130-1410
Phone: 334-242-3642
Fax: 334-242-3025
tammy.peacock@mh.alabama.gov
http://www.mh.alabama.gov

Prevention

Maranda Brown
Interim NPN
Mental Illness-Substance Abuse Services Division
Alabama Department of Mental Health
100 North Union Street, Suite 408
Montgomery, AL 36130-1410
Phone: 334-353-8969
Fax: 334-242-0796
maranda.brown@mh.alabama.gov
http://www.mh.alabama.gov/SA/CentralOfficeOrganization.aspx#PreventionServices

Alaska

Mental Health and Substance Use

Melissa Stone
Director
Division of Behavioral Health
Alaska Department of Health and Social Services
3601 C Street, Suite 878
Anchorage, AK 99503
Phone: 907-269-3410
Fax: 907-269-8166
melissa.stone@alaska.gov
http://www.hss.state.ak.us/dbh

Prevention

L. Diane Casto
Manager
Prevention and Early Intervention
Division of Behavioral Health
Alaska Department of Health and Social Services
P.O. Box 110620
Juneau, AK 99811-0620
Phone: 907-465-1188
Fax: 907-465-1189
l.casto@alaska.gov
http://hss.state.ak.us/dbh/prevention/default.htm

Resources

Arizona

Mental Health and Substance Use

Laura K. Nelson, M.D.
Deputy Director
Division of Behavioral Health Services
Arizona Department of Health Services
150 North 18th Avenue, Suite 200
Phoenix, AZ 85007-3228
Phone: 602-364-4566
Fax: 602-502-1062
laura.nelson@azdhs.gov
http://www.azdhs.gov/bhs

Prevention

Lisa S. Shumaker, M.A.
Manager
Office of Prevention
Division of Behavioral Health Services
Arizona Department of Health Services
150 North 18th Avenue, Suite 220
Phoenix, AZ 85007-3228
Phone: 602-364-4594
Fax: 602-364-4767
lisa.shumaker@azdhs.gov
http://www.azdhs.gov/bhs/ops.htm

Arkansas

Mental Health and Substance Use

Ann Brown
Director of Prevention, Treatment, and Recovery
Division of Behavioral Health Services
Arkansas Department of Human Services
305 South Palm Street
Little Rock, AR 72205
Phone: 501-686-9105
Fax: 501-686-9396
ann.brown@arkansas.gov
http://humanservices.arkansas.gov/dbhs/Pages/default.aspx

Prevention

Ann Brown
Director of Prevention, Treatment, and Recovery
Division of Behavioral Health Services
Arkansas Department of Human Services
305 South Palm Street
Little Rock, AR 72205
Phone: 501-686-9105
Fax: 501-686-9396
ann.brown@arkansas.gov
http://www.arkansas.gov/dhs/dmhs/alco_drug_abuse_prevention.htm

California

Mental Health

Cliff Allenby
Acting Director
State of California
Department of Mental Health
1600 Ninth Street, Room 151
Sacramento, CA 95814
Phone: 916-654-2309
Fax: 916-654-3198
cliff.allenby@dmh.ca.gov
http://www.dmh.ca.gov

Prevention

Laura Colson
Manager
Program Services Division
Prevention Services Branch
California Department of Alcohol and Drug Programs
1700 K Street, Fourth Floor
Sacramento, CA 95811
Phone: 916-323-8336
Fax: 916-323-0633
laura.colson@adp.ca.gov
http://www.adp.ca.gov/Prevention/programs.shtml

Resources

Prevention
Dave Neilsen
Deputy Director
Program Services Division
California Department of Alcohol and Drug Programs
1700 K Street, Fourth Floor
Sacramento, CA 95811
Phone: 916-322-7012
Fax: 916-323-0653
dave.neilsen@ado.ca.gov
http://www.adp.ca.gov/Prevention/programs.shtml

Substance Use
Michael S. Cunningham
Acting Director
California Department of Alcohol and Drug Programs
1700 K Street, Fifth Floor
Sacramento, CA 95811
Phone: 916-322-1943
Fax: 916-324-7338
ichael.cunningham@adp.ca.gov
http://www.adp.cahwnet.gov

Colorado

Mental Health and Substance Use
Lisa M. Clements, Ph.D.
Office Director
Office of Behavioral Health
Colorado Department of Human Services
3520 West Oxford Avenue
Denver, CO 80236-3111
Phone: 303-866-7473
Fax: 303-866-7090
lisa.clements@state.co.us
http://www.colorado.gov/cs/Satellite/CDHS-BehavioralHealth/CBON/1251581077594

Prevention
Stan Paprocki
Director
Community Prevention Services
Division of Behavioral Health
Colorado Department of Human Services
3824 West Princeton Circle
Denver, CO 80236-3111
Phone: 303-866-7503
Fax: 303-866-7428
stan.paprocki@state.co.us
http://www.colorado.gov/cs/Satellite?c=Page&childpagename=CDHS-BehavioralHealth%2FCBONLayout&cid=1251581449373&pagename=CBONWrapper

Connecticut

Mental Health and Substance Use
Pat Rehmer, M.S.N.
Commissioner
Connecticut Department of Mental Health and Addiction Services
P.O. Box 341431
MS-14 COM
Hartford, CT 06134-1431
Phone: 860-418-6676
Fax: 860-418-6691
pat.rehmer@po.state.ct.us
http://www.dmhas.state.ct.us

Prevention
Carol P. Meredith
Acting Director
Prevention and Health Promotion
Connecticut Department
of Mental Health and Addiction Services
P.O. Box 341431
MS-14 COM
Hartford, CT 06134-1431
Phone: 860-418-6826
Fax:860-418-6792
carol.meredith@ct.gov
http://www.ct.gov/dmhas/site/default.asp

Resources

Delaware

Mental Health and Substance Use

Kevin Ann Huckshorn
Director
Division of Substance Abuse and Mental Health
Delaware Department of Health and Social Services
Main Administration Building, Room 187
1901 North DuPont Highway
New Castle, DE 19720
Phone: 302-255-9398
Fax: 302-255-4427
kevin.huckshorn@state.de.us
http://www.dhss.delaware.gov/dhss/dsamh/index.html

Prevention

Isabel Rivera-Green
Prevention Specialist
Division of Substance Abuse and Mental Health
Delaware Department of Health and Social Services
Main Administration Building, Room 184
1901 North DuPont Highway
New Castle, DE 19720
Phone: 302-255-4722
Fax: 302-255-4428
isabel.rivera-green@state.de.us
http://www.dhss.delaware.gov/dhss/dsamh/prevention.html

District of Columbia

Mental Health

Stephen T. Baron
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North Dakota

Mental Health and Substance Use

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Prevention

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Resources

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Mental Health

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Prevention

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Oklahoma

Mental Health and Substance Use

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Prevention

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Resources

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Mental Health and Substance Use

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Prevention

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Mental Health

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Prevention

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Rhode Island

Mental Health and Substance Use

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Resources

Prevention

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South Carolina

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Prevention

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Mental Health and Substance Use

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Prevention

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Resources

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Prevention

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Prevention

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Mental Health and Substance Use

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Resources

Prevention

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Vermont

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Prevention

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Resources

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Prevention

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Resources

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United States Virgin Islands

Mental Health and Substance Use

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Substance Use

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Resources

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Federated States of Micronesia

Mental Health and Substance Use

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Prevention

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Prevention

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Resources

Republic of the Marshall Islands

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Substance Use

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Commonwealth of Northern Mariana Islands

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Substance Use

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Resources

Republic of Palau

Mental Health and Substance Use

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JOIN THE VOICES FOR RECOVERY It's Worth It

PLANNING PARTNERS

The following organizations are partners involved in planning ***National Recovery Month (Recovery Month)*** activities in conjunction with the U.S. Department of Health and Human Services' Substance Abuse and Mental Health Services Administration (SAMHSA). You are encouraged to ask local and national organizations such as these to collaborate with your organization on ***Recovery Month*** planning; please refer to the "Building Community Coalitions" document for collaboration tips. To find affiliates or chapters in your local area, you can contact national organizations directly. A comprehensive list of mental and/or substance use disorder organizations are included in the "Prevention, Treatment, and Recovery Resources" section of this toolkit.

A&E Network
Inspired by the overwhelming response to its Emmy-nominated series Intervention, this television network created The Recovery Project, a multi-year campaign designed to generate widespread awareness that addiction is a treatable disease and recovery is possible.
http://www.therecoveryproject.com

Addiction Survivors
This group is dedicated to providing online peer support communities for those with addiction, their families, and friends.
http://www.addictionsurvivors.org

Addiction Technology Transfer Center (ATTC) Network National Office
To advance public health and wellness, SAMHSA's ATTC Network accelerates lasting change in behavioral health care systems by translating, disseminating, and promoting the adoption and implementation of effective and culturally sensitive clinical practices. A list of ATTC Regional Centers, the States they serve, and contact information can be found on the ATTC Network website.
816-235-6888
http://www.ATTCnetwork.org

Adult Children of Alcoholics (ACA) World Service Organization (WSO)
This is a 12-step, 12-tradition program of women and men who grew up in alcoholic or otherwise dysfunctional homes. Members meet with each other in a mutually respectful, safe environment and acknowledge common experiences.
562-595-7831
http://www.adultchildren.org

Advocates for Recovery Through Medicine (ARM)
This organization's goals are to end discrimination against people who use medications to treat addictions and to move addiction treatment (especially opiate treatment) into mainstream medicine.
810-250-9064
http://www.armme.org/index.html

Alcoholism and Substance Abuse Providers of New York State (ASAPNY)
This nonprofit membership association consists of coalitions, programs, and agencies throughout New York State that provide substance use disorder prevention, treatment, and research.
518-426-3122
http://www.asapnys.org

Resources

Alliance for Children and Families
This alliance provides services to the nonprofit child and family sectors and economic empowerment organizations.
414-359-1040
http://www.alliance1.org

American Association for Marriage and Family Therapy (AAMFT)
This association represents the professional interests of more than 25,000 marriage and family therapists throughout the United States, Canada, and abroad.
703-838-9808
http://www.aamft.org

American Association for the Treatment of Opioid Dependence (AATOD)
This group was founded in 1984 to enhance the quality of patient care in treatment programs by promoting the growth and development of comprehensive methadone treatment services throughout the United States.
212-566-5555
http://www.aatod.org

American Association of Pastoral Counselors (AAPC)
This group represents and sets professional standards for more than 3,000 pastoral counselors and 100 pastoral counseling centers in North America and around the world. It is non-sectarian and respects the spiritual commitments and religious traditions of those who seek assistance without imposing counselor beliefs onto the client.
703-385-6967
http://www.aapc.org

American Bar Association (ABA) Standing Committee on Substance Abuse
This committee promotes justice system reform that addresses problems associated with the illegal use of drugs and alcohol in this country. To carry out this mission, the Standing Committee collaborates with other ABA entities, Federal, State, and local public/private organizations; and State, local, and territorial bar associations.
202-662-1000
http://www.abanet.org/subabuse

American College of Mental Health Administration (ACMHA)
ACMHA is focused on equipping behavioral health leaders for a field that is rapidly changing in extraordinary times. The membership is a diverse working network of influential leaders and emerging leaders from across systems. Members are concerned with mental health and substance use conditions representing public and private administrators of services; national, State and county government; professional organizations; managed behavioral health care organizations; research and academia; and consumer and family advocacy organizations.
505-822-5038
http://www.acmha.org

American Council for Drug Education (ACDE)
This council is a prevention and education agency that develops programs and materials based on the most current scientific research on drug use and its impact on society.
646-505-2061
http://www.acde.org

Resources

American Dental Association (ADA)
This group is the world's oldest and largest national dental society, representing more than 156,000 dentists throughout the United States. The ADA is committed to helping its members better identify, understand, and accommodate the special health care needs of patients with substance use disorders and facilitating the journey of recovery for dentists and their office staffs.
312-440-2500
http://www.ada.org

American Mental Health Counselors Association (AMHCA)
This association works exclusively for licensed mental health counselors by advocating for legislation that expands, enhances, and protects the right to practice; promotes mental health awareness; and builds the profession of mental health counseling nationally.
800-326-2642
703-548-6002
http://www.amhca.org

American Psychological Association (APA)
This organization is the largest scientific and professional organization representing psychology in the United States. Its membership includes more than 150,000 researchers, educators, clinicians, consultants, and students.
800-374-2721
202-336-5500
http://www.apa.org

American Society of Addiction Medicine (ASAM)
This is an association of 3,000 physicians nationwide dedicated to improving the treatment of alcoholism and other addictions, educating physicians and medical students, promoting research and prevention, and enlightening and informing the medical community and the public about these issues.
301-656-3920
http://www.asam.org

Arab and Middle East Resources Center (AMERC)
This nonprofit organization was founded to provide inter-culturally sensitive services to raise awareness about mental and substance use disorders. This includes public awareness and recovery support. AMERC is a member of Michigan Community Coalition for Change (MC3) and its mission is building bridges for recovery and well-being.
313-766-8712

Association of Lesbian and Gay Addiction Professionals and Their Allies (NALGAP)
NALGAP is a membership organization founded in 1979 and dedicated to the prevention and treatment of alcoholism, substance abuse, and other addictions in lesbian, gay, bisexual, transgender, and queer communities.
http://www.nalgap.org

Association of Persons Affected by Addiction (APAA)
This nonprofit recovery community organization is designed to engage the faces and voices of the recovery community in reducing stigma. It provides peer-to-peer recovery community support services.
214-634-APAA (2722)
http://www.apaarecovery.org

Association of Recovery Schools (ARS)
This organization advocates for the promotion, strengthening, and expansion of secondary and post-secondary programs designed for students and families committed to achieving success in both education and recovery. ARS exists to support such schools which, as components of the recovery continuum of care, enroll students committed to being abstinent from alcohol and other drugs and working a program of recovery.
215-628-8600
http://www.recoveryschools.org

Resources

Beit T'Shuvah
Beit T'Shuvah is a facility where approximately 120 residents interact with clinical staff in a healing atmosphere that emphasizes faith-based recovery and the values of the Jewish community. The organization's goal is to reduce the incidence of addiction and other harmful behaviors through individual and family education.
310-204-5200
http://www.beittshuvah.org

Behavioral Health Services (BHS)
This nonprofit organization has provided a continuum of substance use, mental health and senior services since 1973. Each of its 11 facilities (located throughout Los Angeles County) is based on its mission of transforming lives by offering hope and opportunities for recovery, wellness, and independence.
310-679-9126
http://www.bhs-inc.org

C4 Recovery Solutions, Inc.
This nonprofit was established to promote the design, provision, and monitoring of outcomes-based services that initiate and sustain recovery from substance use disorders, as well as improve prevention and harm reduction strategies that mitigate addiction's effects.
http://www.c4recoverysolutions.org

California Association of Addiction Recovery Resources (CAARR)
This association educates and provides statewide recovery resources for alcoholics and people with addiction problems living in California.
916-338-9460
http://www.caarr.org

Capitol Decisions, Inc.
This full-service government relations and public affairs firm provides counsel in distinct issue areas, including State and local government, public works, health care, and public health.
202-638-0326
http://www.capitoldecisions.com

Caron Treatment Center
This center offers detoxification, gender-separate rehabilitation, relapse treatment, and extended care for adults and adolescents; educational programs for family members; and student assistance services.
800-854-6023
http://www.caron.org

Catholic Charities, USA
This membership association provides vital social services to people in need, regardless of their religious, social, or economic backgrounds.
703-549-1390
http://www.catholiccharitiesusa.org

Center for Alcohol and Drug Research and Education
This international nonprofit organization provides public information and technical assistance, guidance, information, and expert service to individuals, organizations, governmental agencies, and a variety of nonprofit organizations in the private sector to improve the quality of their response to substance use disorders.
410-377-8992

Chicanos Por La Causa, Inc.
This nonprofit community development corporation offers social service programs and services throughout Arizona.
602-257-0700
http://www.cplc.org

Resources

Collaborative Support Programs of New Jersey, Inc. Institute for Wellness and Recovery Initiatives
This organization is a nonprofit, statewide agency managed and operated by and for consumers of mental health services. The organization has four service areas that provide a full range of services throughout New Jersey: 1) community outreach and self-help center services; 2) supportive housing services and housing development; 3) supported employment; and 4) technical assistance/training focused on the Eight Dimension Wellness Model.
732-677-1682
http://www.cspnj.org
http://www.welltacc.org

Communities of Tomorrow's Economic Development (CT)
This organization, in cooperation with industry players, associations, regional economic development authorities, and other stakeholders, aims to create economic development in the private sector. CT focuses on the expansion of existing enterprises and the creation of new enterprises to drive economic growth and maximize return on investment in innovation.
306-522-6699
http://www.communitiesoftomorrow.ca

Community Anti-Drug Coalitions of America (CADCA)
This organization builds and strengthens the capacity of community coalitions to create safe, healthy, and drug-free communities. It supports members with technical assistance and training, public policy, media strategies, conferences, and special events.
800-542-2322
703-706-0560
http://www.cadca.org

Connecticut Turning to Youth and Families (CTYF)
This is a nonprofit organization established to strengthen prevention, treatment, and recovery support services for youth and families. Using the power of youth and families with their own stories, this organization offers peer-to-peer programs and services that are natural recovery supports for other youth and families.
860-838-3553
http://www.ctyouthandfamilies.org/ctyf

Corporation for Supportive Housing (CSH)
This organization, established in 1991, advances its mission to help communities create permanent housing to prevent and end homelessness by providing advocacy, expertise, leadership, and financial resources to make it easier to create and operate supportive housing.
212-986-2966
http://www.csh.org

CRC Health Group
This group offers the most comprehensive network of specialized behavioral care services in the Nation, serving more than 30,000 people each day in 140 facilities, as well as providing healing and hope in the lives of patients, students, and families. For more than two decades, CRC programs have helped individuals and families reclaim and enrich their lives.
877-272-8668
http://www.crchealth.com

DC Bar – Lawyers Assistance Program
Established in 1985, this is a free and confidential program assisting lawyers, judges, and law students who experience problems that interfere with their personal lives or their ability to serve as counsel or officers of the court.
202-737-4700
http://www.dcbar.org/for_lawyers/bar_services/counseling/index.cfm

Easy Does It, Inc.
This group organizes committees that focus on a holistic approach to the process of personal growth within the recovery process.
610-373-2463
http://www.easydoesitinc.org

Resources

Elks Drug Awareness Resource Center
This program is the largest volunteer drug awareness program in the country. It is committed to eliminating the use of illegal drugs by all members of its society.
773-755-4700
http://www.elks.org

Employee Assistance Professionals Association, Inc. (EAPA)
This membership organization offers resources to employee assistance professionals.
703-387-1000
http://www.eapassn.org

Employee Health Programs
This group, a subsidiary of First Advantage Corporation, designs and manages drug-free workplace programs, employee assistance programs, and other services that benefit employers and employees.
800-321-4473
http://www.ehp.com

Entertainment Industries Council, Inc. (EIC)
This nonprofit organization works within the film, television, and music industries to promote the accurate depiction of health and social issues in entertainment productions. 703-481-1414 (EIC East Coast)
818-840-2016 (EIC West Coast)
http://www.eiconline.org

Executive Office of the President (EOP) White House Office of Faith-Based and Neighborhood Partnerships
Located in seven Federal agencies, this group's goal is to ensure that grassroots leaders can compete on an equal footing for Federal dollars, receive greater private support, and face fewer bureaucratic barriers.
202-456-3394
http://www.whitehouse.gov/administration/eop/ofbnp

Executive Office of the President (EOP) White House Office of National Drug Control Policy (ONDCP)
This component of the Executive Office of the President establishes policies, priorities, and objectives for the Nation's drug control program, which includes prevention, treatment, and recovery.
800-666-3332
http://www.whitehouse.gov/ondcp

EOP, ONDCP Information Clearinghouse
This Federal office serves as a resource for statistics, research data, and referrals useful for developing and implementing drug policy.
800-666-3332
http://www.whitehousedrugpolicy.gov/about/clearingh.html

Faces & Voices of Recovery
This national recovery advocacy organization mobilizes people in recovery from addiction to alcohol and other drugs, as well as their families, friends, and allies in campaigns to end discrimination and make recovery a reality for even more Americans.
202-737-0690
http://www.facesandvoicesofrecovery.org

Faith Partners
This organization promotes the prevention of alcohol, tobacco, and other drug abuse. It provides tools, training, materials, and assistance to congregations in several States.
512-394-9101
http://www.faith-partners.org

Foundation for Recovery
This group promotes the positive impact recovery has in the community and in the lives of individuals and families affected by substance use and/or mental health conditions. Its programs, services, and partnerships open pathways for recovery by removing social barriers and creating opportunities for those seeking recovery.
702-257-8199
http://www.forrecovery.org

Resources

Foundations Associates
This is a treatment and advocacy organization dedicated solely to the treatment and recovery of people with co-occurring substance use and mental disorders. The agency has a full continuum of care, with locations in Memphis and Nashville, TN.
877-345-3357
615-345-3200
http://www.dualdiagnosis.org

Friends of SAMHSA
This organization engages in communication, education, and grassroots advocacy in an effort to increase awareness and advance the agenda of the Substance Abuse and Mental Health Services Administration (SAMSHA). This independent coalition is dedicated to bringing awareness to the important role that behavioral health plays in overall health. It believes that SAMHSA should be a major contributor to the formation of health policy and also seeks to work with SAMHSA's leadership to improve its dialogue with those in the field, so that in the end the consumer will benefit. This organization is not affiliated with SAMHSA.
http://friendsofsamhsa.goodbarry.com

Gaudenzia, Inc.
This group helps people affected by chemical dependency, mental illness, and related conditions to achieve a better quality of life – allowing them to live as productive and accountable individuals.
610-239-9600
http://www.gaudenzia.org

Georgetown University Health Policy Institute
This is a multi-disciplinary group of faculty and staff dedicated to conducting research on key issues in health policy and health services research. Institute members are engaged in diverse projects, focusing on issues relating to health care financing, the uninsured, Federal health insurance reforms, quality of care and outcomes research, mental health services research, and the impact of changes in the health care market on providers and patients.
202-687-0880
http://ihcrp.georgetown.edu

George Washington University
Ensuring Solutions to Alcohol Problems Initiative
This program works to increase access to treatment for individuals with alcohol problems by collaborating with policymakers, employers, and concerned citizens.
202-296-6922
http://www.gwumc.edu/sphhs/institutescenters/ensuring_solutions_to_alcohol_problems.cfm

Grace Street Recovery Services
This organization assists those seeking recovery by providing pathways out of addictions and into new landscapes shaped by dignity and grace. We are a recovery-oriented sanctuary anchored in the heart of our community.
207-312-4408
gsrecovery@gmail.com

Health Matrix, Inc.
This organization develops communications programs that inform the debate on key issues in science, policy, and health care.
703-918-4930
http://www.healthmatrixinc.com

International Nurses Society on Addictions
This professional specialty organization offers information and education for nurses concerning prevention, intervention, treatment, and management of substance use disorders.
877-6-INSTA (646-8672)
http://www.intnsa.org

Resources

Jewish Alcoholics, Chemically Dependent Persons and Significant Others (JACS)/A Program of the Jewish Board of Family and Children Services (JBFCS)

This program's mission is to help both individuals and the Jewish community at large effectively treat and prevent addiction. JACS provides a supportive network of Jews who are successfully in recovery, as well as the communal professionals, clergy, and educators who help them. This organization is a resource center where individuals, families, groups, and community institutions can turn for helpful, comforting guidance.

212-632-4600

http://www.jbfcs.org/programs-services/jewish-community-services-2/jacs

Join Together

This national resource for communities working to reduce substance use disorders offers a comprehensive website, daily news updates, publications, and technical assistance.

617-437-1500

http://www.jointogether.org

The Legal Action Center (LAC)

This nonprofit law and policy organization fights discrimination against people with histories of substance use disorders, HIV/AIDS, or criminal records, and advocates for sound public policies in these areas.

800-223-4044

212-243-1313

http://www.lac.org

LifeRing

This international nonprofit organization offers sober, secular self-help. Members rely on the strength of each individual and the influence of sober conversation to abstain from alcohol and drugs. LifeRing welcomes people from all faiths, or none, but those beliefs are private. LifeRing brings people together via face-to-face and online support groups, and provides sobriety tools through original books, publications, and interactive online resources.

800-811-4142

http://www.lifering.org

Massachusetts Organization for Addiction Recovery (MOAR)

This organization is a collective voice of people in recovery, families, and friends who are helping each other educate the public about the value of living in recovery and the resources to support recovery.

617-423-6627

http://www.moar-recovery.org

The McShin Foundation

This foundation is Virginia's fastest growing peer-to-peer recovery community organization. Founded in 2004, The McShin Foundation is a nonprofit organization committed to serving individuals and families in their fight against substance use disorders.

804-249-1845

http://www.mcshin.org

Mental Health America (MHA)

MHA is the country's oldest and largest nonprofit organization addressing all aspects of mental health and mental illness. With nearly 300 affiliates nationwide, MHA works to improve the mental health of all Americans through advocacy, education, research, and service.

800-969-6642

703-684-7722

http://www.mentalhealthamerica.net

http://www.mentalhealthamerica.net/go/recovery

Resources

Minnesota Recovery Connection (MRC)
MRC connects people seeking recovery to resources that help foster and sustain long-term recovery. This organization assists people seeking treatment, transportation, housing, job training, education, health or other pathways to recovery.
651-233-2080
http://www.minnesotarecovery.org

MusiCares
This program provides a safety net of critical assistance for people in times of need. Its services and resources cover a wide range of financial, medical, and personal topics. It also focuses the resources and attention of the music industry on human service issues that directly impact the health and welfare of the music community.
310-392-3777 (West Region)
212-245-7840 (East Region)
615-327-0050 (South Region)
http://www.musicares.com

NAADAC, The Association for Addiction Professionals
This is a national nonprofit membership organization, with over 52 affiliates across the United States, American Territories, and internationally. It focuses on empowering addiction professionals to achieve excellence through education, advocacy, knowledge, standards of practice, ethics, and professional development and research.
800-548-0497
703-741-7686
http://www.naadac.org

Narconon
This is a nonprofit drug rehab program dedicated to eliminating drug abuse and drug addiction through drug prevention, education, and rehabilitation.
800-775-8750
323-962-2404
http://www.narconon.org

Narconon of Oklahoma
This group is located in Oklahoma and is part of the larger Narconon International group. It uses a full approach to treatment and recovery by teaching participants how to live a drug-free life.
800-468-6933
http://www.stopaddiction.com

National Alliance for Medication Assisted Recovery (NAMA Recovery)
This is a membership organization representing people whose recovery from opiate dependence is assisted with medication. Its membership includes methadone patients, family members, and health care professionals whose common goal is to fight the ignorance and prejudice surrounding medication-assisted recovery.
212-595-NAMA (6262)
http://www.methadone.org

National Alliance of Advocates for Buprenorphine Treatment (NAABT)
This nonprofit organization has the mission to educate the public about the disease of opioid addiction and the buprenorphine treatment option to help reduce discrimination associated with patients with addiction disorders; and to serve as a conduit for connecting patients in need of treatment to qualified treatment providers.
860-269-4390
http://www.naabt.org

National Alliance to End Homelessness
This is a nationwide coalition of public, private, and nonprofit organizations devoted to ending homelessness.
202-638-1526
http://www.endhomelessness.org

National Asian Pacific American Families Against Substance Abuse, Inc. (NAPAFASA)
This private, nonprofit membership organization involves service providers, families, and youth to promote health and social justice and address the alcohol, tobacco, and other drug issues of Asian and Pacific Islander populations.
213-625-5795
http://www.napafasa.org

Resources

National Association for Children of Alcoholics (NACoA)
This national nonprofit membership and affiliate organization is the advocate and voice for children and families impacted by alcoholism or drug dependency in the family. NACoA provides training, evidence-based programs, materials, and public policy guidance to facilitate substance use prevention and recovery support for all impacted family members.
888-554-COAS (2627)
301-468-0985
http://www.nacoa.org

National Association of Addiction Treatment Providers (NAATP)
This association represents private substance use disorder treatment programs throughout the United States.
717-392-8480
http://www.naatp.org

National Association of County Behavioral Health and Developmental Disability Directors (NACBHD)
This nonprofit membership organization is comprised of county/local behavioral health authorities who plan and deliver mental health, developmental disability, and substance use disorder services, as well as the State associations that represent their interests.
202-661-8816
http://www.nacbhd.org

National Association of Drug Court Professionals (NADCP)
This association seeks to reduce substance use, crime, and recidivism by promoting and advocating for the establishment and funding of drug courts and providing for the collection and dissemination of information, technical assistance, and mutual support to association members.
703-575-9400
http://www.nadcp.org

National Association of Public Child Welfare Administrators (NAPCWA)
This association is devoted solely to representing administrators of State and local public child welfare agencies, bringing an informed view of the problems facing families today to the formulation of child welfare policy.
202-682-0100
http://www.aphsa.org/napcwa

National Association of Social Workers (NASW)
As the largest membership organization of professional social workers in the world, this organization works to enhance the professional growth and development of its members, to create and maintain professional standards, and to advance sound social policies.
202-408-8600
http://www.socialworkers.org

National Association of State Alcohol and Drug Abuse Directors (NASADAD)
This association supports the development of effective prevention and treatment programs t hroughout every State.
202-293-0090
http://www.nasadad.org

National Association on Alcohol, Drugs and Disability, Inc. (NAADD)
This association promotes awareness and education about substance use disorders among people with physical, sensory, cognitive, and developmental disabilities.
650-578-8047
http://www.naadd.org

National Center on Addiction and Substance Abuse at Columbia University (CASA)
This organization is the only nationwide entity that brings together all the professional disciplines needed to study and combat the abuse of all substances – alcohol, nicotine as well as illegal, prescription, and performance-enhancing drugs – in all sectors of society.
212-841-5200
http://www.casacolumbia.org

Resources

National Civic League (NCL)
This is a nonprofit, nonpartisan membership organization dedicated to strengthening citizen democracy by transforming democratic institutions. It fosters innovative community building and political reform, assists local governments, and recognizes collaborative community achievement.
303-571-4343
http://www.ncl.org

National Coalition for Mental Health Recovery (NCMHR)
This coalition ensures that consumers/survivors have a major voice in the development and implementation of health care, mental health, and social policies at the State and national levels, empowering people to recover and lead a full life in the community.
877-246-9058
http://www.ncmhr.org

National Conference of State Legislatures (NCSL)
This is a bipartisan organization that serves the legislators and staffs of the Nation's 50 States, its commonwealths, and territories. It provides research, technical assistance, and opportunities for policymakers to exchange ideas on the most pressing State issues.
202-624-5400
http://www.ncsl.org

National Council for Community Behavioral Healthcare
This group is the national association of community providers who together care for 6 million adults and children across the country who suffer from mental illnesses, developmental disabilities, and substance use disorders. Its members employ more than 250,000 staff and provide mental health and substance use treatment, rehabilitation, housing, and community support services.
202-684-7457
http://www.thenationalcouncil.org

National Council on Alcoholism and Drug Dependence, Inc. (NCADD)
Founded in 1944, NCADD and its Affiliate Network is a voluntary health organization dedicated to fighting the Nation's No.1 health problem—alcoholism, drug addiction, and the devastating consequences of alcohol and other drugs on individuals, families, and communities. NCADD focuses on increasing public awareness and understanding of the disease of alcoholism and drug dependence through education, prevention, information/referral, intervention, treatment services, advocacy, and recovery support services. It has helped millions of individuals and family members into recovery.
800-NCA-CALL (622-2255) (Hope Line)
212-269-7797
http://www.ncadd.org

National Council on Alcoholism and Drug Dependence – Greater Detroit Area (NCADD-GDA)
This council provides effective alcohol and drug abuse intervention, prevention, and treatment services to children and adults with substance use disorders in the Detroit area.
313-868-1340
http://www.ncadd-detroit.org

National Council on Patient Information and Education (NCPIE)
This multi-disciplinary coalition works together to stimulate and improve communication of information on safe and appropriate medicine use to consumers and healthcare professionals.
301-340-3940
http://www.talkaboutrx.org

National Drug Court Institute (NDCI)
This institute promotes education, research, and scholarship for drug court and other court-based intervention programs.
703-575-9400
http://www.ndci.org

Resources

National Inhalant Prevention Coalition (NIPC)
This public-private effort promotes awareness and recognition of the under-publicized problem of inhalant use. The coalition serves as an inhalant referral and information clearinghouse, stimulates media coverage about inhalant issues, develops informational materials and a newsletter, provides training and technical assistance, and leads a week-long national grassroots education and awareness campaign.
800-269-4237
423-265-4662
http://www.inhalants.org

National Organization on Fetal Alcohol Syndrome (NOFAS)
This organization provides education and awareness about the prevention of birth defects caused by alcohol consumption during pregnancy.
202-785-4585
http://www.nofas.org

National Rural Alcohol and Drug Abuse Network, Inc. (NRADAN)
This private, nonprofit foundation promotes networking between rural programs and professionals along with providing liaisons to key Federal and State government agencies and private resources.
715-232-2793
http://www.uwstout.edu/outreach/nri

National Safety Council (NSC)
This council is a nonprofit public service organization dedicated to educating and influencing people to prevent accidental injuries and deaths.
800-621-7615
http://www.nsc.org

Network for the Improvement of Addiction Treatment (NIATx)
This network is a partnership between the Robert Wood Johnson Foundation's Paths to Recovery program, the Center for Substance Abuse Treatment's Strengthening Treatment Access and Retention (STAR) program, the National Institute on Drug Abuse, and a number of independent addiction treatment organizations. It works with addiction treatment providers to make more efficient use of their capacity and shares strategies for improving treatment access and retention.
608-265-0063
http://www.niatx.net

Newport Academy
This treatment center is dedicated to providing comprehensive, gender-specific, integrated treatment programs for adolescent males and females in an environment of caring and compassion by which teens and their families may recover from the destructive effects of substance use disorders and related behavioral health issues. It offers separate residential facilities and has an active after-school program in Orange County, CA.
866-382-6651
http://www.newport-academy.com

New York City Department of Health and Mental Hygiene
Office of Consumer Affairs
This office responds directly to consumers' needs in three distinct disability areas: mental health, mental retardation/developmental disabilities, and chemical dependency. The office has a dual mission – to ensure that consumer voices and perspectives are heard and integrated at all levels, and to empower consumers through education and exposure to resources. It works towards incorporating recovery principles and practices into the City's mental health system, including the Division of Mental Hygiene.
212-219-5393
http://www.nyc.gov/html/doh/html/dmh/dmh-oca.shtml

Resources

New York State Office of Alcoholism and Substance Abuse Services
This organization works to improve the lives of residents of New York by leading a system of addiction services through prevention, treatment, and recovery.
518-473-3460
http://www.oasas.ny.gov

North Carolina Department of Health and Human Services
Division of Mental Health Developmental Disabilities and Substance Abuse
This office is primarily responsible for leadership, guidance, and management of relationships with the local management entities who contract directly for addiction treatment services. It also collaborates with a wide variety of public and private partners and customers to promote recovery through the adoption of recovery-oriented systems of care and the promotion of a reduction to barriers to services.
919-733-4534
http://www.dhhs.state.nc.us/MHDDSAS

Northern Ohio Recovery Association (NORA)
This project provides faith-based recovery support services across Cuyahoga, Lorain, and Summit Counties.
216-391-6672
http://www.norainc.org

Odyssey Networks
This network is the Nation's largest coalition of Christian, Jewish, and Muslim faith groups dedicated to achieving interfaith understanding through the production and distribution of media.
212-870-1030
http://www.odysseynetworks.org

Oxford House, Inc.
This is the umbrella organization for a network of more than 1,200 democratically-run, self-supporting, and drug-free group homes throughout the country.
800-689-6411
301-587-2916
http://www.oxfordhouse.org

The Partnership at Drugfree.org
This nonprofit organization helps parents prevent, intervene in, and find treatment for drug and alcohol use by their children. Bringing together renowned scientists, parent experts, and communications professionals, this public health nonprofit translates current research on teen behavior, parenting, addiction, and treatment into easy-to-understand resources at drugfree.org. The organization also reaches families through its community education programs, which focus on local drug and alcohol issues of concern for parents, youth, and the Hispanic community.
212-922-1560
http://www.drugfree.org

Partnership for Recovery (PFR)
This coalition includes the Betty Ford Center, Bradford Health Systems, Cumberland Heights, Father Martin's Ashley, Gateway Rehabilitation Center, Hazelden Foundation, Valley Hope Association, and the National Association of Addiction Treatment Providers.
202-737-8167
http://www.partnershipforrecovery.org

Pennsylvania Department of Health
Bureau of Drug and Alcohol Programs
This State government agency develops and implements a comprehensive health, education, and rehabilitation program for the prevention, intervention, treatment, and case management of substance use disorders.
717-783-8200
http://www.health.state.pa.us/bdap

Phoenix House
This nonprofit organization serves individuals throughout the country who are struggling with substance use and/or mental disorders. Phoenix House provides residential and outpatient treatment along with prevention and recovery support services.
800-DRUG-HELP (3784-4357)
http://www.phoenixhouse.org

Resources

Portland State University
Graduate School of Social Work
This program offers the only graduate social work education programs in Oregon accredited by the Council on Social Work Education. The school's three major functions are teaching, research, and community service.
503-725-4712
http://www.ssw.pdx.edu

PRO-ACT
This grassroots recovery support initiative in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties) has provided prevention, intervention, and recovery support services, as well as education and advocacy, to the community for 11 years. It provides a growing matrix of peer-to-peer support services, which has led to the opening of three Recovery Community Centers, now a hub for all recovery services.
800-221-6333
http://www.proact.org

The Providence Center
This organization is the largest community mental health center in Rhode Island providing comprehensive services to adults, adolescents, and children experiencing mental health, substance use, emotional, and behavioral difficulties.
401-528-0123
http://www.providencecenter.org

Psychology Today
This organization is dedicated to helping people understand their addiction, the issues behind it, and how to overcome the challenge.
212-260-7210
http://www.psychologytoday.com

Reality House
Established in 1967, Reality House, Inc. provides culturally-appropriate substance abuse and HIV treatment and prevention services to New Yorkers. The Reality House facilities consist of a 30 bed veteran's residence and a medically supervised outpatient chemical dependency treatment program.
212-281-6004
http://www.realityhouseny.org

The RASE Project
This project in south central Pennsylvania provides recovery support services, events, training and education, supportive housing, and intervention services. The RASE Project also offers the Buprenorphine Coordinator Program, providing recovery support for those in medication-assisted treatment for opioid addiction.
717-232-8535
http://www.raseproject.org

Reclaiming Futures
This initiative created by the Robert Wood Johnson Foundation (RWJF), housed in the Regional Research Institute of the School of Social Work at Portland State University, offers a new approach to helping teenagers caught in the cycle of drugs, alcohol, and crime. In 29 communities across the Nation, the program has received investments to spread its model from RWJF, the Office of Juvenile Justice and Delinquency Prevention, SAMHSA's Center for Substance Abuse Treatment, and the Kate B. Reynolds Charitable Trust.
503-725-8911
www.reclaimingfutures.org

Recovering Your Body
An organization awareness of the benefits of fitness, nutrition, athletics and energy healing in the recovery process through a website, articles, videos and, with the help of others, concrete programs.
914-478-5048
http://recoveringyourbody.com

Resources

Recovery Alliance of El Paso
The alliance was organized in 1998 to fight discrimination for people in recovery from substance use disorders and is now dedicated to providing peer-to-peer recovery support services.
866-535-7276
915-594-7000
http://www.recoveryalliance.net

Recovery Connection
This is a comprehensive addiction treatment resource and drug rehabilitation referral service. The organization has staff across the country available 24 hours a day to answer all concerns about substance use, addiction treatment, and rehabilitation.
800-993-3869
954-491-1771
http://www.recoveryconnection.org

Recovery Consultants of Atlanta, Inc. (RCA)
This is a nonprofit, faith-based organization founded by concerned, committed, and spiritually centered members of metro Atlanta's recovery community. It collaborates with faith (primarily churches) and community-based organizations, develops peer-to-peer support services and programs, and works to build a network of recovering individuals.
404-289-0313
http://www.recoveryconsultants.org

Recovery Living Network
This global communications network focuses on a ddiction recovery and prevention, using the power of personal experience, celebrity influence, and mass media communication to help individuals when alcohol, drugs, or other excessive behaviors have become a problem in their lives. Its mission is to remove misconceptions from the public psyche to change the perception and image of addiction by talking about it openly and honestly, and by sharing personal stories of hope and inspiration.
310-315-4727
http://www.recoveryliving.com

Recovery Network Foundation (RNF)
This foundation develops recovery-dedicated projects in print, radio, TV, film, and video formats. "Under the Influence: The Film Series" is a national touring festival that showcases films in which addiction and recovery play leading roles.
914-941-2863
http://www.recoverynetworkfoundation.org

RecoveryNC
*Initiated in September 2008 to coincide with the celebration of **Recovery Month**, this campaign allows North Carolinians in recovery to emerge together, along with their families, friends, advocates, and the treatment and recovery provider community.*
919-802-7972
http://www.recoverync.org

ReStart, Inc.
This nationally accredited, full-service behavioral health care provider offers a wide range of diagnostic and treatment services tailored to meet individual needs, including community support services for adults, children, and adolescents. It offers diagnostic assessments, child and adult therapy, family and group sessions, assessments and counseling, residential treatment for girls, behavioral therapy, assertive community treatment teams, psychological evaluations, intensive in-home services, and community support teams.
252-355-4725
http://www.restarthumanservices.com

ROCKSTAR SUPERSTAR PROJECT (RSSS)
In a culture pervasive with messaging and branding that encourages risky behavior, twin brothers who legally changed their names to Rock Star and Super Star are on a mission to Rebrand Sobriety inspiring responsible choices and dream catching. We have an obligation and an opportunity to inspire teens to make responsible choices and go boldly towards their dreams. RSSS programs encourage those crucial conversations.
http://www.rockstarsuperstarproject.com

Resources

Sagebrush
This holistic residential treatment center for adults provides a small, individualized clinical program to give an ideal recovery environment where one can focus on mental, physical, and spiritual well-being.
888-406-7444
http://www.sagebrushva.com

Second Road, Inc., The
This is a 24-hour web-based nonprofit group to help those in recovery (and the families of those affected by addiction) learn to live with the challenges presented by everyday life and continue on a fulfilling road of recovery. The site offers a community of trust and understanding, inspiring stories from people of diverse cultures and backgrounds, the knowledge of many experts in the addiction treatment field, and the tools to resist relapse in a secure, non-threatening, environment.
434-295-9595
http://www.thesecondroad.org

SMART Recovery®
This international nonprofit organization offers free, self-empowering, science-based mutual help groups for abstaining from any substance or activity addiction. SMART stands for Self Management and Recovery Training. The SMART Recovery 4-Point Program® helps people recover from all types of addictive behaviors, including alcohol, drugs, substance abuse, gambling addiction, and addiction to other substances and activities. It currently sponsors more than 650 face-to-face meetings around the world and more than 16 online meetings per week, including a weekly online meeting for family and friends.
866-951-5357
440-951-5357
http://www.smartrecovery.org

Sobriety Television
This is a YouTube channel with videos about addiction and recovery, as well as stories of recovery, the 12 steps, addiction topics, independent films, and more.
http://youtube.com/sobrietytelevision

State Associations of Addiction Services (SAAS)
This is the national organization of State provider associations representing treatment and prevention programs for substance use disorders.
202-546-4600
http://www.saasnet.org

Steppin' Out Radio
The goal of this one-of-a-kind radio show is to produce powerful radio broadcasts and provide an outlet for participants in 12-step meetings to share their stories.
845-359-3299
http://www.steppinoutradio.com

Stepping Stone of San Diego
This group provides treatment and recovery services focusing on the lesbian, gay, bisexual, and transgender communities.
619-278-0777
http://www.steppingstonesd.org

Substance Abuse and Addiction Recovery Alliance (SAARA)
This is a community-based grassroots membership organization of individuals in recovery from substance use disorders, their families, friends, and committed community supporters.
804-762-4445
http://www.saara.org

Resources

Suicide Prevention Resource Center
Education Development Center, Inc. (SPRC)
SPRC provides prevention support, training, and resources to assist organizations and individuals to develop suicide prevention programs, interventions, and policies, and to advance the National Strategy for Suicide Prevention.
800-273-8255 (National Suicide Prevention Lifeline)
877-438-7772
617-964-5448
http://www.sprc.org

Support for Addictions Prevention and Treatment in Africa Foundation (SAPTAF)
This is a nonprofit organization focused on support for prevention and treatment in Africa from alcohol and other drug problems, serving as a resource to improve the well-being of individuals, families, and communities.
609-466-8101
http://www.sapta.or.ke/home

The T.A. Libby Group
This group provides addiction science education and recovery advocacy through published work, continuing education workshops, conference presentations, and visibility events.
443-822-6791
http://www.talibby.com

Talk Therapy Television, Inc.
Talk Therapy Television, Inc. or Talk Therapy TV is a private, nonprofit organization that produces and broadcasts weekly television programming dedicated to promoting behavioral health awareness, treatment, and recovery. Talk Therapy TV promotes creative and innovative ideas that generate public dialogue and discussion, and reduce the stigma associated with these disorders.
631-780-2807
http://www.talktherapytv.org

TASC, Inc. of Illinois
This is a statewide, nonprofit organization that links courts and prisons to community-based alcohol/drug treatment and recovery support.
312-787-0208
http://www.tasc.org

Teen Challenge International
This network of 240 centers throughout the United States (and in 82 nations) provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems. The Teen Challenge Training Centers are 8- to 14-month comprehensive residential recovery programs that deal with drug and alcohol addictions, offered at minimal cost to participants.
417-581-2181
http://www.teenchallengeusa.com

Texas Department of State Health Services Community Mental Health and Substance Abuse Services
This department works to improve health and well-being of people living in Texas. The department built an extensive research and reference collection in the area of substance abuse prevention and treatment, which is available online.
512-458-7111
http://www.dshs.state.tx.us/default.shtm

Treatment Communities of America (TCA)
This national nonprofit membership association represents more than 650 substance use and mental health treatment programs that provide a variety of services to substance use and co-occurring disorder clients with a range of special needs.
202-296-3503
http://www.therapeuticcommunitiesofamerica.org

Turning Point
This organization has served the Minnesota community since 1976, providing African Americans with a holistic approach to counseling and treatment.
612-520-4004
http://www.ourturningpoint.org

Resources

U.S. AGENCY FOR INTERNATIONAL DEVELOPMENT (USAID)

This independent Federal Government agency receives overall foreign policy guidance from the Secretary of State. The agency supports long-term and equitable economic growth and advances U.S. foreign policy objectives by supporting economic growth, agriculture and trade; global health; and democracy, conflict prevention, and humanitarian assistance.

202-712-4810

http://www.usaid.gov

U.S. DEPARTMENT OF DEFENSE (DOD)

This department provides a wide array of services to prevent substance use disorders, including worksite education, drug testing, early intervention, outpatient counseling, and inpatient treatment.

703-571-3343

http://www.defenselink.mil

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES (HHS)

This Federal Government agency protects the health of all Americans and provides essential human services, especially for those who are least able to help themselves.

877-696-6775

http://www.hhs.gov

HHS, Food and Drug Administration (FDA)

This government agency is responsible for protecting the public health by assuring the safety, effectiveness, and security of human and veterinary drugs, vaccines, and other biological products; medical devices; our Nation's food supply; cosmetics; dietary supplements; and products that give off radiation.

800-216-7331

301-575-0156

http://www.fda.gov

HHS, Health Resources and Services Administration (HRSA) Poison Control Program

This program oversees the national toll-free Poison Help Line, 1-800-222-1222, which connects callers to their nearest poison center, 24 hours a day, 7 days a week for help in a poisoning emergency. Calls are free and confidential and can be translated into 161 languages.

800-222-1222

http://www.poisonhelp.hrsa.gov

HHS, National Institutes of Health (NIH) National Institute on Alcohol Abuse and Alcoholism (NIAAA)

This Federal institute provides leadership in the national effort to reduce alcohol-related problems by conducting and supporting research in a wide range of scientific areas.

301-443-3860

http://www.niaaa.nih.gov

HHS, National Institutes of Health (NIH) National Institute on Drug Abuse (NIDA)

This Federal institute supports most of the world's research on the health aspects of drug use and addiction. It carries out a large variety of programs to ensure the rapid dissemination of research information and its implementation in policy and practice.

301-443-1124

http://www.drugabuse.gov

HHS, Substance Abuse and Mental Health Services Administration (SAMHSA)

This Federal agency improves the quality and availability of prevention, treatment, and rehabilitative services to reduce illness, death, disability, and cost to society resulting from substance use and mental problems.

800-662-HELP (4357) (SAMHSA's National Helpline)

877-SAMHSA-7 (726-4727) (Information and materials)

240-276-2130

http://www.samhsa.gov

Resources

HHS, SAMHSA
Center for Mental Health Services (CMHS)
This Federal center seeks to improve the availability and accessibility of high-quality community-based services for people with or at risk for mental illnesses and their families. It collects, analyzes, and disseminates national data on mental health services designed to help inform future services policy and program decision-making.
800-789-2647
240-276-1310
http://samhsa.gov/about/cmhs.aspx

HHS, SAMHSA
Center for Substance Abuse Prevention (CSAP)
The mission of this center is to bring effective substance use prevention to every community nationwide. Its discretionary grant programs – whether focusing on preschool-age children and high-risk youth or on community-dwelling older Americans – target States, communities, organizations, and families to promote resiliency, promote protective factors, and reduce risk factors for substance use.
240-276-2420
http://www.samhsa.gov/about/csap.aspx

HHS, SAMHSA
Center for Substance Abuse Treatment (CSAT)
*As the sponsor of **Recovery Month**, this center promotes the availability and quality of community-based substance use treatment services for individuals and families who need them. It supports policies and programs to broaden the range of evidence-based effective treatment services for people who abuse alcohol and drugs and that also address other addiction-related health and human services problems.*
240-276-1660
http://www.samhsa.gov/about/csat.aspx

U.S. DEPARTMENT OF JUSTICE (DOJ)
Drug Enforcement Administration (DEA)
This Federal government agency enforces the Nation's controlled substances laws and regulations, works to reduce the availability of illegal drugs, and has a prevention arm devoted to reducing the demand for these drugs. The DEA contributes its "street-smart" perspective and skills to the field and helps to link law enforcement with other providers.
202-307-1000
http://www.dea.gov

DOJ, DEA
Get Smart About Drugs
This DEA program is a resource for parents about how and why teens abuse prescription drugs.
202-307-1000
http://www.getsmartaboutdrugs.com

DOJ, Community Capacity Development Office
This multi-agency's strategy is to "weed out" violent crime, gang activity, and drug trafficking, and "seed" human services to the areas where these activities occur, encompassing prevention, intervention, treatment, and neighborhood revitalization.
202-616-1152
http://www.ojp.usdoj.gov/ccdo

U.S. DEPARTMENT OF TRANSPORTATION (DOT)
National Highway Traffic Safety Administration (NHTSA)
The mission of this agency is to develop partnerships to cooperatively save lives, prevent injuries, and reduce traffic-related health care and economic costs resulting from impaired driving from using alcohol and other drugs.
888-327-4236
http://www.nhtsa.gov

Resources

U.S. SMALL BUSINESS ADMINISTRATION (SBA)
Grantees of the Paul D. Coverdell Drug Free Workplace Program assist small businesses with the implementation of a drug-free workplace program by providing financial, technical, and management assistance, including information about grants/loans and employee assistance programs.
800-827-5722
http://www.sba.gov

US Psychiatric Rehabilitation Association (USPRA)
The USPRA and its members developed and defined the practice of psychosocial/psychiatric rehabilitation, establishing these services as integral to community-based treatment and leading the recovery movement. With nearly 1,400 members, this association seeks to advance the availability and practice of psychiatric rehabilitation so that all individuals with a serious mental illness have access to the supports they need to recover.
410-789-7054
http://www.uspra.org

United for Recovery
This nonprofit organization is an advocacy group for people in treatment and in recovery. It works to broaden public awareness and understanding of addiction and recovery and increase opportunities for people to get the help they need.
402-434-2730
http://www.unitedforrecovery.org

United Methodist Church – General Board of Church and Society of the United Methodist Church
This agency of the United Methodist Church offers faith-based substance use prevention advocacy training for local churches, as well as faith-based programs for churches to de-stigmatize addiction and provide church-wide training on substance use disorders.
202-488-5600
http://www.umc-gbcs.org

University of Baltimore, School of Law
Center for Families, Children and the Courts
This group's mission is to create, foster, and support a national movement to integrate communities, families, and the justice system to improve the lives of families and the health of the community.
410-837-5750
http://law.ubalt.edu/cfcc

Volunteers of America
This is a national, nonprofit, faith-based organization dedicated to helping those in need rebuild their lives and reach their full potential. Through thousands of human service programs, including housing and health care, the group helps nearly 2 million people in over 400 communities.
800-899-0089
703-341-5000
http://www.voa.org

White Bison, Inc.
This nonprofit organization disseminates culturally based principles, values, and teachings to support healthy community development and servant leadership, and to support healing from alcohol, substance abuse, co-occurring disorders, and intergenerational trauma. It offers learning resources to the Native American community nationwide on topics such as sobriety, recovery, prevention, and wellness/wellbriety.
877-871-1495
719-548-1000
http://www.whitebison.org

JOIN THE VOICES FOR RECOVERY It's Worth It

NATIONAL RECOVERY MONTH CUSTOMER SATISFACTION FORM

The Substance Abuse and Mental Health Services Administration (SAMHSA) wants to know about your ***National Recovery Month (Recovery Month)*** efforts this September and year round. Use the below form to let us know how useful the ***Recovery Month*** toolkit materials were in planning your events. This information will be used in the development of future materials distributed by SAMHSA, within the U.S. Department of Health and Human Services (HHS).

While your response is voluntary, it's essential to improve future ***Recovery Month*** materials to meet your needs. Please complete this form and return it by mail or fax to the address below by October 26, 2012. SAMHSA encourages you to include photographs and/or samples of supporting materials from your ***Recovery Month*** activities. This customer satisfaction form can also be found online at ***http://www.recoverymonth.gov***.

This customer satisfaction form can also be found online at ***http://www.recoverymonth.gov***.	
Name:	Title:
Organization name & mailing address:	Phone & fax numbers:
Organization website address:	Email address:
Please provide a brief description of your event or major activities. (Please attach additional sheets, if necessary.)	
Did you receive media coverage? If yes, who covered your event? (Please attach a brief summary or copies of articles.)	

Resources

Resources

Please tell us which materials listed below you used and provide suggestions for improving them.			
	Used It? (Y/N)	**How Useful Was It?**	**Comments/Suggestions**
Mental and Substance Use Disorders: Fast Facts			
Develop Your Social Network			
Build Community Coalitions			
Planning Partners			
Single-State Agency Directory: Prevention and Treatment of Mental and/or Substance Use Disorders			
Prevention, Treatment, and Recovery Resources			
Targeted Outreach Booklet			
Common Mental Health Problems and Misused Substances Booklet			
Join the Voices for Recovery Mini-Book			
Promote ***Recovery Month*** With Events			
Work with the Media			
Press Materials for Your ***Recovery Month*** Event			
Share Your Voice Through Op-eds and Online Articles			
Issue ***Recovery Month*** Proclamations			
Recovery Month Public Service Announcements			
Banners, Letterhead, and Logos			
Targeted Outreach: Overview: It's Worth It			
Targeted Outreach: Military Families			
Targeted Outreach: Justice System			
Targeted Outreach: Families and Friends			
Targeted Outreach: Recovery Community			
Targeted Outreach: Treatment and Recovery			
Targeted Outreach: Common Mental Health Problems and Misused Substances			
New Media Glossary			
Please send your response to:	**SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES ADMINISTRATION** **ATTN: Consumer Affairs/*Recovery Month*** **Center for Substance Abuse Treatment** **1 Choke Cherry Road** **Rockville, MD 20857** **Fax: 240-276-2710**		
Thank you for sharing your ***Recovery Month*** story with us.			

Public reporting for this collection of information is estimated to average 10 minutes per response. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to: SAMHSA Reports Clearance Officer, Paperwork Reduction Project (0930-0197), 1 Choke Cherry Road, Rockville, MD 20857. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this project is 0930-0197 and the expiration date is 3/31/2014.

JOIN THE VOICES FOR RECOVERY It's Worth It

PROMOTE *RECOVERY MONTH* WITH EVENTS

Organizing an event for ***National Recovery Month (Recovery Month)*** is a great way to celebrate people in recovery, their families, and others throughout the community who make living in recovery possible. Events help unite those already in recovery and can broadly spread the message that prevention works, treatment is effective, and people recover. Last year, 1,229 ***Recovery Month*** events, ranging from town-hall meetings and festivals to prayer weekends, were attended by approximately 2,117,082 people nationwide.

Each September, the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), sponsors ***Recovery Month***. This nationwide celebration is now in its 23rd year. This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

This document will guide you through the event-planning process, providing successful tips and instructions for how to publicize your event to maximize attendance.

Define Goals...

Before you begin planning, consider the big picture and identify the ultimate goal of your event. It's important to think about the purpose of your event and the results you hope to achieve, which will help dictate the choices you make while planning an event. Some possible goals are to:

- Foster education and awareness about mental and/or substance use disorders and recovery;
- Inspire others to spread the messages of ***Recovery Month***; and
- Garner coverage in the media.

Identify Potential Events...

Part of the planning process includes considering what type of event will be most successful in your community. All events, regardless of size, are instrumental to spreading awareness about ***Recovery Month***. To decide what type of event to plan, keep in mind the goals you established in the planning process, your target audience, and your intended message. Remember that it's important to distinguish your event from others in the community to draw attention to your efforts. Below are some examples of event types that may spark your own ideas.

A **proclamation signing** gathers people together to generate enthusiasm and awareness for a common cause. When a local official declares September as ***Recovery Month***, individuals understand that prevention and treatment of mental and/or substance use disorders are notable issues in the community. One way

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to draw a large crowd is to host the proclamation signing in conjunction with a larger activity, such as a **walk or run**, or a **celebratory rally** around the community. This type of activity can draw large crowds of all ages and walks of life, fostering a celebratory community atmosphere.

Often, family and friends play a key role in helping people recover from their mental health problems and/or substance use disorders. For this reason, a family **cookout**, **picnic**, or **dinner party** is a great way to bring loved ones together to support ***Recovery Month*** and encourage recovery. For some individuals, such as military personnel recently back from a tour of duty, a casual, low-key event may be the best way to encourage treatment, celebrate their recovery, and support their reintegration into society. Whatever event you choose, keep in mind that no event is too small to celebrate the accomplishments of those in recovery.

Forums, **community roundtables**, or **discussion groups** are all cost-effective, informal ways to bring together members of the community. These types of gatherings are ideal for people who wish to share their personal stories and discuss mental and/or substance use disorders and recovery. Speakers at these events can include active military personnel, veterans and their families, individuals in the justice system, anyone in the recovery community, or family and friends who may have supported loved ones through their recovery journeys. No matter who the speakers are, it's important that they are prepared to engage in a two-way conversation about local issues around prevention, treatment, and recovery. These educational events can take place in a variety of settings – for example, a public park, provider's office or treatment center, community center, or a place of worship.

Lastly, you can capitalize on the online discussion surrounding recovery by using the Internet to promote ***Recovery Month***. **Webinars**, **Twitter chats**, or **other online discussion groups** give people the added convenience to participate in ***Recovery Month*** events from home. These types of events are an opportune time to discuss the role of online services in recovery, such as e-therapy and support chat rooms. You may want to invite experts in the field to converse with event attendees.

Always keep in mind, it is important to have information about how to get help for mental and/or substance use disorders readily available to attendees at your event.

Plan...

When planning your ***Recovery Month*** event, consider the following checklist.

- **Engage with potential partners:** To help offset the costs of hosting an event, consider partnerships with local organizations such as television networks, grocery stores, or small businesses in the community. Many times, area businesses or associations will sponsor events in exchange for publicity at the event. Explore potential partnerships and identify organizations that have conducted similar efforts or share the focus of ***Recovery Month***, such as a local treatment center. Partners can offer different kinds of assistance, including monetary support and expertise in program development or policy issues. Additionally, partnering with another organization can significantly help widen the reach of your initiatives. Reach out to local treatment centers to see if you can find volunteers from the recovery community who are willing to help with your event. It is also helpful to connect with ***Recovery Month*** Planning Partners in your State to collaborate – this will eliminate any overlap of events that may be scheduled for the same day. The Planning

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Partners are considered experts in the mental health, substance use disorder, and recovery fields, and are instrumental in spreading the message that prevention works, treatment is effective, and recovery is possible. Keep in mind that when you include partners from both the mental health and substance use fields, you spread your reach to a larger recovery community!

- **Form a planning committee:** Having the support of a working group will help ease the group's workload and be useful for brainstorming event ideas. Once you have selected a committee, create a meeting schedule and select a chair to be the primary point of contact and organizer. Throughout the planning process, it's vital for the event planning committee to meet regularly to track progress and ensure that all necessary actions are completed. You can also take this opportunity to include partners or sponsors in meetings so they can share ideas and feedback. Encourage people to commit to a certain role within the committee, such as publicity, finance, or fundraising. Within your first couple of meetings, create a timeline of deliverables and deadlines to keep the group organized.

- **Determine a budget:** Develop and adhere to a budget – this is a crucial component of the event-planning process. Develop your budget in the early stages of planning an event, as the scope of your event hinges on this information. Think realistically about your budget and goals, and leave some funds for unanticipated costs. Items to factor into your budget include fundraising costs, food and entertainment, venue and equipment rentals, permits and licenses, signage, invitations, decorations, guest-speaker fees, and publicity costs.

- **Plan logistics:** Select the event date, time, and venue as soon as possible after your budget is approved. When you select a date and time, consider other events that are occurring in your area to minimize conflicts. To do so, review a local events calendar in the newspaper (check print and online editions). You can also log onto ***http://recoverymonth.gov*** or *http://charityhappenings.org* to see other events in your area. Location choice is a significant factor when planning. Remember to choose a venue that's accessible, accommodates your audience, and is centrally located. Ask if permits or licenses are required for the venue(s) you consider. If you choose to hold your event in a public location, contact local authorities to confirm the steps you need to take to meet local requirements.

- **Confirm all location details with your venue:** This will make other stages in the planning process much easier. For example, any type of promotional materials will be more effective if specific event information is included (e.g., specific room, directions, parking). Once you have confirmed your event details, post the event on the ***Recovery Month*** website.

- **Develop a publicity plan and encourage media attendance:** You'll need people to know about your event in advance, so it's important to publicize within the community. There are a number of ways to promote your event: advertise on local radio stations or in newspapers, conduct Internet/social media outreach, host pre-event fundraisers, post flyers, and sponsor sporting events or community meetings in the weeks leading up to your event. Invite the media to attend your event to expand your audience. Please refer to the "Work with the Media" document in this toolkit for further information on how to interact with the media.

- **Stimulate community interest:** Increase awareness about your event through word-of-mouth marketing. Ask friends, family, and co-workers to spread the word within their personal networks, both online and offline. For example, you and your friends can tell Facebook friends about the event, as well as colleagues at work or friends at school. Encourage attendees to bring their extended family to the event, as family is often an important component to

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one's recovery. Additionally, reach out to high-risk populations such as military families, and ask for their support and participation. If they would be comfortable doing so, ask these individuals to share their personal journey with others. These stories are powerful and will spark interest in your event.

- **Prepare materials:** Prepare materials you want to distribute at your event, such as flyers, brochures, fact sheets, and a list of local treatment centers and support groups. Distribute a questionnaire to seek feedback from event attendees. This will help your organization or planning committee know how to improve future events. Target materials to your audience and highlight relevant local issues, such as the prevalence of and treatment for mental and/or substance use disorders in your State last year. Reflect this year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** in your materials. For instance, include information on the ways people in recovery enjoy healthier lives, both physically and emotionally. Include the ***Recovery Month*** logo to brand your materials and show that your event supports a larger cause – a national observance supported by the Federal government.
- **Remember last-minute details:** Hold a final planning meeting to review final details in the days leading up to your event. Call vendors and speakers to confirm reservations. If possible, set up any booths or multimedia equipment the day before, and plan to arrive early the day of your event in case of any unexpected issues.
- **Be prepared:** Have a back-up plan in the event of an unexpected setback. Especially if your event is outdoors, it's important to reserve an indoor space or publicize a rain date.

Evaluate...

After your event, immediately review your results when details are still fresh in your mind. Create a questionnaire to receive more concrete feedback from your event attendees. Additionally, connect with event volunteers to hear their feedback on the event, including areas of improvement for the future.

You can also take this opportunity to thank event volunteers and the community for participating in your event by posting a "thank-you" letter on your website, if applicable, or as an ad in your local newspaper. Be sure to send any event promotional materials to ***recoverymonth@samhsa.hhs.gov***, and start to brainstorm for next year's ***Recovery Month*** event!

Share...

SAMHSA needs to hear about all of the successful events held in honor of ***Recovery Month*** this year. Once your event has taken place, visit ***http://www.recoverymonth.gov*** to post details, photos, or collaborative materials you have on hand. You can also share your success with the recovery community on the ***Recovery Month*** Facebook page, YouTube channel, and Twitter account. If you're unfamiliar with these online tools, visit the "New Media Glossary" and "Develop Your Social Network" sections in this toolkit for details.

SAMHSA is pleased to acknowledge the efforts of those who planned and organized events through the ***Recovery Month*** Event Award. The four award categories include: Rally and Walk/Run Events, Educational Events, Special Celebrations, and SAMHSA-Sponsored Events. For information on how to enter an event and for an application form, visit ***http://www.recoverymonth.gov/Community-Events/Community-Event-Award.aspx.***

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Consult Resources...

For more information on ***Recovery Month*** and services available to those in need, please refer to the following resources:

- **SAMHSA's National Helpline**, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD**), provides 24-hour, free and confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals in English or Spanish.
- **National Suicide Prevention Lifeline**, **1-800-273-TALK (8255**), provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" website**, *http://www.samhsa.gov/treatment*, contains information about treatment options and special services located in your area.
- The ***Recovery Month*** website, ***http://www.recoverymonth.gov***, contains all the materials from this toolkit and a wide variety of relevant resources.

Inclusion of websites and event examples in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

JOIN THE VOICES FOR RECOVERY It's Worth It

WORK WITH THE MEDIA

Conducting media outreach and securing media placements are valuable ways to spread awareness about ***National Recovery Month (Recovery Month)*** and build interest in your event. Any form of media coverage for your event will highlight your efforts within the community and draw attention to the participants, volunteers, and sponsors of your event. Through media support, the local community is exposed to the ***Recovery Month*** message that prevention works, treatment is effective, and people recover.

Every year, ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), part of the U.S. Department of Health and Human Services (HHS). This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. It also emphasizes that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

Use this document to understand the basics of media outreach, including speaking with the media and creating long-term relationships. Throughout this document, "the media" refers to the means of communication that reach people widely, including broadcast, print, and non-traditional means such as blogs and social media platforms including Facebook and Twitter.

Draw Attention...

Members of the media receive a multitude of requests to attend and cover events, so it is important to distinguish your ***Recovery Month*** event from other unrelated events taking place in your community. The key to drawing media attention is to stress why your event is relevant to the community. The following items can help you entice the media to cover your event:

- **A relevant news hook:** Reporters like to cover topics that are likely to spark interest or debate, and that connect to issues that are already being discussed in the community. Personal stories are extremely powerful, so try highlighting a local person's story of recovery to showcase how recovery is happening right here, right now.
- **A strong, measurable impact:** Make a case for the physical, mental, economical, and societal benefits of recovery on individuals and your community. Emphasize that mental and/or substance use disorders affect millions of people nationwide and that in your community in particular, there is a serious need for treatment and recovery services.
- **Your local angle:** Emphasize the direct connection of your event to the local community. Note specific community residents and organizations, including businesses that will be participating in your event, to showcase the local reach.
- **The right time:** When contacting reporters, take into account how frequently their publications are distributed. Many reporters may request an advance lead time to write about your event before their publications go to print. Other reporters, such as those for broadcast outlets, may only cover "breaking news" live at the event site.

Media Outreach

Media Outreach

Research...

After you establish the key aspects of your event that you want to highlight to the media, you can identify the appropriate people to contact.

Research the outlets that will be most interested in your event. For example, if you partner with a youth-based organization for your event, you may want to contact the community or school news reporter at your local newspaper. In addition to traditional print and broadcast outlets, publicize your event in community calendars, daybooks, and "week-ahead" columns. For these outlets, it is important to look for online versions as well as print editions. Additionally, while a large national media outlet may not be likely to cover a local community event, local newspapers, magazines, broadcast stations, and community blogs may be interested in receiving news about your local event.

It is worthwhile to look beyond traditional media to online sources for other types of event coverage (e.g., on blogs and social media sites). Identify key online contacts by conducting a Google Blog Search. It's important to identify each blogger's general attitudes, preferred topics of conversation, and particular areas of interest to engage them.

You can also engage the media by establishing a presence on social media sites such as:

- Facebook
- Twitter
- YouTube

Once you have identified the media and online outlets you would like to target, the next step is to identify the most relevant person to contact at each outlet. Research the reporters or bloggers who have covered similar events before or who have discussed topics such as mental health, substance use, community health, or local events. To find out who has covered these issues in your community, set up Google Alerts online. This free Web-based tool notifies you when news on certain topics is covered in your area.

Use this information to help you to compile a list of journalists and bloggers to cover your event. In some cases, the phone numbers of respective outlets are located on their websites. For traditional outlets, such as a newspaper or magazine, you can simply call to inquire who the most appropriate contact to cover a ***Recovery Month*** event would be. If you have access to paid services, such as Cision or BurrellesLuce, these databases offer a list of reporters and their contact information.

Organize...

As you research and develop your media list, keep your contacts' information organized to make the outreach process easier. Media lists are best created in a spreadsheet program, such as Microsoft Excel. Once you have identified a potential contact, include the following in your spreadsheet:

- Contact name;
- Contact's outlet and title;

Media Outreach

- Email;
- Phone number; and
- Pertinent notes (e.g., preferred time and method of contact, previous articles on recovery topics, and remarks from your interactions with this person).

Connect...

Reach out to your media contacts via phone or email, depending on each contact's individual preferences. Keep your message clear and concise when contacting reporters, or "pitching" your event. Please refer to the end of this document for sample pitch emails and phone scripts to tailor for your use.

Blogger engagement is a longer process, as most bloggers respond better to people who they have engaged with previously. It may be beneficial to first send a personal email to each blogger to introduce yourself. In this email, don't address any business news, instead use it as an opportunity to identify your organization, state that you read their blog, and share the blogger's interest in the topic of discussion. Do this well before you plan to contact the blogger about your ***Recovery Month*** event. Connect with bloggers in the early stages of event planning, and once a relationship is established, keep them updated with event details.

Likewise, to begin your media outreach to reporters, introduce yourself to the media contacts. If you contact the media by phone, first ask the person you are calling if he or she has a moment to chat before discussing your event. Don't be taken aback if journalists seem rushed, as they are commonly on deadline. Instead, offer to call back at a different time or be directed to someone who would be interested in talking about your event.

Keep in mind that reporters, editors, producers, and bloggers can often only devote a few minutes to learning about your event or story. Following are a few key points to highlight to keep your pitch brief:

- Date and time of your event
- Location
- Affiliated organizations and noteworthy speakers or attendees
- Significant statistics or local impact of recovery
- Your contact information
- Resource for more information (e.g., ***http://www.recoverymonth.gov*** and your event website)

After briefly sharing your event information, thank each media contact for his or her time, and share your contact information so the person can follow up with you later about the event. Also, offer to send event materials (such as a promotional flyer) for further details.

If you speak to media contacts who are eager to hear more about your event, follow up after a few days to answer any outstanding questions. Confirm whether they will cover your event with a brief email or a quick call. Again, brevity and clarity is imperative when engaging the media.

Media Outreach

Interview...

If you are presented with the opportunity to be interviewed by a member of the media, it's helpful to adequately prepare for the discussion.

- **Research the interested media contact and his or her outlet:** Reporters and bloggers expect that you will have some knowledge about the beats they cover and the types of stories included in their outlet. This will also help you understand the outlet's target audience and anticipate questions that you may be asked. Much of this information may be uncovered when you develop your media lists before you begin your outreach, but it's also helpful to do a quick scan to review any recent stories that have appeared.
- **Have a strong understanding of your event and materials:** You will need to be able to speak in detail about your event. Prior to your interview, review and become familiar with any supplementary materials that are being passed out at your event, in case you are asked to explain them in further detail.
- **Practice with friends or colleagues:** Prepare your talking points and rehearse what you intend to say with a friend or member of your event committee. To most effectively convey your points, speak in short sentences that can be easily understood.

The day before your interview, confirm the date, time, place, and anticipated length of the interview. Whether you will be speaking with the media on the phone or in person, always be professional and polite. Keep in mind that the goal of your interview is to communicate ***Recovery Month*** key messages, the details about your event, and the importance of treatment and recovery in your local area. The following techniques may also be useful in an interview:

- **Bridging:** If you are asked a question that steers you away from your key messages or anticipated topics, you can "bridge" your response to a connecting subject. Instead of answering directly, find a component of the question that you can tie back to your main points. One example of bridging is to say, "That's a great perspective, and it relates to the larger issue of recovery…," and then you can get back on track with your key points.
- **Bundling:** To get the point across quickly, state your key point and then explain your justification. For example, you can say "SAMHSA has a series of initiatives that improve prevention, treatment, and recovery support services. ***Recovery Month*** supports these initiatives by…"
- **Blocking:** If a reporter asks you a question that you don't feel comfortable answering, try to avoid saying "no comment," as it may appear that you are hiding something. Instead, offer to put the reporter into contact with someone who can accurately answer the question. To transition the conversation, link to another topic that you do feel comfortable discussing.

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For a successful in-person interview, keep in mind the following tips:

- **Eye contact:** Maintain a connection with the person interviewing you. If you are on camera, stay focused on the reporter, rather than the cameraperson. Try to avoid being distracted by any activity that surrounds you.
- **Posture:** Sit up straight, avoid fidgeting, and find a natural place to rest your hands. Use gestures sparingly so as not to distract the interviewer, and remember to act confident – you know your stuff!
- **Voice:** Show enthusiasm for the topic by inflecting your voice to emphasize key points. Try to avoid using verbal fillers, such as "um," "like," and "you know."
- **Dress:** Remember to dress neatly and professionally. Unless your event is a walk/run or similar outdoor activity, dressing up is always an appropriate style.

If you are asked to conduct a phone interview, keep in mind the following checklist when preparing for and conducting the interview:

- **Organize:** Just as you would prepare for an in-person interview, do the same for a phone interview. It's okay to have notes as an aid since no one can see you, but still rehearse beforehand so you aren't reading directly from a script.
- **Plan your location:** Call from a quiet place where you will not be distracted by background noise. Try to call from a landline for a more stable connection – then turn off your cell phone.
- **Stay upbeat:** Although you are not face-to-face with the reporter, keep a smile on your face to help you convey a friendly tone in your voice.
- **Inquire to clarify:** Ask the interviewer questions to confirm that you understand the questions and he or she understands your messages. This is very important in the absence of visual cues.

Practice Your Messages...

When speaking with the media, it may be helpful to use the following talking points about ***Recovery Month*** and tailor them to your event.

- **For a Specific Event:** On **[date]** at **[time]**, **[Organization]** is hosting **[Event or activity]** at **[Location]** to celebrate recovery and encourage individuals with a mental and/or substance use disorder to embark on a path of recovery and live happier, healthier lives. Mental and/or substance use disorders can affect anyone, including people in **[City]**, where **[number]** people are affected. Our community must remain dedicated to the recovery process by advocating for resources that help people address these treatable conditions and support individuals in recovery, as well as their affected family members.
- **To Promote *Recovery Month*:** **[Organization]**'s activities are part of the ***National Recovery Month (Recovery Month)*** initiative that has been celebrated for 23 years. Sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services, this month-long observance celebrates individuals in recovery and families who have supported these individuals, as well as those who

work in the prevention, treatment, and recovery field. It emphasizes that the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable for all individuals, as well as their family, friends, and greater community. This year, **[Organization]** will be observing ***Recovery Month*** by **[include the name and brief description of your Recovery Month activities]**.

- **To Provide Information and Resources:** Visit the ***Recovery Month*** website at ***http://www.recoverymonth.gov*** and **[insert your organization's website]** for detailed information on prevention, treatment, and recovery. For specific information on local treatment options, visit SAMHSA's "Find Substance Abuse and Mental Health Treatment" website, *http://www.samhsa.gov/treatment*, or call SAMHSA's 24-hour National Helpline, **1-800-662-HELP (4357)**, or **1-800-487-4889 (TDD)**, for free and confidential information in English and Spanish.

Consult Resources...

For more information on ***Recovery Month*** and services available to those in need, please refer to the following resources:

- **SAMHSA's National Helpline**, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD**), provides 24-hour, free and confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals in English or Spanish.
- **National Suicide Prevention Lifeline**, **1-800-273-TALK (8255**), provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" website**, *http://www.samhsa.gov/treatment*, contains information about treatment options and special services located in your area.
- The ***Recovery Month*** website, ***http://www.recoverymonth.gov***, contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA ADS Center's "Working with the Media to Support the Campaign for Mental Health Recovery" Webcast**, *http://www.stopstigma.samhsa.gov/teleconferences/archive/training/teleconference062408.aspx*, provides helpful tips for contacting the media and useful strategies for organizing outreach efforts.

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SAMPLE PITCH EMAIL

Hello **[name]**,

After reading your recent article on **[topic]**, I thought you may be interested in an upcoming event celebrating people in recovery from mental and/or substance use disorders. As you may know, this is a significant problem in our area, but recovery is possible. **[Name of host organization and any noteworthy attendees]** will be hosting **[type of event]** on **[event date]** in the **[City/town name]** area as part of ***National Recovery Month***, a large national movement in celebration of recovery. Locally, **[insert local statistics on the prevalence of mental and/or substance use disorders]**.

Recovery Month is sponsored each September by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

Below is a media advisory that provides details on this event. Please feel free to contact me if you need further information, or would like to schedule an interview with **[name and title of person being offered for interviews]**. I will follow up prior to the **[event]** to see if you or someone from your organization will attend the event.

Thank you for your time and consideration.

Best regards,

[Your name and contact information]

SAMPLE PITCH CALL SCRIPT

Hi **[name]**,

My name is **[your name]** and I am calling on behalf of **[name of organization]**. I would like to tell you about an event related to mental and/or substance use disorders in our community. Do you still cover **[reporter's beat – health care, community events, etc.]** and have a moment to chat?

As you may know, mental and/or substance use disorders are all too common, and not everyone receives the help and support they need. **[Insert local prevalence statistics to support the local community impact]**. I'm calling because despite the prevalence of these conditions, especially in our local community, recovery from mental and/or substance use disorders is possible.

We are hosting an event on **[date]** in **[city]** as part of ***National Recovery Month***, which is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). Our goal for this event is to increase awareness of mental and/or substance use disorders and emphasize that while the road to recovery may be difficult, the benefits of preventing and overcoming these conditions are significant and valuable to everyone in our community.

If you are interested in learning more about the event, please contact **[spokesperson name]** at **[spokesperson's contact information]**. I also have additional information I can send you. Is your email address **[email address]**?

I'll send you the information shortly, and please let me know if you have any additional questions. My contact information will be included in the email. I will follow up prior to the **[event]** to see if you or someone from your organization will attend the event.

Thank you for your time, and I hope to speak with you again soon.

JOIN THE VOICES FOR RECOVERY It's Worth It

SHARE YOUR VOICE THROUGH OP-EDS AND ONLINE ARTICLES

Writing and placing an op-ed or bylined piece in an online media outlet can be critical to help raise awareness for ***National Recovery Month (Recovery Month)***. An op-ed, short for "opposite the editorial pages" of a newspaper, is a way for you to express your opinion and perspective on a certain subject or initiative. With the popularity of the Internet, articles in online-only media outlets will also allow you to state your opinion for a larger readership. Writing about ***Recovery Month*** can help raise awareness for mental and/or substance use disorders in your community, town, city, or State.

Use this document to find helpful tips on how to write an op-ed or online article and how to submit it for publication.

Get Started...

This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also highlights that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their community. They also prove to others that prevention works, treatment is effective, and people recover.

Think about this theme when you brainstorm ideas for your op-ed or online article. To help you gain more attention, note that the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), sponsors the ***Recovery Month*** observance annually. Learn more about SAMHSA's support of recovery from mental and/or substance use disorders through its *Strategic Initiatives*.

To have the best shot at placing your op-ed or opinion piece – either in print or online – during ***Recovery Month*** in September, start writing early. Refer to the checklist below to stay on track during the first stages of planning.

- **Determine a clear and concise message:** A strong op-ed or online article makes a single point or argument persuasively in the beginning of the piece. Think about what you want to say and how to explain your topic through simple messaging, so readers can stay focused and walk away with the point you want to convey.
- **Think current:** Make the subject of your op-ed or article timely and relevant to the general public. Give the article a local angle to increase your chances that the print or online outlet will publish your piece. This will also bring your message home with the local community.
- **Personalize it:** Include a personal story of a resident in your area or a current event in your city or State to help readers easily connect with your message. Before sharing someone's personal story, be sure to ask for permission first.

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- **Locate statistics and facts:** Supplement all statements or opinions with hard facts that validate your thoughts. For example, if you say that mental and/or substance use disorders are common and more prevalent than one might think, follow that with statistics on the prevalence of mental and/or substance disorders in your local city or State. Conduct research so you have your facts in hand when you begin to write; some resources are provided for you later in this document.
- **Identify the publication(s):** Assess which publication is the best fit for your message. If your article focuses on community issues, a local newspaper might be ideal. If you are focusing on a broader, national issue or have a well-known author, try a top-tier newspaper. Most publications won't publish op-eds that were already published in another outlet. For this reason, prioritize each outlet and decide what your first choices are, followed by your backup options. Read examples of past op-eds, so you get a sense of what formats and topics appear to capture the publication's interest.
- **Keep it brief:** Your op-ed or online article should be between 400 to 750 words. Check with the publication or website where you plan to submit your piece to determine specific limitations on word count or other requirements, such as deadlines and how they prefer to receive submissions.
- **Create a relationship:** The best way to have your thoughts published or posted is to develop a relationship with the editor in advance. Always plan out what you want to say before you contact the publication. Provide background information about yourself, your organization, and ***Recovery Month***, in addition to any local and State recovery issues.
- **Refer to the template:** At the end of this document, you can find a sample op-ed to tailor, which will help you get started in expressing your ideas.

To gain additional attention for your op-ed, reach out to well-known organizations in your community to offer to co-write an op-ed or online article with them. Having an established partner might catch the eye of an editor and increase the chances that your op-ed is published. Refer to the "Prevention, Treatment, and Recovery" document in this toolkit to see organizations that you could join forces with in your area.

Write...

Once you select a topic and compelling supporting statistics, flesh out your draft with information about ***Recovery Month*** and its mission, along with this year's theme. Avoid controversial statements or sounding like you are "preaching" your belief. Also, consider who your readers are when writing your op-ed or online article. Think about what would catch their attention and rouse their interest in ***Recovery Month***.

Refer to the resources listed below for facts to make your op-ed or online article more compelling. Also, you might want to see if your publication has any interest in publishing the infographics provided in the "Targeted Outreach" section of this toolkit.

- Single-State Agency (SSA) Directory
- SAMHSA's *National Survey on Drug Use and Health*
- SAMHSA's *National Survey on Drug Use and Health: Mental Health Findings*
- SAMHSA's Recovery Statement
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS)
- SAMHSA's Drug Abuse Warning Network
- SAMHSA's Treatment Episode Data Set
- SAMHSA's Store

Media Outreach

Refer to the below tips when writing your op-ed or online article:

- Don't be afraid to make it personal – include true stories to connect with readers;
- Include an eye-catching title that emphasizes your central message;
- Near the end of your op-ed or article, clearly restate your main points and issue a call to action;
- Avoid technical jargon and acronyms – most newspapers are written on a 5th grade level, so mimic that language; and
- Include your name, contact information, and a description of who you are and your qualifications.

Publish. . .

When submitting the op-ed or online article, include a brief introduction of yourself, along with your phone number, email address, and mailing address at the bottom. Also include a succinct cover letter to establish why you are qualified to write this piece and why it is timely, along with a brief explanation of why recovery from mental and/or substance use disorders is important to readers. When you are trying to place your piece in a publication or online, be sure to:

- **Place a follow-up call:** Follow up with the editor one week after you submitted the op-ed or article. If he or she has not had time to look at it yet, follow up again one week later. Remember to be polite and state that publishing your piece will help others who may not know where to turn.
- **Give it a time limit:** Since most publications will not notify you if your op-ed is rejected, set a deadline for your piece to be published. If you haven't heard back by that date, move on to the next outlet of your choice to gauge their interest in publishing the piece. Don't give up!

If your op-ed is rejected from the top publications on your list, consider alternatives to the traditional printed op-ed. Ask the publication's website editor if your op-ed can be posted on the online version of the newspaper. Online opinion pieces can be much easier to share with others through social media outlets such as Twitter and Facebook. Additionally, online outlets such as Slate, iVillage, The Daily Beast, and The Huffington Post are more and more popular, and many have a higher viewership than traditional print publications.

Many newspapers now have online bloggers who cover local philanthropic events. Some of these local bloggers may let you contribute a guest post to discuss mental and/or substance disorders or a ***Recovery Month*** event in your area. Use the sample op-ed at the end of this document as a guide for your guest post, but remember to write in a more casual, personal manner when blogging. If a blogger does not agree to have you contribute a guest post, offer information about ***Recovery Month*** and mental and/or substance use disorders, and encourage the blogger to write his or her own post on the topic or link to your event's website.

Keep in mind that ***Recovery Month*** celebrates individuals in long-term recovery, acknowledges those who provide recovery support services, and empowers those in need of help to seek treatment throughout the year. Even if your op-ed or online piece does not get published in September, keep trying throughout the rest of the year to help spread these crucial messages.

Media Outreach

Share...

SAMHSA is interested in your published op-ed and hearing about any successes you had in promoting ***Recovery Month***. Be sure to check news sites such as Google News or Yahoo News to see if your op-ed is published or whether other outlets have picked it up. Your online social network is also a great way to share your op-ed. Please:

- Post your published op-ed on the ***Recovery Month*** website, and your Facebook page, and Twitter account. If you need help on how to use these online tools, visit the "New Media Glossary" and "Develop Your Social Network" documents in this toolkit.
- Distribute your event details, materials, and pictures to the social media channels above.
- Send a copy of your published op-ed and placement information electronically to *recoverymonth@samhsa.hhs.gov* or by mail to:

  Substance Abuse and Mental Health Services Administration
  ATTN: Consumer Affairs/***Recovery Month***
  Center for Substance Abuse Treatment
  1 Choke Cherry Road
  Rockville, MD 20857

- Also, please fill out the "Customer Satisfaction Form" to share your outreach efforts and give feedback.

Consult Resources...

For more information on ***Recovery Month*** and services available to those in need, please refer to the following resources:

- **SAMHSA's National Helpline**, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD)**, provides 24-hour, free and confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals in English or Spanish.
- **National Suicide Prevention Lifeline**, **1-800-273-TALK (8255)**, provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" website**, *http://www.samhsa.gov/treatment*, contains information about treatment options and special services located in your area.
- The ***Recovery Month*** website, ***http://www.recoverymonth.gov***, contains all the materials from this toolkit and a wide variety of relevant resources.
- **SAMHSA ADS Center's "Working with the Media to Support the Campaign for Mental Health Recovery" Webcast**, *http://www.stopstigma.samhsa.gov/teleconferences/archive/training/teleconference062408.aspx*, provides helpful tips for contacting the media and useful strategies for organizing outreach efforts.

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SAMPLE OP-ED

Approximately 532 words

Op-ed Template

Recovery from Mental and/or Substance Use Disorders is Possible

All around us in **[Community]**, it is estimated that **XX** people are in recovery from mental and/or substance use disorders. They are contributing to our businesses, connecting with their families, and giving back to the community. But if we want more people to join them on a path of recovery, we need to take action – now. Too many people are still unaware that prevention works, and that these conditions can be treated, just like we can treat other health disorders such as diabetes and hypertension. We need to work together to make recovery the expectation.

Having **[been in recovery for XX years / worked in the recovery field for XX years / other statement of personal experience]**, I have seen firsthand the benefits of recovery. Individuals who embrace recovery achieve improved mental and physical health, as well as stronger relationships and a sense of self-worth. Mental and/or substance use disorders do not discriminate – they affect people of all ethnicities, ages, genders, geographic regions, and socioeconomic levels. An estimated **[number]** people needed treatment last year in **[Community/City/Town/State]**, and we need to address this real issue.

We can't get discouraged by the prevalence of these problems, because help is available. In fact, in 2010, 31.3 million adults aged 18 or older received services for mental health problems in the past year, and 2.6 million people aged 12 or older who needed treatment for an illicit drug or alcohol use problem received treatment at a specialty facility in the past year.

These individuals have achieved healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They need the support of a welcoming community to help them on their path of long-term recovery. Fortunately, most people say they would think no less of a friend or relative if they discovered that person is in recovery from a mental and/or substance use disorder.

To further educate communities about the pathways to recovery and to support people in recovery, every September, people throughout the Nation celebrate ***National Recovery Month (Recovery Month)***, an initiative sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

[Name of organization] is celebrating ***Recovery Month*** by holding a variety of educational and entertaining events **[or name specific event]** to honor individuals and families who are in long-term recovery. A huge turn-out at these events will send a signal that **[Community]** embraces recovery and supports those working in the field to provide much-needed recovery services.

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I urge local businesses, community organizations, colleges, schools, administrators, and government agencies to get involved in these activities. Let people know that help is available 24 hours a day through SAMHSA's National Helpline, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD)**. Additionally, you can provide information about local treatment and recovery resources on your website and link to additional information available at ***http://www.recoverymonth.gov***.

These are small and easy steps to take, and they can make a tremendous difference in the lives of many in our community. We shouldn't think twice about getting involved. As this year's ***Recovery Month*** theme says, ***"Join the Voices of Recovery: It's Worth It."***

[Include author name, title, and brief summary of qualifications that make him or her an expert on this topic.]

JOIN THE VOICES FOR RECOVERY It's Worth It

PRESS MATERIALS FOR YOUR *RECOVERY MONTH* EVENT

Creating and distributing press materials, such as a media advisory or press release, provides positive publicity for your ***National Recovery Month (Recovery Month)*** activities. Use these materials to garner media coverage that highlights that prevention works, treatment is effective, and people recover from mental and/or substance use disorders.

For 23 years, ***Recovery Month***, sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), has celebrated the millions of Americans in recovery.

This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also highlights that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to others that prevention works, treatment is effective, and people recover.

Use this document as a guide on how to develop and distribute publicity materials to promote your ***Recovery Month*** events this September.

Draft...

When you begin creating your press materials to publicize your ***Recovery Month*** event, keep in mind that it's important to emphasize that this is part of a national observance. Highlight this year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** in your materials and include information about people in recovery from mental and/or substance use disorders and their family and friends within the community. Lastly, recognize those who work in the prevention, treatment, and recovery field, as they play a role in empowering these individuals to take the first step and embark on a path of recovery.

You may wonder if your ***Recovery Month*** event will be considered newsworthy to reporters. To increase interest, consider the following suggestions:

- Plan an event where a proclamation is issued by a local official or lawmaker;
- Honor a local individual or organization;
- Launch a new public education program; and
- Conduct a seminar or workshop featuring a local celebrity speaker.

For additional newsworthy event ideas, visit the "Promote ***Recovery Month*** with Events" document in this toolkit.

Media Outreach

Media Outreach

There are several types of materials your organization can share with the media to publicize your ***Recovery Month*** event. A media advisory, press release, and backgrounder all effectively share timely information with reporters. Remember that the type of format you may use to share information with media outlets for one event may be different from what you might share for another event. For example, it may be best to send a media advisory and backgrounder for a smaller event, while a well-attended rally may require a press release. Regardless of which materials you use, each tool outlined below will encourage the media to cover your event, ultimately creating community interest.

- **Media advisories, or media alerts,** are brief one-page documents that inform local media outlets about an upcoming event that may be of interest. Advisories provide reporters with the basics – just enough information so that they are curious and want to attend your event to learn more. In addition, they should:
  - Have a similar format as an event invitation by outlining who will be attending or participating in the event, what attendees can expect to see or do, where the event will be held, and when it will take place. Also, share whether photo opportunities will be available and how reporters can schedule interviews with spokespeople if they are interested.
  - Include the contact information for your organization or someone from the event planning committee so that reporters can request further details.

For optimal success, send your advisory to the calendar editor and the health reporter or editor who covers local news or events at your local newspaper.

- **Press releases, or news releases,** are lengthier than media advisories. They typically are one- to two-page announcements, read like condensed news stories, and are sent to the media to encourage them to cover your organization's event or news. While some smaller newspapers may run your release word for word, the majority of media outlets use them as background information to craft their own article or broadcast segment. Press releases should:
  - Be approximately 500 words in length, formatted in short paragraphs;
  - Contain the most important information at the top, followed by supporting details later in the article; and
  - Include a quote from your organization's spokesperson or your event's keynote speaker. If you are partnering with another organization, it's acceptable to have more than one person quoted in the release.
- **Backgrounders** are succinct documents that often accompany a media advisory or news release, and supply additional information on the subject. They also can be distributed to the media or other attendees at your ***Recovery Month*** event. Refer to the sample backgrounder at the end of this document that you can distribute as-is, or you can tweak the backgrounder to include specific information on the history of your event or organization. It may be helpful to format your backgrounder in an easy-to-read question and answer format, outlining frequently asked questions that you receive. The backgrounder could highlight:
  - SAMHSA and ***Recovery Month***;
  - Your organization;
  - Your specific ***Recovery Month*** event;
  - Recent data on mental and/or substance use disorders nationwide and in your community;
  - Relevant information on prevention, treatment, and recovery support services; and
  - Local individuals in recovery.

Media Outreach

Use the sample media advisory, press release, and backgrounder templates at the end of this document, and modify them to support your ***Recovery Month*** event. Use either your organization's letterhead or the ***Recovery Month*** letterhead found at ***http://www.recoverymonth.gov*** for your press materials.

In addition to the tools outlined above, use the following materials to raise awareness about the prevalence of mental and/or substance use disorders in your area and the need for prevention, treatment, and recovery support services:

Op-eds are commonly placed on the page opposite the editorial page in newspapers. Op-eds offer a strong position on a topic, generally authored by an expert in the industry or subject area. Their purpose is to influence public opinion and create a dialogue among the community about a specific issue, such as mental and/or substance use disorders or recovery. Refer to the "Share Your Voice During ***Recovery Month***" document in this toolkit for further information on how to draft and submit an op-ed to your local newspaper.

- **Letters to the editor,** sometimes abbreviated as LTEs, are short notes sent to a publication to express a point of view on a relevant, timely issue. LTEs are most frequently published in newspapers and newsmagazines; however, some radio or television stations also air these letters. You can write letters as a response to a news story that was recently published or to highlight a newsworthy issue, such as the importance of funding community treatment resources in light of recent developments.
- **Public service announcements, or PSAs,** are informational commercials that local radio or television outlets play at no cost to the distributor. Every year, SAMHSA creates and distributes radio and television PSAs in English and Spanish to educate individuals in need of treatment and recovery support services that recovery is possible and help is available.

Customize...

Share ***Recovery Month***'s key message – that prevention works, treatment is effective, and people recover from mental and/or substance use disorders – with your supporters. To ensure the public understands that it is essential to combat these prevalent yet serious conditions, communicate the goals of your ***Recovery Month*** event and how you hope to involve and/or change your local community. Remember to share these messages with all members of your event-planning committee, so that anyone can offer a relevant quote if asked by the media. It may be helpful to review the "Work with the Media" document in this toolkit as a group to ensure that all individuals can provide accurate statistics and details surrounding the event.

When developing your press materials, keep in mind the following tips:

- **Be cautious of language:** Avoid using slang terms that may offend someone in recovery or technical jargon that the general public may not understand. Remember that this is a sensitive topic for many individuals across the United States.
- **Check for accuracy:** Be sure to double-check the names, titles, and contact information in your materials and verify that all statistics and spellings are correct.
- **Write factually:** Except when writing an op-ed, only express opinions in direct quotes citing a specific individual as the source. Remember to get consent from the individual quoted before distributing your materials.

Media Outreach

In addition, work to incorporate the following messages into your materials, which pertain to both the general ***Recovery Month*** observance and this year's theme, ***"Join the Voices for Recovery: It's Worth It"***:

- ***Recovery Month*** is an initiative sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). The observance, celebrated each September for the past 23 years, honors individuals in recovery, their families and friends who have supported them during their journey, and those who work in the prevention, treatment, and recovery support services field.
- Mental and/or substance use disorders can affect anyone – regardless of race, age, gender, geographic region, or socio-economic level – but for all individuals, prevention works, treatment is effective, and people recover. It's essential to recognize the value of recovery for individuals, families, and the larger community.

In addition, use the following resources to customize your press materials with local data that may be available:

- Single-State Agency Directory (SSA)
- SAMHSA's *National Survey on Drug Use and Health*
- SAMHSA's *National Survey on Drug Use and Health: Mental Health Findings*
- SAMHSA's National Survey on Substance Abuse Treatment Services (N-SSATS)
- SAMHSA's Treatment Episode Data Set
- SAMHSA Regional Offices

- Visit the ***Recovery Month*** website at ***http://www.recoverymonth.gov*** and visit **[insert organization's website]** for detailed information on mental and/or substance use disorders and prevention, treatment, and recovery support services. For specific information on local treatment options, call SAMHSA's National Helpline at **1-800-662-HELP (4357)**, or **1-800-487-4889 (TDD)**, for 24-hour free and confidential information in English and Spanish. You can also visit SAMHSA's "Find Substance Abuse and Mental Health Treatment" website, *http://www.samhsa.gov/treatment*.

Disseminate...

Now that you've drafted your media materials, it's important to effectively distribute these resources. Before you distribute your media advisory, release, or backgrounder, refer to the checklist below:

- Does the tool highlight the importance of ***Recovery Month***?
- Does the event entail a "call to action" for the media and/or the community?
- Does any information included need further explanation?
- Do I know the most appropriate person and outlet to send my materials?
- Do the materials provide community-specific information that localizes it?

To learn more about where to send your materials and how to build a robust media list, refer to the "Work with the Media" document in this toolkit.

Media Outreach

Press materials are most commonly distributed electronically. Reporters receive hundreds of emails each week, and often do not open emailed attachments. To ensure a reporter sees the information you send, copy and paste your materials into the body of an email. Make sure they can clearly see the headline and first paragraph even if they don't scroll down. Also, personalize each email so the reporter knows it's not a mass message, and you are familiar with their work. For example, if you've had a previous conversation with the reporter, you may want to mention this at the beginning of your note to trigger their memory. Additionally, mention a story the reporter recently wrote that caught your eye and provide a few thoughts on the topic discussed.

Now that you know how to send your press materials, when is the best time to send them? **Media advisories** are typically sent to reporters about a week in advance of an event. Remember that these alerts serve as an invitation or "save-the-date" card for your event.

On the other hand, **press releases** are distributed either directly before or at the event. Sometimes reporters are on a tight deadline and may ask for the "embargoed" release in advance of the event. This implies that journalists will honor your request to publish the story after your event or official announcement time, even though they have the information in advance. As an example, you may distribute the keynote speech to be given at your event to reporters a day in advance, with an agreement they will not publish any information on the speech until noon the following day, after the speech has been given.

If you'd like to distribute your press materials to a large number of recipients, you may wish to use an online distribution service. Some of these services may charge a small fee, so it's important to research each method before committing to one service. Additionally, if you're a nonprofit organization, some of these companies may offer their services to you at a discounted rate. Media distribution sites include:

- *24/7 Press Release*
- *Business Wire*
- *PR Log*
- *PR Newswire*

Once you have distributed your materials to the media, remember to post the materials on the ***Recovery Month*** website at ***http://www.recoverymonth.gov*** and on your own organization's site. By doing so, you can reach a much larger audience and increase attendance at your event. It's also important that you follow up with each reporter to whom you sent your materials, to ensure they received them and gauge their interest in attending your event or scheduling an interview with someone from your organization. Refer to the "Work with the Media" document in this toolkit for tips on pitching and advice on communicating with journalists.

Share...

As discussed in the "Promote ***Recovery Month*** with Events" document in this toolkit, it's important to evaluate your event after it has taken place. As a planning committee, recognize each other's successes and brainstorm things you may wish to do differently for future events.

Media Outreach

You can promote your organization's event and the message that prevention works, treatment is effective, and people recover by following these suggestions:

- Post your press materials on the ***Recovery Month*** website, ***http://www.recoverymonth.gov***, to accompany your event listing;
- Share your event information through ***Recovery Month*** social media outlets such as the Facebook page, YouTube channel, and Twitter accounts;

Tell us about your outreach efforts and which toolkit materials you found useful during ***Recovery Month*** by completing the "Customer Satisfaction Form;" and

- Send a copy of your published op-ed and placement information electronically to *recoverymonth@samhsa.hhs.gov* or by mail to:

  Substance Abuse and Mental Health Services Administration
  ATTN: Consumer Affairs/***Recovery Month***
  Center for Substance Abuse Treatment
  1 Choke Cherry Road
  Rockville, MD 20857

Consult Resources...

For more information on ***Recovery Month*** and services available to those in need, please refer to the following resources:

- **SAMHSA's National Helpline, 1-800-662-HELP (4357)** or **1-800-487-4889 (TDD)**, provides 24-hour, free and confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals in English or Spanish.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)**, provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" website**, *http://www.samhsa.gov/treatment*, contains information about treatment options and special services located in your area.
- The ***Recovery Month*** website, ***http://www.recoverymonth.gov***, contains all the materials from this toolkit and a wide variety of relevant resources.

Inclusion of websites and event examples in this document and on the *Recovery Month website* does not constitute official endorsement by the *U.S. Department of Health and Human Services* or the *Substance Abuse and Mental Health Services Administration*.

SAMPLE MEDIA ADVISORY

[Adapt as needed for your event by modifying the type of event, date, etc.]

[Name of Local Official] to Issue Proclamation and Lead *Recovery Walk* to Raise Awareness of Mental and/or Substance Use Disorders

According to recent data released by the Substance Abuse and Mental Health Services Administration (SAMHSA), in 2010, 2.6 million people aged 12 or older who needed treatment for an illicit drug or alcohol use problem received treatment at a specialty facility in the past year, and an estimated **XX [thousand/million]** people in **[city or state]** are affected by these conditions. Also, 31.3 million adults aged 18 or older received mental health services during the past 12 months, and an estimated **XX [thousand/million]** people in **[city or state]** are affected by these conditions. This is an all-too-common problem, and it's imperative that individuals in **[City or State]** understand that the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable.

To address the problem, **[Name of local official]** will be signing a proclamation to honor ***National Recovery Month*** this September to raise awareness that prevention works, treatment is effective, and people recover from mental and/or substance use disorders. Additionally, **[Name of expert]** will discuss local mental and/or substance use disorders and provide details on available services.

Last year, 164 proclamations were issued nationwide, including one by the President of the United States. The signing of the proclamation is part of the 23rd observance of ***Recovery Month***, sponsored by SAMHSA. After the signing of the proclamation, attendees and all citizens of **[City]** are encouraged to join a *Recovery Walk* around the community to highlight the significance of helping people in need of treatment and recovery support services, while also celebrating the accomplishments of individuals in recovery.

WHO: [Participants]

WHEN: [Date and Time]

WHERE: [Address of Location]

CONTACT: [Name and Phone Number of Primary Contact for Event]

SAMPLE PRESS RELEASE

[Adapt as needed for your event by modifying the type of event, date, and local statistics as available.]

For Immediate Release

Contact: [Name of person who is available to answer questions from the media]
[Phone number of contact person – include office and cell numbers]
[Email address of contact person]

[Name of Local Official] Issues Proclamation and Hosts Recovery Walk to Raise Awareness About Mental and/or Substance Use Disorder Support Services in [City or State]

[City, State], **[Date]** – Mental and/or substance use disorders are a critical challenge that **[City or State]** must address immediately, according to **[Name of local official]**, who today proclaimed September as ***National Recovery Month (Recovery Month)***. To draw attention to the issue, **[Name of local official]** led a *Recovery Walk* around the community to raise awareness about people in need of treatment and recovery support services. The walk, which was attended by more than **[number of people who attended the walk]** people, drew support from many individuals in recovery, as well as their friends and families.

"My hope is that through these activities, people will recognize that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable," stated **[Name of local official]**. "As you know, mental and/or substance use disorders not only affect those who are suffering, but also their families, friends, and the larger community. This underscores how crucial it is to provide access to prevention, treatment, and recovery support services."

[Replace the following paragraph with local statistics, if available.] In 2010, 31.3 million people aged 18 or older (13.7 percent of the U.S. population) received mental health services according to the ***2010 National Survey on Drug Use and Health***, an annual survey released by the Substance Abuse and Mental Health Services Administration (SAMHSA). In 2010, 2.6 million people aged 12 or older (1.0 percent of the U.S. population) who needed treatment for an illicit drug or alcohol use problem received specialty treatment at a specialty facility in the past year. .

To showcase these issues' impact on the local community, the five-mile *Recovery Walk* processed throughout downtown **[City]**, gaining support of local businesses and organizations. While many participants had previously planned on walking in the event, several bystanders joined in throughout it to support the cause.

"Seeing people of all ages and from all walks of life join together for a common cause was extraordinary," said **[name of person]**, a walk participant who has been in recovery for **[number of years in recovery]** years. "Through each event, each proclamation issued, and each ***Recovery Month*** observance, more people across the United States will be able to embrace recovery."

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Today's event was part of a national initiative sponsored by SAMHSA, within the U.S. Department of Health and Human Services (HHS). The observance of ***Recovery Month***, which takes place each September, raises awareness of mental and/or substance use disorders, celebrates individuals in long-term recovery, and acknowledges the work of prevention, treatment, and recovery service providers. Each September, and throughout the year, ***Recovery Month*** encourages communities nationwide to spread the message that prevention works, treatment is effective, and people can recover from mental and/or substance use disorders.

SAMPLE BACKGROUNDER

[Adapt as needed by including additional information on your specific organization, event, etc.]

National Recovery Month Media Fact Sheet

What is National *Recovery Month*?

National Recovery Month (Recovery Month) is an annual observance celebrated each September since 1989. In September and throughout the year, ***Recovery Month*** spreads the message that:

- Prevention works;
- Treatment is effective; and
- People recover from mental and/or substance use disorders.

Refer to the Recovery Month website, ***http://www.recoverymonth.gov***, for additional information on the initiative.

Who sponsors *Recovery Month*?

Recovery Month is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

What is this year's *Recovery Month* theme?

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

What events occur during *Recovery Month*?

Throughout September, hundreds of events occur nationwide to celebrate ***Recovery Month***. These events – ranging from recovery walks and rallies to online web chats and small-group barbeques – encourage the following audiences to address the continued need for prevention, treatment, and recovery support services:

- Active military and veterans;
- Justice system personnel;
- Communities;
- Educators;

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- Employers;
- Civic leaders;
- Faith-based organizations;
- Recovery community;
- Friends and family members;
- Social service organizations; and
- Prevention, treatment, and recovery organizations.

Where can people find treatment for mental and/or substance use disorders?

Many treatment options exist. SAMHSA's treatment website, *http://www.samhsa.gov/treatment*, offers more than 11,000 specialized facilities in the United States that provide rehabilitation services, behavioral therapy, counseling, and medication support, among many other services. SAMHSA's National Helpline, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD)**, provides 24-hour, free and confidential information about mental and/or substance use disorders, and prevention, treatment, and recovery referrals in English and Spanish. Additionally, the "Treatment and Recovery" document in the ***Recovery Month*** toolkit provides an overview of support options that exist.

Where can I learn more about the current mental health and substance use landscape?

Refer to the "Fast Facts" document in the ***Recovery Month*** toolkit for up-to-date statistics on the prevalence of mental and/or substance use disorders in the United States.

JOIN THE VOICES FOR RECOVERY It's Worth It

ISSUE *RECOVERY MONTH* PROCLAMATIONS

Issuing a proclamation on behalf of your city, county, town, or State is an important tool in raising awareness for ***National Recovery Month (Recovery Month)***. A proclamation is an official announcement that publicly recognizes an initiative such as ***Recovery Month***. Proclamations are typically signed and issued by Federal officials, governors, State legislators, or other government officials at the local level. By issuing a proclamation designating September as ***Recovery Month***, your community will bring attention to mental and/or substance use disorders and spread the message that prevention works, treatment is effective, and people recover.

In 2011, 164 proclamations were signed to support ***Recovery Month***, including one issued by President Barack Obama. For the past 11 years, the Executive Office of the President of the United States has supported the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), by working to help raise public awareness and support for those with behavioral health conditions, as well as their communities and families. The Presidential proclamation recognizes the importance of treatment and recovery across the country. Equally as important are the hundreds of proclamations issued at the local level each year, which is where you can help.

Create a proclamation to highlight this year's theme: ***"Join the Voices for Recovery: It's Worth It,"*** which emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also highlights that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

Use this document to help you draft and promote a proclamation.

Contact Public Officials...

Before you begin writing a proclamation to designate September as ***Recovery Month*** in your area, research local officials to gauge their interests and beliefs about treatment and recovery support services.

Since some legislatures are not in session during the summer months, reach out to your public officials at least three months in advance of ***Recovery Month***. Write a letter or send an email to initiate contact with your local official's communications office, and follow up with a phone call. During the initial conversation, explain the ***Recovery Month*** observance, detail your local activities, and discuss the importance of their support for this annual event. If your local official's office is unfamiliar with the proclamation process, explain that it's a simple way for the government to recognize the importance of treatment for and recovery from mental and/or substance use disorders – and that it can encourage those in need to seek help. Once you receive confirmation that the official might support ***Recovery Month*** and issue a proclamation, it's time to start writing.

Media Outreach

Media Outreach

Decide on a Style...

When you plan your ***Recovery Month*** proclamation, there is a traditional style as well as a modern style of writing these statements. While these two different styles differ in format, they are equally effective to generate awareness.

- **Traditional proclamations** begin with a series of statements starting with the words "whereas," which details the current state of affairs and suggests the reasoning behind the proclamation. Each clause notes the problems or issues being addressed and is followed by a concluding phrase beginning with "therefore," which specifically requests the support or action needed.
- **Modern proclamations** are written in a letter format (for instance, the Presidential Proclamation). They highlight the same points as a traditional proclamation, but are written as a statement.

Samples of both formats are included at the end of this document to personalize and share with interested officials in your area. Examples of signed and issued proclamations can be viewed on the ***Recovery Month*** website at ***http://www.recoverymonth.gov*** under the "Proclamations" section.

Develop a Proclamation...

Now that you're familiar with the different proclamation styles and their purpose, use the following checklist when drafting your proclamation and working to gain public support for your efforts.

- Determine your local official's preferred writing style (traditional or modern);
- Offer to draft the proclamation;
- Refer to the examples at the end of this document to help draft your proclamation;
- Insert local information or statistics that will resonate with your community members (see "Prevention, Treatment, and Recovery Resources" provided in this document);
- Submit the proclamation to your local official's office and allow time for the official to review and sign the proclamation;
- Follow up frequently to check the status of your proclamation; and
- Once it has been signed, display copies of your proclamation in public places.
- Post your proclamation on the ***Recovery Month*** website, Facebook page, and Twitter account.

Personalize...

Personalizing your proclamation allows your message to resonate deeper with the community. The following resources may be helpful in providing local information or statistics about treatment and recovery services that you may want to include:

- Single-State Agency (SSA) Directory
- SAMHSA's *National Survey on Drug Use and Health*
- SAMHSA's *National Survey on Drug Use and Health: Mental Health Findings*
- SAMHSA's Recovery Statement
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS)
- SAMHSA's Drug Abuse Warning Network
- SAMHSA's Treatment Episode Data

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Publicize...

Publicize your proclamation to bring further attention to ***Recovery Month*** and generate momentum for the national observance in your community. Visit local businesses, health clubs, libraries, lobbies of hotels, schools, college campuses, community mental health centers, and/or government buildings to see if they allow you to display copies of your proclamation. If permitted you can put up a ***Recovery Month*** poster (found at ***http://www.recoverymonth.gov/~/media/images/bannersandlogos/2012Poster.ashx***) to garner additional attention and increase interest.

Arrange a press conference or "town-hall" meeting and have your local official sign or present the proclamation there as an additional publicity option. The event can be accompanied by a roundtable discussion on issues related to mental and/or substance use disorders. Ideas for panelists include treatment and service providers, families affected by mental and/or substance use disorders, members of the military affected by these disorders, and other individuals already in recovery. For information on how to plan a ***Recovery Month*** event of this magnitude, refer to the "Promote ***Recovery Month*** with Events" document in this toolkit.

Lastly, you can have your proclamation featured in a local publication to increase awareness. Distribute electronic copies of the document to the "local" or "metro" desk of your town's newspapers, along with a press release to announce the signing of the ***Recovery Month*** proclamation. For tips on how to write an effective press release, refer to the "Press Materials for Your Recovery Month Event" document in this toolkit.

Share...

Post a copy of your proclamation on the ***Recovery Month*** website, ***http://www.recoverymonth.gov***, and send it electronically to *recoverymonth@samhsa.hhs.gov* or in hard copy to:

Substance Abuse and Mental Health Services Administration
ATTN: Consumer Affairs/***Recovery Month***
Center for Substance Abuse Treatment
1 Choke Cherry Road
Rockville, MD 20857

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Consult Resources...

For more information on ***Recovery Month*** and services available to those in need, please refer to the following resources:

- **SAMHSA's National Helpline, 1-800-662-HELP (4357) or 1-800-487-4889 (TDD)**, provides 24-hour, free and confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals in English or Spanish.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255),** provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" website,** *http://www.samhsa.gov/treatment*, contains information about treatment options and special services located in your area.
- The ***Recovery Month*** website, ***http://www.recoverymonth.gov***, contains all the materials from this toolkit and a wide variety of relevant resources.

Inclusion of websites and event examples in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

SAMPLE PROCLAMATION 1: TRADITIONAL FORMAT

WHEREAS, behavioral health is an essential part of health and one's overall wellness; and

WHEREAS, prevention of mental and/or substance use disorders works, treatment is effective, and people recover in our area and around the Nation; and

WHEREAS, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and the community at large; and

WHEREAS, people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities; and

WHEREAS, we must encourage relatives and friends of people with mental and/or substance use disorders to implement preventive measures, recognize the signs of a problem, and guide those in need to appropriate treatment and recovery support services; and

WHEREAS, in 2010, 2.6 million people received specialty treatment for a substance use disorder and more than 31.3 million adults aged 18 or older received services for mental health problems, according to the ***2010 National Survey on Drug Use and Health***. Given the serious nature of this public health problem, we must continue to reach the millions more who need help; and

WHEREAS, to help more people achieve and sustain long-term recovery, the U.S. Department of Health and Human Services (HHS), the Substance Abuse and Mental Health Services Administration (SAMHSA), the White House Office of National Drug Control Policy (ONDCP), and **[Name of State, City, County or Treatment Organization]** invite all residents of **[State/City/Town]** to participate in ***National Recovery Month (Recovery Month)***; and

NOW, THEREFORE, I **[name and title of your elected official]**, by virtue of the authority vested in me by the laws of **[City, State, or Locality]**, do hereby proclaim the month of September 2012 as

NATIONAL RECOVERY MONTH

In **[City or State]** and call upon the people of **[City or State]** to observe this month with appropriate programs, activities, and ceremonies to support this year's theme, ***"Join the Voices for Recovery: It's Worth It."***

In Witness Whereof, I have hereunto set my hand this [day of month] day of September, in the year of our Lord two thousand twelve, and of the Independence of the United States of America the two-hundred and thirty-seventh.

_____

Signature
[Insert City/State or Other Official Seal]

SAMPLE PROCLAMATION 2: MODERN FORMAT

Mental and/or substance use disorders affect all communities nationwide, but with commitment and support, people with these disorders can achieve healthy lifestyles and lead rewarding lives in recovery. In 2010, 2.6 million people aged 12 or older received specialty treatment for an illicit drug or alcohol use problem in the past year, and more than 31.3 million adults aged 18 or older received mental health services in the past year. By seeking help, people who experience mental and/or substance use disorders can embark on a new path toward improved health and overall wellness.

The focus of ***National Recovery Month (Recovery Month)*** this September is to celebrate their journey. This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme also emphasizes that people in recovery can achieve a healthy lifestyle, both physically and emotionally, while contributing in positive ways to the community. ***Recovery Month*** spreads the message that behavioral health is an essential part of health and one's overall wellness, and that prevention works, treatment is effective, and people recover.

That's a message we need to spread far and wide. The impact of mental and/or substance use disorders is apparent in our local community, and an estimated **XX [thousand/million]** people in **[city or state]** are affected by these conditions. According to the ***2010 National Survey on Drug Use and Health***, in 2010, 23.1 million persons aged 12 or older needed treatment for an illicit drug or alcohol use problem (9.1 percent of persons aged 12 or older). Of these, 2.6 million (1.0 percent of persons aged 12 or older and 11.2 percent of those who needed treatment) received treatment at a specialty facility.

Also in 2010, out of the 45.9 million Americans aged 18 or older who had any mental illness in the past year, only 17.9 million received mental health services in the past year. Through ***Recovery Month***, people become more aware and able to recognize the signs of mental and/or substance use disorders. Managing the effects of these conditions can help build better futures and reduce the societal cost of these conditions.

We, and others across the United States, need to recognize the achievements of those who have achieved long-term recovery and share with others how recovery can positively benefit one's life.

For 23 years, ***Recovery Month*** has worked to improve the lives of those affected by mental and/or substance use disorders by raising awareness of these diseases and educating communities about the treatment and recovery resources that are available. For the above reasons, I am asking the citizens of **[City or State]** to join me in celebrating this September as ***National Recovery Month***.

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I, **[name and title of elected official]**, do hereby proclaim the month of September 2012 as

NATIONAL RECOVERY MONTH

In [City or State] and call upon our community to observe this month with compelling programs and events that support this year's theme, ***"Join the Voices for Recovery: It's Worth It."***

_____

Signature
[Insert City/State or Other Official Seal]

JOIN THE VOICES FOR RECOVERY It's Worth It

RECOVERY MONTH PUBLIC SERVICE ANNOUNCEMENTS

Every year, public service announcements (PSAs) are created for ***National Recovery Month (Recovery Month)*** to encourage individuals in need of treatment and recovery services to seek help. PSAs are advertisements that air on television and/or radio stations, as well as online, at no cost to those who develop them.

For the 2012 ***Recovery Month*** campaign, the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), created two radio and television PSAs in English and Spanish to highlight the message that prevention works, treatment is effective, and people recover from mental and/or substance use disorders. Spreading this message supports SAMHSA's *Strategic Initiatives*, including its efforts to increase public awareness of mental and/or substance use disorders.

This year's PSAs support the ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** and emphasize that the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. The theme shows that people in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

These PSAs can be used year-round to promote treatment and recovery. At the end of each PSA, SAMHSA's National Helpline, **1-800-662-HELP (4357)**, or **1-800-487-4889 (TDD)**, is highlighted. This toll-free number, available in English or Spanish, provides 24-hour, confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals.

Customize...

The 2012 PSAs, titled "Pick Up the Pieces" and "Own It," were distributed to more than 1,000 television and 3,000 radio stations nationwide. To maximize their circulation, these pre-recorded PSAs are available in different lengths. The television PSAs available in 30- and 15-second versions, and the radio PSAs are available in 30- and 20-second versions. Additionally, "open-ended" versions are available so you can add your community information to personalize the spot. If possible, work with a local production company to insert your supplementary information, such as a website, phone number, or logo. Remember to contact local resources to let them know if you plan to include their information, so that they can prepare for a potential increase in calls.

Use Scripts...

At the end of this document, you will find two 30-second and two 15-second radio PSA script examples for disc jockeys to read "live" on the air. You can easily customize these scripts to fit your community's needs. You may wish to tailor these scripts to promote a ***Recovery Month*** event in your community.

When customizing the live-read scripts to promote your event, keep in mind the following checklist:

- Include only crucial event details to limit the scripts to the allotted time;

Media Outreach

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- Refer viewers and listeners to a website or phone number for more information;
- Weave in local statistics or information about the prevalence of mental and/or substance use disorders that resonate with your community; and
- Ask your radio stations if their most popular radio personalities or a community leader who may be visiting the station can help promote the PSAs by reading them live.

For additional information on how to plan a successful ***Recovery Month*** event, refer to the "Promote ***Recovery Month*** with Events" document in this toolkit.

Distribute Scripts...

Distribute the live-read PSA scripts to local radio stations to promote an event or the ***Recovery Month*** campaign in September. Before reaching out to radio stations, identify which stations are most appropriate for your target audience, considering demographic data such as age, gender, race, and location. After screening your top choices, contact these radio stations to determine if they're interested in receiving the live-read scripts. Also ask if there's a specific person who handles these requests, such as a PSA director. It's important to include a cover letter, so the radio station understands the importance of your event and the ***Recovery Month*** campaign. Be sure to include key information and event details, as well as your contact information in case they have questions. Refer to the "Work with the Media" document in this toolkit for a pitch letter that you can modify.

Promote Pre-recorded PSAs...

Promoting the pre-recorded 2012 ***Recovery Month*** television and radio PSAs, as well as live-read radio scripts, spreads the message that recovery from mental and/or substance use disorders is possible. Start by writing down bullet points or creating a script you can use when calling television and radio stations to explain the ***Recovery Month*** PSAs in detail. Stress the importance of these PSAs and how they motivate people in need to seek help.

If stations say they have no time to play the PSAs during September, remind them that these PSAs can be played year-round. If your local television or radio station does not have the 2012 PSAs, let them know that copies are also available by calling 617-520-2567 or emailing *recoverymonth@samhsa.hhs.gov*. The PSAs are also available online in the "Video, Radio, and Web" section of the ***Recovery Month*** website at ***http://www.recoverymonth.gov***.

Personalize...

Below you will find some resources to help localize your message and drive home the importance of recovery to a station's listeners.

- Single-State Agency (SSA) Directory
- SAMHSA's *National Survey on Drug Use and Health*
- SAMHSA's *National Survey on Drug Use and Health: Mental Health Findings*
- SAMHSA's Recovery Statement
- SAMHSA's National Survey of Substance Abuse Treatment Services (N-SSATS)
- SAMHSA's Drug Abuse Warning Network
- SAMHSA's Treatment Episode Data Set

Media Outreach

To spread the word online, email the PSAs to all your ***Recovery Month*** supporters. Ask them to forward your email, along with the videos, to anyone they know who may find them useful. Be sure to include all necessary information in your message, including your contact information and an explanation of the PSAs' importance. If your organization has a website, you can easily embed the PSAs from the ***Recovery Month*** website, Facebook page, and YouTube channel. Typically, you will see an "embed code" link near the video, which enables you to copy and paste the video into your website. If you don't see that information or you have any questions, email *recoverymonth@samhsa.hhs.gov* for assistance.

If you plan to host an event during ***Recovery Month***, play the PSAs during your event to offer a video component. Set up a TV and play the PSAs on repeat, or display them on a big screen with loudspeakers. Make copies of the "PSA Fact Sheet," located in the 2012 video PSA packaging, and hand them out during your event.

Consult Resources...

For more information on ***Recovery Month*** and services available to those in need, please refer to the following resources:

- **SAMHSA's National Helpline**, **1-800-662-HELP (4357)** or **1-800-487-4889 (TDD)**, provides 24-hour, free and confidential information about mental and/or substance use disorders and prevention, treatment, and recovery referrals in English or Spanish.
- **National Suicide Prevention Lifeline**, **1-800-273-TALK (8255)**, provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" website**, *http://www.samhsa.gov/treatment*, contains information about treatment options and special services located in your area.
- The ***Recovery Month*** website, ***http://www.recoverymonth.gov***, contains all the materials from this toolkit and a wide variety of relevant resources.

Inclusion of websites and event examples in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

2012 LIVE-READ RADIO PSA SCRIPTS

:30

If you have a mental and/or substance use disorder, you are not alone. With the help and support of others, you can own your recovery.

This September, celebrate ***National Recovery Month***, and help yourself or someone you love take the first step toward recovery. It's worth it.

For more information on prevention or treatment referral, call **1-800-662-HELP (or replace this number with a local treatment provider's)** or visit ***www.recoverymonth.gov***.

:15

If you have a mental and/or substance use disorder, you can take control of your own recovery.

This September, celebrate ***National Recovery Month*** and call **1-800-662-HELP (or replace this number with a local treatment provider's)** for information on prevention or treatment referral, or visit ***www.recoverymonth.gov***.

***

:30

If you have a mental and/or substance use disorder, help is available. Recovery is possible, and you can rebuild your life with the support of others.

This September, celebrate ***National Recovery Month***, and help yourself or someone you love take the first step toward recovery. It's worth it.

For more information on prevention or treatment referral, call **1-800-662-HELP (or replace this number with a local treatment provider's)** or visit ***www.recoverymonth.gov***.

:15

If you have a mental and/or substance use disorder, recovery is possible. You can rebuild your life with the help of others.

This September, celebrate ***National Recovery Month***, and call **1-800-662-HELP (or replace this number with a local treatment provider's)** for information on prevention or treatment referral, or visit ***www.recoverymonth.gov***.

CAMERA-READY LOGO SHEET

Customize your materials using the artwork provided. Logos below can be printed in either PMS 268 or black.

PLANTILLA DE LOGOS LISTA PARA CÁMARA

Personalice sus materiales con el arte que proporcionamos.
Los logos en la parte inferior pueden ser impresos tanto en PMS 268 como en negro.

JOIN THE VOICES FOR RECOVERY

It's Worth It

National Recovery Month

Prevention Works · Treatment is Effective · People Recover

september 2012

ÚNETE A LAS VOCES DE LA RECUPERACIÓN

Vale la Pena

National Recovery Month

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Vale la Pena

National Recovery Month

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septiembre 2012

OVERVIEW: IT'S WORTH IT

Mental and/or substance use disorders (also known as behavioral health conditions) affect millions of individuals, as well as their families and friends who are concerned about them. Many opportunities exist to help them reclaim their lives, restore their relationships, and build promising futures. With the right care, support, and commitment, people with behavioral health conditions can improve their health, lead rewarding lives, and direct their own recovery path while managing their condition.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

The ***Recovery Month*** campaign aligns with many of SAMHSA's Strategic Initiatives, which guide SAMHSA's work to help people with mental and/or substance use disorders, their communities, and their families. SAMHSA works to help people prevent and overcome costly behavioral health conditions and to promote overall health and well-being for all Americans.

This overview details the spectrum of behavioral health conditions, prevention, and recovery across different audiences, including active military, veterans, and families; people within the justice system; families and friends of someone in need; and the recovery community. This toolkit provides additional sections about how all types of individuals can harness the strength, hope, and courage to overcome their disorders and actively participate in family life and their communities. In addition, the "Join the Voices for Recovery" document shares positive journeys from the perspectives of multiple individuals in recovery.

The Current Mental Health and Substance Use Landscape — And the Promise of Recovery

Mental and/or substance use disorders and recovery from these disorders are prevalent in people of every ethnicity, age, gender, geographic region, and socioeconomic level. According to the 2010 ***National Survey on Drug Use and Health***, approximately 45.9 million adults aged 18 or older had any mental illness in the past year, and 11.4 million adults aged 18 or older had a serious mental illness.[1] Additionally, 22.1 million Americans aged 12 or older were classified with substance dependence or abuse (substance use disorders).[2] Of these people, 17.9 million met the criteria for alcohol dependence or abuse.[3]

Targeted Outreach

LAUREN SPIRO

Director, National Coalition for Mental Health Recovery
Washington, DC

My life has been an unfolding process of searching for my truth and my liberation. A major part of my journey has been looking back with a deeper lens at what happened to me. I was put in a mental institution at age 16 and told that I had an incurable brain disease. The experts, however, were wrong.

My most powerful recovery tool has been to heal my emotional pain by expressing the feelings associated with my early hurtful experiences, and having people really listen to me. Remarkable changes happened when I started learning about oppression and the damage it had done to my life. I had been stuck in monologue, and no one knew how to engage me in dialogue. Eventually I learned to express myself and discover who I was born to be. I reclaimed my full self and mind, and I learned that there was nothing wrong with me. Today, with more clarity, I understand what happened to me. I continue to learn how to believe more deeply in myself.

I now serve as the director of the National Coalition for Mental Health Recovery (NCMHR), which was formed in 2006 as a united voice for people with who have experienced mental health recovery. We are 32 States strong; we have a voice on Capitol Hill; and we have a seat at White House policy meetings. We are spreading emotional CPR around the world, teaching people how to assist others through an emotional crisis.

I have also earned a master's in clinical and community psychology, and I am an artist who has awakened to the power of creative expression as a tool to transform society. I have devoted my life's work to changing the mental health system so that it better meets the genuine needs of people.

I now have a family, children, and grandchildren who not only love me, but respect me. I've had a career for 30 years and have not been fired. I have been able to gain self-respect and the respect of others. Changing my whole life was not easy, but the end result was well worth it.

Mental illnesses include major depression, schizophrenia, bipolar disorder, obsessive compulsive disorder, panic disorder, post-traumatic stress disorder, and borderline personality disorder.[4] These illnesses can result in severe functional impairment, substantially interfering with or limiting one or more of a person's major life activities.[5] They can also disrupt relationships with family members, friends, co-workers, and neighbors.

However, about two-thirds of Americans believe that treatment and support can help people with mental illnesses lead normal lives.[6] In 2010, 31.3 million adults aged 18 or older received mental health services during the past 12 months.[7] Also in 2010, 2.9 million youth aged 12 to 17 received treatment or counseling for problems with emotions or behavior in a specialty mental health setting (inpatient or outpatient care) in the past year. Among youth aged 12 to 17, common reasons for receiving specialty mental health treatment include depression (47.6 percent) and suicidal thoughts or attempts (20.8 percent).[8] Experts believe that approximately 80 percent of patients with depressive disorder improve significantly with treatment services,[9] such as cognitive behavioral therapy, interpersonal therapy, and peer support groups.[10] For example, data show that with cognitive behavioral therapy, which focuses on identifying, understanding, and changing thinking and behavior patterns, benefits are usually seen within 12 to 16 weeks of treatment.[11]

Targeted Outreach

Substance use is another common problem. People with substance use disorders have problems with misuse, dependence on, or addiction to alcohol, tobacco, and/or illicit or prescription drugs. Substance use disorders often include physical, behavioral, and psychological symptoms.[12] Similar to many other health conditions, genetics can play a role in the development of a substance use disorder.[13]

Like mental health problems, substance use disorders are also highly treatable. Many believe recovery is possible:

Approximately

66%

of Americans believe that treatment and support can help people with mental illnesses lead normal lives.*

Approximately

75%

of the population believe that recovery is possible from addiction to alcohol, prescription drugs, and marijuana.**

In 2010, 2.6 million people aged 12 or older received services for alcohol or illicit drug use at a specialty facility in the past year.[14] Treatment options for substance use disorders include residential or inpatient treatment programs, outpatient treatment programs, counseling, and sober living programs.[15] Through its national helpline, **1-800-662-HELP (4357)**, SAMHSA provides free, 24-hour confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery.

The positive news is that millions of Americans are in recovery from mental or substance use disorders today.[16] SAMHSA defines recovery from mental and/or substance use disorders as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.[17] SAMHSA also supplements this definition with four major dimensions that support a life in recovery:[18]

- **Health:** Overcome or manage one's disease(s) or symptoms – and make informed, healthy choices that support physical and emotional well-being;
- **Home:** Have a stable and safe place to live;

Targeted Outreach

- **Purpose:** Participate in meaningful daily activities, such as a job, school, volunteer opportunities, family caretaking, or creative endeavors, and have the independence, income, and resources to participate in society; and
- **Community:** Enjoy relationships and social networks that provide support, friendship, love, and hope.

Long-term recovery is a remarkable achievement, and ***Recovery Month*** celebrates this rewarding journey. Through individual desire, local treatment and support services, and the support of families, friends, neighbors, and communities, recovery is possible. People in recovery use personalized solutions to sustain their recovery, achieve wellness, and inspire others to follow their lead in living healthy lives.

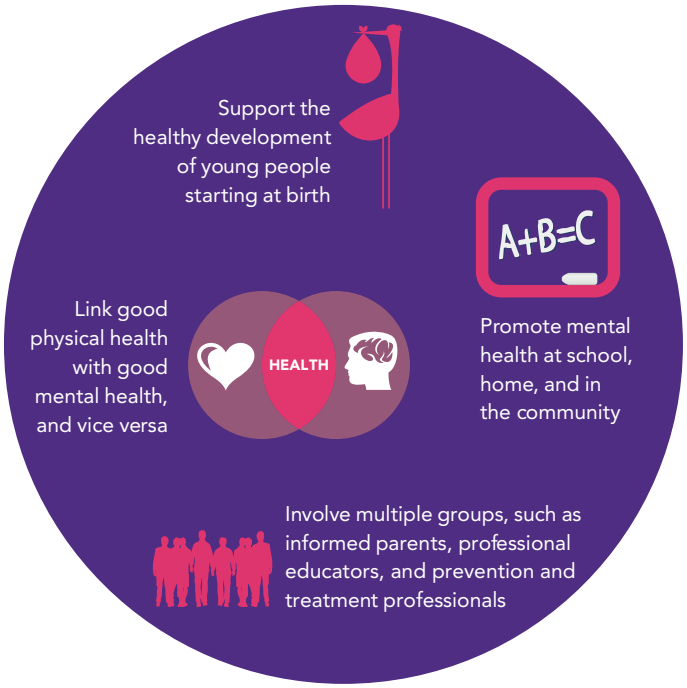
Still, we need to encourage more people to embrace the pathways to recovery and increase access to treatment and recovery services. For example, of the 23.1 million Americans aged 12 or older (9.1 percent) who needed treatment for illicit drug or alcohol use problem in 2010, only 2.6 million received treatment at a specialty facility.[19]

The Power of Prevention

Prevention and early intervention are integral to combat mental and/or substance use disorders before problems develop or intensify. If effective prevention programs were implemented more broadly nationwide, substance abuse initiation among youths would decline by an estimated 1.5 million.[20] Additionally, preventive intervention can reduce the incidence of depressive disorders by 22 percent.[21]

Behavior and symptoms signaling the likelihood of future behavioral disorders often manifest two to four years before a disorder is actually present, highlighting the opportunity for preventive interventions.[22] Half of all mental, emotional, and behavioral disorders are diagnosed by age 14, and approximately 75 percent are diagnosed by age 24, so reaching young people is important.[23]

Core concepts of mental, emotional, and behavioral health prevention for **young children** and **adolescents** include:***



Targeted Outreach

An increased focus on preventing mental and/or substance use disorders and related disorders among children, adolescents, and young adults is critical to the Nation's behavioral and physical health now and in the future.[24] One of SAMHSA's goals through its Prevention of Substance Abuse and Mental Illness Strategic Initiative is to create communities where individuals, schools, faith-based organizations, and workplaces take action to promote emotional health and reduce the likelihood of mental illness, substance abuse, and suicide. As part of this effort, the responsibility is increasingly placed on families and friends to identify possible symptoms and signs of behavioral health conditions, seek assistance, and support the needs of people pursuing recovery.

Among adults, warning signs of a mental health problem include:[25]

- Confused thinking;
- Prolonged depression;
- Feelings of extreme highs and lows;
- Excessive fears, worries, and anxieties;
- Social withdrawal;
- Dramatic changes in eating or sleeping habits;
- Strong feelings of anger;
- Delusions or hallucinations;
- Growing inability to cope with daily problems and activities;
- Suicidal thoughts;
- Denial of obvious problems;
- Numerous unexplained physical ailments; and
- Substance use.

For information about prevention, treatment, and recovery options and special services in your area, call SAMHSA's National Helpline at 1-800-662-HELP (4357) or 1-800-487-4889 (TDD), or visit http://www.samhsa.gov/treatment.

Among youth, warning signs of mental health disorders include:[26]

- Substance misuse;
- Inability to cope with problems and daily activities;
- Changes in sleeping and/or eating habits;
- Excessive complaints of physical ailments;
- Defiance of authority, truancy, theft, and/or vandalism;

Targeted Outreach

- Intense fear of weight gain;
- Prolonged negative mood, often accompanied by poor appetite or thoughts of death; and
- Frequent outbursts of anger.

The signs and symptoms of substance use disorders among adults include:[27]

- Feeling fearful, anxious, or paranoid;
- Deterioration of physical appearance and personal grooming habits;
- Frequently getting into fights, accidents, or illegal activities;
- Sudden lack of motivation; and
- Unexplained need for money or financial problems.

Common symptoms of substance use disorders among youth include:[28]

- Associating with a new set of friends;
- Sudden decline in school performance;
- Reduced interest in previous hobbies; and
- Missing money, valuables, or prescription drugs from the household.

Many situations can trigger a mental and/or substance use disorder, including economic hardships and unemployment.[29] Identifying harmful stressors and symptoms of mental and/or substance use disorders will help reduce the growing societal cost of behavioral health issues. In the United States, the annual indirect economic cost of mental illness is estimated to be $79 billion,[30] and substance abuse accounts for a total estimated societal cost of approximately $510 billion.[31] The economic costs of these conditions highlight their impact on entire communities, as well as individuals.

Encourage Recovery by Meeting Individual Needs

This year's ***Recovery Month*** campaign focuses on a range of individuals who pursue a better quality of life, as well as the people whose efforts make it possible for them to achieve and sustain recovery. Now more than ever, there is a chance to engage those who experience behavioral health conditions and support them and their family members in seeking treatment and recovery support services.

Each group described in this section faces a unique road to recovery, with different challenges, needs, and support options.

Targeted Outreach

Active Military, Reservists, Veterans, and Families

Members of the military are often exposed to extremely stressful situations, such as deployment and combat, that can affect mental health and substance use, and they may be hesitant to seek help for fear of damaging their careers.[32] Furthermore, individuals may have a difficult time adjusting back into active service following deployment. For instance, nearly 20 percent of service members returning from Iraq or Afghanistan suffer from major depression or post-traumatic stress disorder (PTSD),[33] an anxiety disorder that some people experience after seeing or living through a dangerous event.[34]

Additionally, families of deployed members of the military may face behavioral health challenges. Recent studies show that cumulative lengths of parental deployments are associated with a higher incidence of emotional difficulties among children of military personnel and increased mental health diagnoses among U.S. Army wives.[35, 36]

One step to helping loved ones receive needed care for both mental and/or substance use disorders is to encourage them to use available and easily accessible resources for members of the military and veterans, such as the Army Substance Abuse Program (ASAP) and the Veterans Crisis Line. Several additional resources are outlined in the "Address Mental and/or Substance Use Disorders among Active Military, Veterans, and Their Families" document of this toolkit. SAMHSA's Military Families Strategic Initiative also leads efforts to ensure that behavioral health services are accessible to those military families in need.

Individuals and Families in the Criminal Justice System

While anyone may be at risk of developing behavioral health issues, people in the criminal justice system experience mental and/or substance use disorders at increased rates compared with the general population. In fact, inmates in local jails are 3 to 6 times more likely than the general population to have a serious mental illness,[37] and between 60 percent and 80 percent of individuals in the criminal justice system have a substance use disorder.[38] Those in the criminal justice system also face a higher risk of co-occurring disorders, meaning they suffer from two or more disorders simultaneously, therefore increasing overall health risks and need for treatment. Approximately, two-thirds of State and local inmates with mental health problems also meet clinical criteria for substance use disorders.[39]

People in the criminal justice system face the challenge of rebuilding their lives after release and need personalized supports that meet their needs. Additionally, a personal history of trauma is often present, requiring specific supports to address individuals' past experiences.[40] Overcrowding and a lack of accessible services also present barriers. Fortunately, research suggests that improved services for prisoners and inmates with mental disorders could reduce recidivism as well as improve health.[41]

Targeted Outreach

Families and Friends of People in Need

Family and friends are often the unsung heroes in the recovery process. Close relatives of those in need may need to seek help for themselves and their families to help them cope with their loved one's problem. Friends who are positive influences can be important allies and offer continuous support for individuals working toward their recovery.

As outlined in the "Families and Friends Can Make a Difference" document, awareness of the signs of behavioral health conditions is the first step to providing loved ones with the support to overcome mental and/or substance use disorders. Symptoms manifest differently for everyone, but learning about the various signs of behavioral health conditions enables family and friends the opportunity to intervene before a condition progresses.

Various techniques can be used by family and friends to effectively reach someone experiencing a mental and/or substance use disorder and give them the strength, guidance, and confidence to seek help. Their support can encourage someone with the will to live a fulfilling life in recovery.

The Recovery Community

There is perhaps no stronger advocate for recovery than peers who are already sustaining recovery. Many people who are struggling need someone they can empathize with, trust, and relate to while embarking on their own journey. The "Partner with the Recovery Community" document in this toolkit highlights how social supports can improve recovery outcomes.[42]

People in long-term recovery can gain a sense of pride from helping those in need, and individuals beginning their road to recovery can learn from their experiences. While each individual experiences his or her own unique journey, for many people, recovery:[43]

- Emerges from hope;
- Is person-driven;
- Occurs via many pathways;
- Is holistic;
- Is supported by peers and allies;
- Is supported by relationships and social networks;
- Is culturally based and influenced;
- Is supported by addressing trauma;
- Involves individual, family, and community strengths and responsibilities; and
- Is based on respect.

Targeted Outreach

Both the "Family and Friends" section and "Recovery Community"piece are highlighted by SAMHSA's Recovery Support Strategic Initiative, which partners with people in recovery from mental and/or substance use disorders to promote individual, program, and system-level approaches to recovery. The goal is to foster health and resilience; increase permanent housing, employment, education, and other necessary support structures; and reduce discriminatory barriers.

Overcome Barriers to Recovery

Despite the growing accessibility of recovery support services due to recent changes in Federal legislation, such as the implementation of the Affordable Care Act, barriers and challenges on the path to recovery still exist. For example:

- **Ethnic and socioeconomic disparities** in the United States are prevalent. In 2009, 34 percent of Hispanics, 28 percent of American Indians/Alaska Natives, 23 percent of African Americans, and 18 percent of Asian Americans reported being uninsured – compared with only 14 percent of white Americans.[44] Those who do not have health insurance may be less likely to receive the care they need.[45] However, SAMHSA is helping narrow the gap to better serve all minorities through education and the Affordable Care Act, which will expand health care coverage to nearly 32 million non-elderly Americans.[46] Additionally, SAMHSA's Strategic Initiatives focus on addressing such disparities in care. Its Minority Fellowship Program aims to reduce health disparities and improve outcomes by increasing the number of culturally competent behavioral health professionals available to help diverse populations.
- **Social prejudice or fear** of being exploited or judged for a mental or substance use disorder often trumps a person's desire to seek treatment and support. SAMHSA's What a Difference a Friend Makes campaign seeks to promote acceptance and support for people with behavioral health conditions and counter the negative attitudes, beliefs, and behaviors associated with these issues. The SAMHSA ADS Center is a technical assistance center with multiple resources, including a map of national, State, and community-wide campaigns and programs that address social prejudice and discrimination toward people with behavioral health conditions.

It's Worth It

Every year, millions of Americans demonstrate the resilience to overcome mental and/or substance use disorders and lead healthy, productive lives in recovery. Through ***Recovery Month***, many more Americans will become aware of the opportunities that make recovery possible and will hear about the triumphs of people's recovery journeys.

It's worth it for all individuals and communities to provide a positive influence for people suffering from mental and/or substance use disorders. Prevention, treatment, and recovery results in improved relationships within the community, workplace, and home environments. Treatment services can result in decreased crime, improved health, increased employment, and increased social function[47] – demonstrating the widespread benefits of addressing mental and/or substance use disorders in communities across the Nation.

Once on a path toward recovery, individuals, families, and communities can truly realize that it's worth it to address these serious and all-too-prevalent disorders. Through individual action, family support, and available resources, people can regain their lives and spread the message to others that prevention works, treatment is effective, and recovery is possible.

Targeted Outreach

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month*** and mental and/or substance use disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Technical assistance centers** – SAMHSA supports technical assistance centers that promote peer-directed approaches for adults with behavioral health conditions. Such programs maximize self-determination and recovery and assist people on their path to recovery, ultimately decreasing their dependence on expensive social services and avoiding hospitalization. The five technical assistance centers include:
  - National Consumer Supporter Technical Assistance Center at Mental Health America;
  - National Empowerment Center;
  - National Mental Health Consumers' Self-Help Clearinghouse;
  - The Family Café; and
  - The STAR Center.
- **Bringing Recovery Supports to Scale Technical Assistance Center Strategy (BRSS TACS)** – Provides policy and practice analysis, as well as training and technical assistance, to States, providers, and systems to increase the adoption and implementation of recovery supports with behavioral health issues.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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JOIN THE VOICES FOR RECOVERY It's Worth It

TREATMENT AND RECOVERY: WHY IT'S WORTH IT

Treatment is one of many pathways to achieve recovery from behavioral health conditions such as mental, substance use, or co-occurring disorders. In 2010, 23.1 million people aged 12 or older needed treatment for an illicit drug or alcohol use problem (9.1 percent of people aged 12 or older). Of these, 2.6 million (1 percent of people aged 12 or older and 11.2 percent of those who needed treatment) received treatment at a specialty facility.[1] Moreover, among 45.9 million Americans aged 18 and older who experienced any mental illness, just 17.9 million received mental health treatment.[2] Additionally, recovery support services provide individuals recovering from behavioral health conditions with the support, guidance, and assistance to maintain and sustain their recovery.

The 23rd annual National ***Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. This year's ***Recovery Month*** theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both emotionally and physically, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

Recovery Month is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). Many of SAMHSA's Strategic Initiatives are fulfilled through ***Recovery Month***, including helping people with mental and/or substance use disorders, their communities, and their families prevent and overcome costly behavioral health conditions, and promoting overall health and well-being for all Americans.

This document highlights treatment and recovery options for people with mental and/or substance use disorders – especially for adolescents and young adults. It discusses the importance of addressing co-occurring disorders, and the benefits of recovery.

Choose the Most Appropriate Treatment and Recovery Option

Because a wide range of treatment options exist, it's important to find what works best for you or your loved ones who need help. No single treatment option is effective for everyone; generally, each person will need a customized treatment plan that includes goals and treatment activities designed to help achieve and sustain recovery.[3,4] This plan may need to be assessed continually and modified as necessary during the road to recovery.[5] Consider the following questions:[6]

- Which substances are being used and misused?
- How severe is the substance use and misuse?
- Is there a co-occurring substance use and mental disorder?
- Are there any monetary and/or location limitations for this treatment option?

Targeted outreach

Targeted Outreach

MARTIN MILLER

Counselor, Adcare Hospital of Worcester
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My story of addiction began at age 12 when I started drinking and smoking marijuana. I had just moved to a new city, which meant starting a new school and making new friends. I wanted to fit in. By age 14, I was experimenting with other drugs. At 15, I started using opiates, and at 16, I was addicted to heroin and dropped out of high school. A year later, I was incarcerated for heroin possession. There would be many more drug-related offenses to follow, resulting in more than 10 years of incarceration over the next 35 years. Lost and lonely on the inside, I was mean and tough on the outside. I found myself in a cycle of drug addiction, treatment, and incarceration.

Eventually, long-term treatment offered me the foundation for a life in recovery. Now I am 10 years in recovery; I completed my bachelor's degree at the University of Massachusetts in June 2011 and am currently entering my second semester at Springfield College, working toward a master's degree in social work. I am a Certified Alcohol and Drug Counselor and a Licensed Alcohol and Drug Counselor II.

I also became involved with Massachusetts Organization for Addiction Recovery (MOAR) 6 years ago. I feel that becoming a visible, vocal advocate for improved addiction treatment and education, as well as public awareness, is essential to my newfound purpose in life.

Today, thanks to my recovery, I am a valuable, responsible member of society who is an employed, tax-paying voter and involved in my community. I am a man with honor, dignity, integrity, and respect. I am living proof that treatment works and recovery is possible. Each day of recovery, I feel victorious with much gratitude.

I now have a family, children, and grandchildren who not only love me, but respect me. I've had a career for 30 years and have not been fired. I have been able to gain self-respect and the respect of others. Changing my whole life was not easy, but the end result was well worth it.

Remember that treatment and recovery are ongoing – it's a process that unfolds over time, rather than a time-limited "event."[7] Throughout this process, SAMHSA supports recovery-oriented systems of care (ROSC), in which each person is the central participant in his or her own recovery, and people must recognize the need for change and transformation. ROSC also acknowledges that there are many pathways to recovery. Recovery services should offer choices, honor each person's potential for growth, focus on a person's strengths, and attend to an individual's overall health and well-being.[8]

Self-Help Guide to Combat Substance Misuse

- **Avoid temptations.** Remove everything from your home and office that reminds you of drugs or alcohol.
- **Let people know.** Talk to friends, family members, and co-workers so they know that alcohol and/or drugs are not part of your life anymore.
- **Distance those who are unsupportive.** This may mean giving up certain friends.
- **Learn from the past.** What can you do differently this time to sustain recovery and avoid relapse?

Targeted Outreach

Treatment and Support Services for Mental Health Problems

Mental health problems are common and treatable. Approximately one in four Americans experiences a mental health disorder in a given year.[9] Fortunately, between 70 percent and 90 percent of individuals with mental health problems have significant reduction of symptoms and improved quality of life with a combination of medication, therapy, and additional support.[10] As with other chronic illnesses, individuals who seek treatment and recovery support services for mental health problems learn new life skills and go on to live healthy, empowered, and productive lives.

Psychotherapy

Treatment Option	Description
Cognitive behavioral therapy (CBT)[11]	Helps individuals identify distorted thinking patterns, recognize and change inaccurate beliefs, change behaviors, and relate to others in more positive ways; CBT can be used to treat depression, anxiety, bipolar disorder, schizophrenia, and eating disorders
Psychoanalysis[12]	Long-term therapy that seeks to identify unconscious motivations and early patterns to resolve issues; it helps people become aware of how those motivations influence present actions and feelings
Family-focused therapy (FFT)[13]	Designed to include the whole family as way to identify difficulties and conflicts among family members that may contribute to or worsen an individual's mental health problem; FFT is a main component in treating bipolar disorder
Dialectical behavior therapy[14]	Stresses the value of a strong and equal relationship between the individual and therapist; the individual is reminded when his or her behavior is unhealthy or disruptive and the therapist teaches skills needed to better deal with similar situations in the future
Interpersonal therapy[15]	Works to improve communication patterns and helps people learn to express appropriate emotions in healthy ways and is commonly used to treat depression

Medication Therapy

Often used to treat the symptoms of mental health problems – they do not cure the conditions, but can help people feel better and maintain normal daily routines; health care professionals should be contacted regarding the risks, possible side effects, and using the medication with certain foods, alcohol, and other medications; prescription medications must be taken in the prescribed dosage, at prescribed intervals, and monitored daily.[16]

Support Groups

Can be used to find support and common ground – some groups are led by peers, others by a mental health professional; a variety of organizations specialize in different mental health problems (e.g., anxiety, bipolar disorder, autism, depression, eating disorders); most offer groups for individuals, family members, and friends tailored to their needs.[17]

Targeted Outreach

Treatment and Recovery Support Services for Substance Use Disorders

Half of all adults over age 18 know someone in recovery from an addiction to alcohol, illicit drugs, or prescription drugs.[18] Individuals with an alcohol or drug dependency need to acknowledge their problem; reach out to family, friends, or health care professionals for help; and receive treatment.

The charts below describes some treatment and recovery support services for substance use disorders.

Inpatient Treatment Programs

Located in a hospital or residential setting, where people participate in rehabilitation and recovery.[19]

Option	Description	Best Suited For
Hospital-based rehabilitation units[20]	Focus is on stabilizing the patient and not on long-term addiction, treatment, and education; Patients are often referred from a unit to a hospital-based drug rehab facility to participate in a complete alcohol and drug addiction treatment program	People who suffer from drug addiction or alcoholism and have developed chronic or acute medical and psychiatric problems along with their addiction
Inpatient residential programs and therapeutic communities[21]	Provide a living environment with treatment services lasting from a month to a year or more; offer phases of treatment with different activities and expectations, such as rebuilding family relationships or starting to work again	Those who do not have stable living, employment situations, and/or family support, as well as those who have been unable to sustain recovery with other forms of treatment

Outpatient Treatment Programs

Offer flexibility by not requiring individuals to live at the treatment facility, as people return for services through scheduled visits; enable participants to work or attend school.[22]

Option	Description	Best Suited For
Individual counseling[23]	Helps people address issues of motivation and build skills to resist substance use through coping strategies; uses behavioral therapy to modify attitudes and behaviors and improve relationships and life skills	Individuals who need one-on-one counseling
Medication-assisted treatment[24, 25]	Uses medications approved by the U.S. Food and Drug Administration in combination with counseling and behavioral therapies to provide a whole-patient approach to treatment	Those who need medication for opioid detoxification, alcohol detoxification or dependence, or maintenance treatment
Family counseling[26]	Led by a professional, usually in a private practice or clinic – a neutral forum – for families to work through problems	Families that need to improve communication and those who need to learn about substance use disorders
Group therapy[27]	Reduces isolation, enables members to witness the recovery of others, provides positive peer support, helps members cope with their condition, offers useful information to those new to recovery, and instills hope	Those who need to reduce their isolation and who benefit from witnessing the recovery stories of others

Targeted Outreach

Recovery Support Services

Non-clinical options that provide help through all stages of the recovery journey and focus on a continuum of care to achieve and maintain long-term abstinence from alcohol and/or drugs.[28]

Option	Description	Best Suited For
Peer-to-peer support programs[29]	Provided by leaders in the recovery community who are often in recovery themselves; builds strong and mutually supportive relationships and can expand the capacity of formal treatment by initiating recovery, reducing relapse, and intervening early if or when relapse occurs	Individuals who benefit from strengths-based services that emphasize social support to help maintain lifestyle change
Mutual support groups[30]	Comprised of members with similar problems who want to voluntarily provide social, emotional, and informational support; includes well-known programs such as Alcoholics Anonymous, Narcotics Anonymous, and other non-12-step programs such as SMART Recovery®	People who thrive in an open environment and are willing to share experiences and solutions to problems
Faith-based support groups[31]	Provides low-cost or free of charge support or treatment	People who want to incorporate faith or spirituality into their recovery
Recovery schools[32]	Provides academic services and assistance with recovery and continuing care; does not usually operate as a treatment center or mental health agency, but requires that all students enrolled in the program be free of drugs and alcohol and in recovery; to find a location near you, visit Association of Recovery Schools	Those who need to receive their education in a safe, supportive environment with embedded recovery support

Online Support Services

Enable people to participate in treatment from any location, when their schedule permits, and are useful for people with limited transportation or childcare, as well as rural populations and areas with limited in-person treatment options.

Option	Description	Best Suited For
E-therapy services[33]	Offers participants electronic counsel through text-based communication methods (e.g., email, Internet chats, text messaging) or non-text-based communication methods (e.g., telephone, video conferencing)	Individuals who need support with flexibility in terms of time and location
Recovery chat rooms/forums	Offers an open structure for people to share their stories with fellow members of the recovery community; conversations can focus on specific topics, such as co-occurring disorders or different stages of recovery, and allow people to anonymously connect with others; well-known locations include http://www.intherooms.com and http://reneweveryday.com	People who want to connect online to find those with similar interests or conditions
Blogs and social networking sites	Includes sites such as Facebook and Twitter that allow people to connect with others in treatment and recovery	People who are interested in reading others' stories and sharing their own to connect and offer support

Targeted Outreach

Consider the Benefits of Embracing Recovery

The recovery journey, while unique for every individual, can be defined as a process of change whereby individuals work to improve their own health and wellness and to live a meaningful life in a community of their choice, while striving to achieve their full potential.[34] When suffering from a mental and/or substance use disorder, a person might feel a loss of control. The first step to recovery is taking back control by making changes to improve one's life. Lifestyle changes during and after treatment to support one's recovery may include ending dysfunctional relationships in lieu of healthier ones, resolving personal problems, eating healthier, and getting enough rest and exercise.

When embarking on a recovery journey, it is possible to accomplish recovery goals that benefit many aspects of life, including:[35]

- **Health:** Overcoming or managing one's disease(s) or symptoms – and make informed, healthy choices that support physical and emotional well-being;
- **Home:** Finding a stable and safe place to live that supports recovery;
- **Purpose:** Participating in meaningful daily activities, such as a job, school, volunteer activities, and hobbies; and
- **Community:** Engaging in relationships and social networks that provide support, friendship, love, and hope.

If you know someone who is suffering from a mental and/or substance use disorder, there are ways to motivate people to seek help. An individual's motivation to change can be strongly influenced by family, friends, and community support.[36] People don't necessarily have to "hit rock bottom" to realize they need to change and/or seek treatment.[37]

Recovery makes it possible for people to:*

- Feel better emotionally and physically
- Have time to do things they enjoy
- Improve their quality of life
- Experience less stress

Targeted Outreach

Understand Mental and/or Substance Use Disorders Among Adolescents and Young Adults

During transitional periods from one developmental stage to another, adolescents and young adults are at higher risk of mental or substance use disorders.[38] For example, when graduating from junior high to high school, many are faced with larger challenges and may be subject to peer pressure or psychological bullying by older students. Additionally, half of all mental, emotional, and behavioral disorders are diagnosed by age 14 and three-fourths were diagnosed by age 24, which further underscores the critical nature of this time period.[39] It is important to watch for emotional and/or physical changes in an adolescent or young adult during these times and address any issues that may arise.

Mental health problems, especially depression, anxiety disorders, and attention-deficit/hyperactivity disorders, are prevalent among adolescents and young adults.[40] Approximately one out of every four to five youth meet the criteria for a severe mental disorder resulting in severe impairment across their lifetime.[41] Additionally, it is estimated that 73 percent of the youth in correctional facilities have reported mental health problems during screenings.[42]

Like mental health problems, substance use disorders are very common in adolescents and young adults. In 2010, there were 1.8 million youths aged 12 to 17 who needed treatment for an illicit drug or alcohol use problem.[43] Additionally, of those 1.8 million adolescents, only 138,000 received treatment at a specialty facility.[44] Fortunately, effective, specialized treatment and recovery services are available that specifically address the unique challenges of adolescents and young adults.

Research has found that providing adolescents and young adults with treatment designed specifically for their age group significantly reduces substance use and improves psychological outcomes, as well as school performance.[45] Treatment options vary for adolescents and young adults. It's best to speak with a health professional to decide on an approach that involves flexibility and actively matches the person's needs to available services.[46] Below are other important qualities that a comprehensive treatment plan should include.[47]

- Targeted sessions that address large issues such as trauma, victimization, or depression;
- Mental health services that further assess the condition and include medication management;
- Substance use sessions that approach adolescents at the appropriate level of social and cognitive development;
- Family programming, including parent education, family counseling, and home visits;
- Recovery support services such as transportation, case management, and coordination of care;
- Comprehensive health care, including treatment for sexually transmitted diseases or other conditions such as asthma/respiratory problems; and
- Recreational activity and exposure to activities not involving drugs or alcohol.

Also keep in mind that support and encouragement from family and friends can have a profound impact on an individual's recovery from mental health or substance use disorders. For more information, visit the "Families And Friends Can Make A Difference" section of this toolkit.

Targeted Outreach

Address Co-Occurring Disorders

A co-occurring disorder means an individual has both a substance use disorder and a mental health condition, such as depression, anxiety, or bipolar disorder, for example.[48] About half of individuals with a severe mental disorder are also affected by substance abuse.[49] More specifically, 37 percent of individuals with an alcohol abuse issue and 53 percent of individuals with a drug abuse issue have at least one serious mental illness.[50] Like mental and substance use disorders alone, co-occurring disorders affect all aspects of people's lives, including their families, friends, and co-workers.[51] In 2010, 9.2 million adults aged 18 or older with any mental health illness also had substance use disorders in the past year.[52] Fortunately, with an integrated treatment approach, support, education, and courage, those diagnosed with co-occurring disorders can learn how to manage their disorders and achieve and sustain recovery.[53]

Both mental and/or substance use disorders are long-term conditions, so treatment for a co-occurring disorder may take place over an extended period of time.[54] By receiving coordinated, combined, or integrated treatment from the same clinician or treatment team, those with co-occurring disorders have a much better chance of long-term recovery.[55] Additionally, other problems that stem from a co-occurring disorder can be helped through recovery support services. Effective treatment can help reduce the risk of relapse, hospitalizations, financial problems, family problems, homelessness, suicide, violence, sexual and physical victimization, incarceration, serious medical illnesses such as HIV and hepatitis B and C, and premature death.[56]

Since recovery is a continuous journey, it is important that individuals with co-occurring disorders find effective programs that include rehabilitation activities to help prevent relapses and integrate individuals back into society.[57]

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month*** and mental, substance use, and co-occurring disorders, as well as prevention, treatment, and recovery support services. The toll-free numbers and websites below are available for people to share their experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour, free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Co-Occurring Disorders" Website** – Contains information on co-occurring disorders, treatment, issues, and facts.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255):** Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.

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- **Treatment 101:** Recovery Today: Part of SAMHSA's *Road to Recovery* Television and Radio series that examines many aspects of treatment and recovery.
- **Psychology Today's Therapy Directory** – Allows users to locate a therapist, psychologist, or counselor who specializes in mental health problems by city or zip code throughout the United States.
- **Mental Health America** – Offers resources about the realities of mental health and mental illness.
- **RecoverForever.com** – Offers live online support and contains an abundance of resources on alcohol and drug treatment services that are searchable by State.
- **Alcoholics Anonymous** and **Narcotics Anonymous** – Contains an array of resources for individuals suffering from alcohol or drug dependence, respectively, and allows them to find and join a local chapter.
- **Al-Anon/Alateen Family Groups** – Provides support groups for families and friends of people with alcohol problems.
- **Nar-Anon** – Offers a community for family members to share experiences related to substance use disorders.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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JOIN THE VOICES FOR RECOVERY It's Worth It

ADDRESS MENTAL AND/OR SUBSTANCE USE DISORDERS AMONG ACTIVE MILITARY, VETERANS, AND THEIR FAMILIES

In the United States, there are more than 22.3 million veterans[1] and more than 2.2 million active military service members (including the National Guard and Reserve).[2] Military personnel and veterans willingly risk their lives to protect our society. These individuals and their families may have both rewarding and troubling experiences while doing so. Among the challenges these men and women face is the risk of developing or exacerbating behavioral health conditions, which include mental and/or substance use disorders.

Among the general population, these conditions are a growing national public health concern – in 2010, an estimated 22.6 million Americans aged 12 or older used illicit drugs in the past month,[3] and 45.9 million adults experienced any mental health illness in the past year.[4] While active military, veterans, and military families are at risk for experiencing the impact of behavioral health conditions, they can also serve as positive models of recovery for the millions of Americans struggling with similar issues.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September celebrates the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS). This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are far-reaching and affect individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, while contributing in positive ways to their communities. They also prove to relatives, friends, coworkers, and others that prevention works, treatment is effective, and people recover.

SAMHSA's efforts to curb behavioral health issues in soldiers, veterans, and their families are guided by its Military Families Strategic Initiative, which aims to ensure access to needed behavioral health services to achieve positive outcomes in this population.[5] In addition, this Strategic Initiative provides support and leadership through a collaborative and comprehensive approach to increase access to appropriate services, promote emotional health, prevent suicide, and reduce homelessness.[6]

This document outlines the impact of mental and/or substance use disorders on individuals in the military, as well as the prevention, treatment, and recovery resources available to provide support to these individuals and their families. Refer to the "Join the Voices for Recovery" document in this toolkit to learn about real-life recovery journeys from a mental and/or substance use disorder.

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FRANK RYAN

VP of Clinical Services,
Loyola Recovery Foundation
Pittsford, NY

I'm in recovery from alcoholism, and have not had a drink since December 20, 1977. This is not my accomplishment alone – a number of people and places contributed to my recovery.

My family still can't tell me which came first – a drink of alcohol or a step. At the time, they thought it was cute when I would crawl around and take sips of beer from cans on the floor. They did not think it was cute when I got drunk at age 13.

Serving in the Navy did not change my drinking or thinking, and at times, I lived in the street. After a brief trip to the Norris Clinic in 1977, I promised myself I would not drink, and for the next 5 months, I didn't. But eventually, I told myself that I had earned a drink. I drank a small bottle, which turned into another bottle, and the next thing I knew, I was in another state. The only thought I had was there had to be a better way to die.

After friends found me, I returned home with them and entered the Norris Clinic again. The clinic and my friends played a trick on me – while I wanted a better way to die, they taught me a way to live. It was a slow process that included going to treatment and Alcoholics Anonymous meetings, finding a sponsor, and for the first time, taking suggestions.

We all have to face life's problems and learn to cope without alcohol or drugs. I had to face the loss of my parents, a wife, son, and grandson without the use of alcohol. I also faced the serious illness of my second wife, almost losing her. The list of problems that come along might be endless, but it is about life.

I now have a family, children, and grandchildren who not only love me, but respect me. I've had a career for 30 years and have not been fired. I have been able to gain self-respect and the respect of others. Changing my whole life was not easy, but the end result was well worth it.

Prevalence of Mental and/or Substance Use Disorders

Active military, veterans, and military families are all at risk for developing mental and/or substance use disorders. Mental illness can encompass a variety of conditions, including mood disorders such as depression; anxiety disorders such as post-traumatic stress disorder (PTSD); attention disorders; and personality disorders. Substance use disorders include misuse, dependence on, or addiction to alcohol, tobacco, and/or illicit or prescription drugs. Studies have shown that substance use disorders include both physical and mental dependences[7] and have characteristics similar to other chronic diseases, such as asthma, hypertension, and diabetes. Treatment of both chronic diseases and behavioral health conditions requires changes in deeply ingrained behaviors, and a relapse does not necessarily indicate failure, but a need to adjust treatment methods.[8]

Mental illness and substance use disorders can lead to hardships that render a person's recovery journey more challenging. Homelessness is one of the adversities plaguing military veterans at a high rate. Between October 2009 and September 2010, as many as 144,842 veterans spent at least one night of the year in a homeless shelter.[9] Additionally, 76 percent of homeless veterans experience alcohol, drug, or mental health problems.[10]

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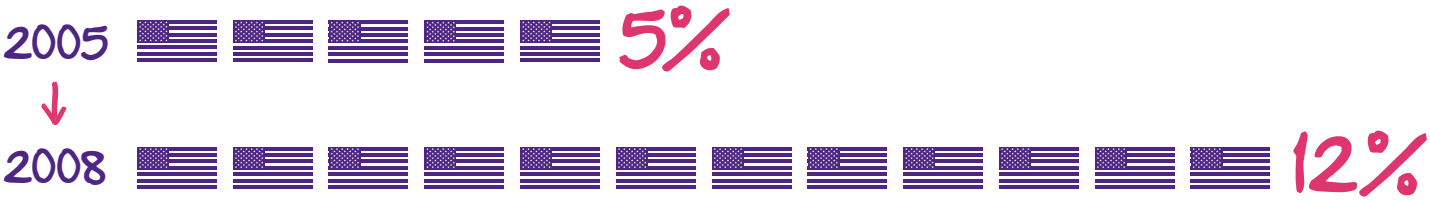
Combat deployments for military members – who are away from family and in risky or dangerous situations – may cause the onset of behavioral health conditions or exacerbate existing problems. The rate of behavioral health conditions among military personnel is significant, with serious consequences:

- Mental and/or substance use disorders caused more hospitalizations among U.S. troops in 2009 than any other cause.[11]
- More than 1,100 members of the armed forces died by suicide from 2005 to 2009 – an average of 1 suicide by a member of the armed forces occurred every 36 hours during that time.[12]

Any **illicit drug use**, including prescription drug misuse, among active duty personnel **more than doubled** between 2005 and 2008, going from 5% to 12%.*



Understanding Mental Health Problems in the Military

While serving our Nation, hundreds of thousands of soldiers face exposure to combat. These traumatic war experiences can have a direct effect on mental health. The most common mental health problems among active duty service members include post-traumatic stress disorder (PTSD) and depression.[13] These disorders tend to be chronic or long-lasting in duration, increasing the likelihood of adversely affecting military service.[14]

PTSD is an anxiety disorder associated with traumatic experiences, and can be linked with military deployment. Approximately 14 percent of service members returning from Iraq or Afghanistan meet the criteria for PTSD.[15] Post-traumatic stress disorder is a normal reaction for individuals who experience or witness a traumatic event. However, when these stress symptoms are severe and persistent, they can begin to interfere with daily and family life and have other more serious, negative consequences. Recognizing the key symptoms listed below can help people identify PTSD and promote early intervention and improvement of symptoms among military service members. They include:[16]

- **Reliving the event:** Repeated and upsetting memories of the event, repeated nightmares, flashbacks, and/or intense and upsetting reactions to "reminders" of the traumatic event.
- **Avoidance:** Attempts to avoid places, people, things, or thoughts that are associated with or serve as reminders

of the trauma; inability to remember important aspects of the trauma; reduced interest or participation in normal activities; feeling detached; emotional "numbing"; feeling like one has no future.

- **Arousal:** Trouble sleeping; irritability or anger outbursts; difficulty concentrating; feeling more aware (hypervigilance); having an exaggerated response to things that may startle someone.

Depression, a condition that involves feelings of sadness or low mood that last more than just a few days, is a common problem that can occur following trauma. For veterans, depression can be caused by painful memories and feelings about their war experiences.[17] It is estimated that 9.3 percent of veterans aged 21 to 39 have experienced at least one major depressive episode (MDE) in the past year.[18] An MDE, as defined in The Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), is a period of at least two weeks when a person experiences a depressed mood or loss of interest or pleasure in daily activities, and has at least four of seven additional symptoms as described in DSM-IV.[19] Among veterans aged 21 to 39 who experienced an MDE in the past year, more than half (51.7 percent) reported severe impairment in at least one of the following areas: home management, work, close relationships with others, or social life.[20] Additionally, the Veterans Affairs' National Registry for Depression estimates that 11 percent of veterans aged 65 and older suffer from MDE, a rate that is double that of the general population in that age range.[21]

According to the National Institute of Mental Health, symptoms of depression can include:[22]

- Persistent sad, anxious, or "empty" feelings;
- Feelings of hopelessness or pessimism;
- Feelings of guilt, worthlessness, or helplessness;
- Irritability, restlessness;
- Loss of interest in activities or hobbies that once were pleasurable;
- Fatigue and decreased energy;
- Difficulty concentrating, remembering details, and making decisions;
- Insomnia, early-morning wakefulness, or excessive sleeping;
- Overeating or appetite loss;
- Thoughts of suicide; and
- Aches or pains, headaches, cramps, or digestive problems that do not ease even with treatment.

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Understanding Substance Use Disorders in the Military

While substance use disorders are not as pervasive as mental health problems among military populations, they are still a major health concern.[23] Alcohol misuse is the most prevalent problem. According to a recent publication, 27 percent of Army soldiers met criteria for alcohol misuse three to four months after returning from deployment to Iraq.[24] Additionally, there is a significant need to monitor and reduce prescription drug abuse in the military. From 2005 to 2008, prescription drug abuse nearly tripled among U.S. military personnel.[25]

It's important to monitor for signs and symptoms of substance use disorders and to prevent the misuse of alcohol and/or drugs. Individuals, families, and members of the military community should be aware of the following signs and consequences associated with substance use:

- Failure to fulfill major personal and professional obligations;[26]
- Recurrent use of substances in situations in which they are physically hazardous;[27]
- Recurrent alcohol or substance-related legal problems;[28]
- Persistent or recurrent social or interpersonal problems caused or exacerbated by the effects of alcohol or substance use, while this use often continues without stopping;[29]
- Mood and behavior problems;[30]
- Work-related/financial difficulties;[31] and
- Hurt social relationships.[32]

In 2008, the suicide rate in the Army exceeded the suicide rate among the civilian population for the first time (20.2 out of every 100,000 suicides, vs. 19. 2 out of every 100,000 for civilians).[33] Additionally, drug or alcohol use was involved in 30 percent of suicide deaths of Army members from 2003 to 2009 and in more than 45 percent of non-fatal suicide attempts from 2005 to 2009.[34] The Department of Veterans Affairs offers many resources for those at risk of suicide, or those having suicidal thoughts. The Veterans Crisis Line (800-273-8255) provides veterans, their families, and their friends with an anonymous chat service with trained counselors who can provide further counseling and referral services for those who need it.

To further address these conditions, government agencies, researchers, public health agencies, and others are working to adapt and test proven alcohol and substance-use prevention and treatment interventions for use with military and veteran populations and their families.[35]

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Co-occurring Disorders

It is important to note that mental and/or substance use disorders can happen at the same time, which is called a co-occurring disorder.[36] These disorders affect the military in large numbers.[37] Also, two or more mental health problems can occur at the same time. Among the 25 percent of military personnel discharged between September 2001 and September 2005 who received a mental health diagnosis, approximately 56 percent were diagnosed with two or more mental disorders.[38] To effectively treat co-occurring disorders, an integrated treatment program is needed. This helps coordinate mental health and substance use interventions, allowing health professionals to treat the whole person and address all issues at the same time.[39]

The Extended Impact on Families

In the United States, there are approximately 700,000 military spouses, and more than 700,000 children have experienced the deployment of a parent.[40] Military families play an active role in the recovery of a relative's disorder, while at the same time they may also experience difficulties dealing with situations that can arise due to a family member's deployment, injury, or death.

Families of military personnel can directly experience both the emotional and physical effects of behavioral health conditions, particularly during their loved one's long absence(s). Studies show that parental deployment has a cumulative effect on children, while prolonged deployment is associated with more mental health diagnosis among U.S. Army wives.[41, 42] The effects of deployment are significant, as evidenced by the following findings:

- Children of deployed military personnel have more school, family, and peer-related emotional difficulties, compared with the civilian public;[43]
- Women whose husbands have been deployed for 1 to 11 months are diagnosed with more depressive disorders, sleep disorders, anxiety, and acute stress reaction and adjustment disorders than those whose husbands are not deployed;[44]
- For children who were between ages 3 and 8 when a parent was deployed, 19 percent showed an increase in behavioral issues while their parent was gone;[45] and
- In 1 year, 34 percent of caregivers in military families reported that their children experienced moderate to high levels of emotional and behavioral problems, compared with 19 percent of all youth nationally.[46]

To prevent the onset of these issues, families need to identify the signs of mental and/or substance use disorders among loved ones – and monitor for symptoms even after a parent or spouse returns home. Reintegration challenges exist for children, including increased attachment behavior when parents return, compared with children whose parents have not recently been deployed.[47] Like recovery, reintegration for both the military personnel and the family members is a journey that takes time and effort.

Targeted Outreach

Address Prejudice to Help Military Members on the Road to Recovery

Social prejudice, or fear of being exploited or judged for mental and/or substance use disorders, can interfere with the desire of individuals with behavioral health conditions to seek treatment and support. Despite the growing need for treatment, this problem is more pronounced among military populations, who often fear they may be construed as "weak" or "cowardly" if they seek help for a mental and/or substance use disorder, and many fear the disapproval of peers.[48, 49]

For example, in 2008, approximately 12.9 percent of all military personnel – including Army, Navy, Marine Corps, Air Force, and Coast Guard personnel – believed that if they were to seek mental health counseling through the military, their careers would be damaged.[50] Considering these sensitivities, command and medical interventions are alternative ways the Army can identify those in need of help or treatment.[51]

Perception about behavioral health issues can change, however, and research shows that the most effective way of countering prejudice and discrimination is by sharing one's personal experiences with others.[52] Military personal, as well as their families, can take comfort in the fact that 84 percent of Americans believe individuals with mental illnesses are not to blame for their conditions.[53] Additionally, more than 80 percent say that they wouldn't think less of a friend or relative if they discovered that person is in recovery from a mental or substance use disorder.[54] It is important to increase access to and understanding of treatment and behavioral health interventions among military communities, and to encourage people who are concerned about mental or substance use disorders to seek the help they need.

Over the years, SAMHSA has been active in its efforts to lead conferences and policy academies that have strengthened State-level behavioral health systems and ensured that needed behavioral health services are accessible to the Nation's service men and women and their families. These policy academies have been done in conjunction with the National Association of State Mental Health Program Directors and the National Association of State Alcohol and Drug Abuse Directors.

In addition, a U.S. Department of Labor project, entitled "America's Heroes at Work," addresses employment challenges of returning service members living with traumatic brain injury (TBI) and/or PTSD. Designed for employers and the workforce development system, this service provides information and tools to help returning service members affected by TBI and/or PTSD succeed in the workplace, particularly service members returning from Iraq and Afghanistan

Opportunities for Prevention, Treatment, Recovery, and Support

Although soldiers may be reticent to seek behavioral health care, they are required to be assessed annually by a primary care provider.[55] The primary care setting provides a recognized opportunity for early identification and treatment of physical symptoms associated with behavioral health conditions among active duty soldiers. The same is true for veterans: returning Iraq and Afghanistan veterans with a mental health diagnosis, particularly PTSD, use significantly more non-mental health medical services than do veterans without a mental health diagnosis. This points to the need to ensure outpatient, inpatient, and emergency care services for veterans.[56]

Proper prevention and intervention techniques offered in primary care settings can have long-lasting benefits. In fact, appropriate prevention, intervention, treatment, and recovery support services decrease the incidence of both mental and/or substance use disorders and help active duty and reservist military personnel and veterans lead healthy lives.

Targeted Outreach

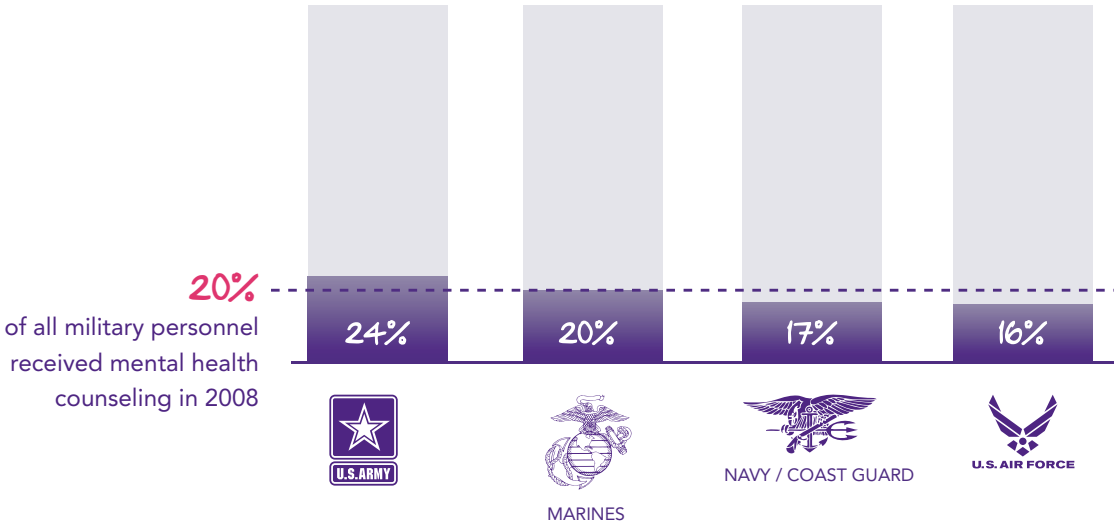
With this in mind, many States have policies in place to respond to the needs of veterans, and in 31 States, substance use disorder treatment providers are required to screen for veterans' mental health status. Additionally, in 40 States, health care providers screen patients to determine if they need mental health assessments.[57]

The Department of Defense (DOD) and U.S. Department of Veterans Affairs (VA) promote the integration of behavioral health and primary care. For example, the Army instituted a model of care called RESPECT-MIL (Re-Engineering Systems of Primary Care Treatment in the Military), which requires primary care screening for all service members and offers treatment in that setting. This helps reduce prejudice, improves access to high-quality behavioral health services, and provides a proven "best practice" for treating depression and PTSD.[58]

Recovery Month events exemplify how members of the community embrace people in recovery. Learn how to host an event or find an event near you at ***http://www.recoverymonth.gov.***

The VA has devoted $37.7 million to placing psychiatrists, psychologists, and social workers within primary care clinics.[59] This enables these health professionals to observe and intervene on any mental or substance use disorder issues and allows for brief treatment for those who may not require specialty care.[60] The VA has also recruited more than 3,800 new mental health employees, including 800 psychologists.[61]

Mental Health Counseling Rates Among Armed Service Branches**



With the help of treatment and the support of family and friends, those in the military can and do overcome mental and/or substance use disorders and sustain happy, healthy, and productive lives. Of the millions of individuals in pursuit of recovery, military members form a significant portion of this population.

Targeted Outreach

Many military personnel, veterans, and their families take advantage of the multiple pathways to recovery. They are not alone on their journey. Recovery support services are an integral part of sustaining recovery post-treatment. For more information on recovery support services, refer to the "Treatment and Recovery" document in this toolkit. For more information on SAMHSA resources that make a difference in military communities, refer to the below resources:

- The Veterans Suicide Prevention Helpline (800-273-8255) ensures that veterans in emotional crisis have free, 24/7 access to trained counselors.
- Jail Diversion and Trauma Recovery – Priority to Veterans is a program that encourages diversion of veterans in the justice system with mental and/or substance use disorders from jail to community services.
- The National Child Traumatic Stress Network was established to improve access to care, treatment, and services for children and adolescents exposed to traumatic events.

Peer support resources are social support services designed to fill the needs of people in or seeking recovery.[62] There are additional resources for veterans that show the value of peer support, including:

- Vets4Vets – a national, nonprofit veteran organization that organizes peer support groups for Iraq- and Afghanistan-era veterans to help them feel good about themselves and heal from any negative aspects of service and war.
- Vet-to-Vet – an alliance of family members, professionals, and other mental health consumers who work together to improve and increase mental health services through community education and service.
- Iraq & Afghanistan Veterans of America – an organization that addresses critical issues facing new veterans and their families.

Make a Difference During *Recovery Month* and Throughout the Year

This September and throughout the year, SAMHSA encourages all friends and family members to become involved in ***Recovery Month*** and help people with behavioral health conditions. You can:

- **Educate others about behavioral health conditions.** If you are an active member of the military, a reservist, a veteran, or a family member, it is important to spread your knowledge about mental and/or substance use disorders. Educating others will help reduce the prejudice and misconceptions surrounding these conditions and promote the effectiveness of prevention and treatment, reminding people that recovery is possible.
- **Learn the signs of mental and/or substance use disorders, listed in this document.** Encourage individuals who are in need of services to seek the appropriate help.
- **Celebrate *Recovery Month*.** Plan an event and encourage others to participate. If you live on a military base, a ***Recovery Month*** event is a great way to provide mental and/or substance use disorder information to others, and can serve as the first step to help someone acknowledge their problem.

Targeted Outreach

It's Worth It

Millions of military officials, veterans, and their families have demonstrated their ability to overcome behavioral health conditions and lead healthy, productive lives in recovery. This year's ***Recovery Month*** observance highlights why recovery is worth it for all individuals, and educates communities, especially those in the military at home and abroad, that prevention works, treatment is effective, and people recover.

Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals, including family members, can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website** – Leads efforts to reduce the impact of substance use and mental disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour, free and confidential treatment referral and information about mental and/or substance use disorders, prevention, treatment, and recovery in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour hotline available to anyone in suicidal crisis or emotional distress.
- **Veterans Crisis Line, 1-800-273-TALK (8255)** – Connects veterans in crises and their family and friends with VA responders through a confidential, toll-free helpline and online chat.
- **United States Department of Veterans Affairs – Mental Health** – Maintains and improves the health and well-being of veterans through health care, social services, education, and research.
- **Army Substance Abuse Program (ASAP)** – Provides guidance and leadership on alcohol and drug abuse prevention, education, and training programs for soldiers and their commanders.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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JOIN THE VOICES FOR RECOVERY It's Worth It

RECOVERY AMONG PEOPLE IN THE JUSTICE SYSTEM

People with mental and/or substance use disorders involved with the justice system face many challenges on their path to recovery, such as misconceptions, shortages of treatment, and difficult transitions. However, there are many effective prevention services, treatments, and supports specifically designed for individuals involved in the criminal justice system. These options should bring hope and promise to their journey of recovery.

Many people in the justice system, including incarcerated individuals and those recently released from jail or prison, have experienced the effects of behavioral health conditions, which include both mental and substance use disorders. In 2005, approximately three-fourths of people in State prisons (74 percent) and local jails (76 percent) with a mental health problem met the clinical criteria for substance dependence or abuse.[1]

To address these problems, a continuum of care supports individuals in the criminal justice system before, during, and after incarceration. Some effective initiatives include drug and mental health courts, jail diversion programs, counseling interventions, medically assisted treatment, cognitive therapy, correctional therapeutic communities, and community reentry programs that include drug treatment and recovery support. These and other efforts provide support for people and families who need help for mental and/or substance use disorders.

Today, 66 percent of Americans believe that treatment and support helps people with mental health problems lead normal lives.[2] In addition, approximately 75 percent of people in the United States believe that recovery is possible from dependence on substances such as alcohol, prescription drugs, and marijuana.[3] Guided by this widespread community support, people in recovery have found solutions to manage their conditions and inspire others to follow their lead in living healthy lives.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, while contributing in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

Targeted Outreach

CHARLES B. THORNTON

Director, The Mayor's Office on Returning Citizen Affairs
Washington, DC

As a talented point guard in high school, I had tremendous opportunities in front of me. However, the lure of the streets, with their promise of easy money, peer pressure, nightlife, alcohol, and drugs, was simply too much to overcome.

And so began an 11-year revolving door odyssey in and out of jail for typical drug user offenses. I was a poster child for recidivism. In 1990, I was again paroled and everyone, including me, believed that I would be back in jail in short order. However, in less than 1 year, I completely turned my life around and was irreversibly moving in the right direction.

Unlike before, I tapped into a combination of public-private services, training, and mentoring programs. This was the essential difference! Programs such as Alcoholics Anonymous and Narcotics Anonymous provided guidance, direction, and moral support in addressing my underlying addictions. My sponsor provided temporary Oxford-model housing, which both physically removed me from a risky environment and provided mentoring support. Home was truly a safe place.

I was hired for my first real job as a building maintenance worker, which provided the foundation for my career. Additional study and licensing put me in a position to work as chief building engineer at three different companies. I've since worked as a real estate agent, developer, entrepreneur, and currently, in the non-profit sector.

I now enjoy the love, support, and respect of my family and friends. I have rebuilt my relationship with my high-school sweetheart, and now the same two teenagers who brought a little girl into this world in 1978 are married, responsible adults. I'm active in a spiritual program, and most importantly, support multiple community recovery organizations and volunteer at the Department of Corrections.

As I've been able to quietly, and without fanfare, give back to my community tenfold, I am ever mindful of that spiritual axiom that states that "from those who have received much, much is expected."

Recovery Month supports many of SAMHSA's Strategic Initiatives, which guide SAMHSA's work to help people with mental and/or substance use disorders and their communities and families. SAMHSA works to prevent costly behavioral health conditions and promote overall health and well-being for all Americans. SAMHSA's Trauma and Justice Strategic Initiative is dedicated to reducing the behavioral health impact of trauma and addresses the needs of people with mental and/or substance use disorders and those with histories of trauma within the criminal and juvenile justice systems.

This document details the need for recovery support services for people and their families involved in the criminal justice system, identifies challenges that exist, outlines solutions to those challenges, and provides action steps to facilitate recovery. Refer to the "Join the Voices for Recovery" document in this toolkit to learn about real-life recovery journeys from a mental and/or substance use disorder.

Targeted Outreach

Behavioral Health Conditions in Criminal Justice Populations

The need for treatment for mental and/or substance use disorders among people involved with the criminal justice system is critical.

Prison Populations who Experienced Mental Health Problems in 2005 *

78,800

45%

of Federal Prison Population

705,6004

56%

of State Prison Population

79,900

64%

of Local Jail Population

In 2009, between 60 percent and 80 percent of adult males aged 18 to 49, under the supervision of the criminal justice system, had a substance use related issue.[4] People may face serious adjustment problems while incarcerated or upon leaving, as a result of incarceration. These numbers illustrate the distinct public health problem in the criminal justice system – hundreds of thousands of inmates and recently released individuals are in need of mental and/or substance use treatment and support services.

Many people who are impacted by mental and/or substance use disorders and involved in the criminal justice system are young adults or adolescents, making it important to acknowledge behavioral health conditions early and obtain treatment and support before problems deepen. Evidence shows that youth who had been in jail or a detention center were more likely to have used illicit drugs, alcohol, or cigarettes in the past year than youth who had never been in these facilities.[5] A recent study found that substance abuse or dependence in the past year was almost three times higher among youth who had been in a jail or a detention center at least once in their lives than among youth who had not.[6]

Pursuit of Recovery

Treatment and recovery support services offered by providers and peers are delivered during different stages for people in the criminal justice system. For example, services can be provided prior to incarceration (e.g., jail diversion and drug courts), in criminal justice facilities (e.g., treatment and recovery services, peer support), and post-release (e.g., transitional, peer support, and community-based services).

Targeted Outreach

Pre-incarceration services:

SAMHSA's Jail Diversion Program for Adults diverts individuals with mental illness (and often co-occurring substance use disorders) from the criminal justice system to community-based treatment and recovery-related services.[7] Jail diversion programs are seen as a humane solution to the criminalization and inappropriate incarceration of individuals with mental and/or substance use disorders.[8] Diverting appropriate individuals from jail to community-based mental health treatment has potential benefits to the criminal justice system, the community, and the individual.[9]

Additionally, drug courts are an example of successful collaborations among treatment, justice, and public health systems that share goals to reduce criminal behavior, improve delivery of treatment services, and encourage better productivity and independence from social services and the health system.[10] Proven to lower incarceration rates, drug courts are based on the understanding that substance use is a chronic, progressive, and relapsing disorder, but with the right resources and support, it can be successfully treated.[11, 12]

Drug courts promote a seamless path to recovery. They can:[13]

- Identify individuals in need of treatment and referral to treatment shortly after arrest;
- Diagnose a defendant's treatment needs;
- Match the defendant's need to specific treatment approaches;
- Review the defendant's progress;
- Hold defendants accountable using sanctions and rewards; and
- Provide aftercare and support services following treatment completion.

Similarly, mental health courts have recently been established in response to the growing number of people with serious untreated mental illnesses who are charged with minor crimes. Under a judge's supervision, mental health courts work with attorneys and mental health service providers to provide eligible defendants with alternatives to jail sentences, including mental health treatment and community-based supervision.[14]

Other services prior to incarceration may include probation with treatment options for behavioral health issues and incentives for improvement. Another option is restrictive community sentences in lieu of incarceration, including military-style boot camps, intensive supervised probation, correctional halfway houses, day-reporting centers, and home detention.[15]

In-facility services:

The availability of treatment and recovery services varies across correctional facilities, and the extent of these services is often limited. However, many jails provide services such as drug and alcohol awareness education and mental health and suicide screenings.[16]

Targeted Outreach

There are also alternative treatment options to help inmates. SAMHSA's Roadmap to Seclusion and Restraint Free Mental Health Services identifies low-cost ways to encourage recovery, including:[17]

- Comfort rooms, which are spaces in criminal justice facilities that are designed to help people relax;
- Development of personal safety plans, which document activities that comfort inmates (such as listening to music or reading), as well as the "triggers" that stress them; and
- Positive daily interactions between staff members and treatment recipients, which offer an opportunity to extend care and compassion.

Even if they are provided for a limited amount of time, certain jail-based support services are very effective for individuals in the criminal justice system. Job interview preparation, orientation to community resources, and financial management workshops can be offered in just a day, providing beneficial information for inmates who will soon reenter the community.[18]

Contingency management is also an effective method of offering rewards for attendance at counseling sessions or for negative drug tests. Rewards include institutional privileges, reduced program requirements, or goods and services that support a crime-free lifestyle.[19]

To support individuals reentering the community, the National GAINS Center developed the Assess, Plan, Identify, and Coordinate (APIC) model to aid in transitional planning. Although the model is targeted toward individuals with co-occurring disorders, the principles can be applied to all inmates with mental health or substance use disorders:[20, 21]

- **Assess** the inmate's needs and public safety risks;
- **Plan** appropriate treatment and services to address these needs and risks;
- **Identify** community and correctional programs responsible for post-release services; and
- **Coordinate** the transition plan to ensure implementation and minimize gaps in care.

Post-incarceration services:

In addition to treatment in prison, research shows that continuing treatment in the community is needed to sustain a positive direction. Following prison-based treatment with community-based treatment upon release reduces the risk of recidivism, decreases substance abuse, improves employment prospects, and increases positive social behaviors. Also, case management and referral to other medical, psychological, and social services are key treatment components for many individuals involved in the justice system.[22]

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The road to recovery can begin in prison or jail and is aided by peer support services, led by family, friends, or members of the recovery community. For instance, in structured forensic peer specialist programs, trained peer specialists with histories of mental illness and criminal justice involvement help those with similar histories. These peer guides instill hope and offer credible models of the possibility of recovery. Their services are offered in more than 30 States and include:[23]

- Sharing their experiences of returning from jail or prison to the community, and modeling the ways they advanced their recovery;
- Helping people let go of negative attitudes, beliefs, and behaviors learned as survival techniques in prison;
- Sharing their experiences in finding jobs and housing;
- Providing information on the rights and responsibilities of prisoners returning to the community;
- Providing support by accompanying people to their initial probation meetings or treatment appointments; and
- Working alongside professional staff and training professional staff on how to engage people with a history of interaction with the criminal justice system.

The recovery journey doesn't have to be lonely. Peer support services demonstrate that others understand and have experienced the benefits of recovery from mental and/or substance use disorders and can share their recovery stories to help others. Positive reinforcement can help people recognize progress made.[24]

Many support groups such as Alcoholics Anonymous, Narcotics Anonymous, and Dual Recovery Anonymous are open to all individuals with behavioral health conditions, including those mandated to attend through court orders. Local groups meet across the country and are open to anyone who wants to overcome a mental and/or substance use disorder. Often, these programs are based on "Twelve Steps" that help members accept, address, and overcome behavioral health conditions. One of the main components of peer support groups such as these is encouraging an environment of mutual understanding, which is very powerful for individuals seeking to live in recovery. There are also peer support groups such as Al-Anon and Nar-Anon for family members and friends of an individual with a substance use disorder. Mental health organizations such as the National Association on Mental Illness (NAMI) also have peer support groups for family members as well as the individual with a behavioral health condition.

Given the unique challenges and barriers often faced by individuals involved in the justice system, some communities have peer support programs for people who are overcoming both substance use disorders and past criminal justice involvement. Community-based services also provide some portions of the jail population the opportunity to live, work, and receive treatment services in the community, often at contracted halfway houses, in pre-release facilities, or at home under monitoring surveillance.[25] These programs give individuals the chance to access treatment services in a structured environment while reintegrating into the community and connecting with their families.

Transition services can also help individuals adjust to community life after serving a prison or jail sentence. These programs help people find treatment and recovery services, housing, and employment and provide individuals with the skills to make a meaningful impact within their families and the community.

Targeted Outreach

Challenges to Receiving Treatment and Ways to Overcome Barriers

Effective addiction treatment has been shown to: **

- Decrease an individual's future drug use and drug-related criminal behavior
- Improve family relationships
- Increase prospects for employment

As the rate of incarceration has risen in recent decades, the country's prisons have become overcrowded, leading to reduced screening, monitoring, and managing of inmates.[26] Statistics show that only 10 percent of individuals in need of treatment for a substance use disorder within the criminal justice system actually receive treatment as part of their justice system supervision.[27] In addition, screening for behavioral health conditions is increasingly difficult because of prison population growth, as is allocating the necessary resources to treat them.[28]

While there are constraints to the accessibility of behavioral health services, research shows that facilities offering treatment services in specialized settings lead to better outcomes for offenders, as measured by drug use and arrests post-release.[29] SAMHSA participates in the effort to support community-based services through its Jail Diversion Program, which seeks to redirect individuals with mental illness from the criminal justice system to more appropriate treatment and recovery support services, including primary health care, housing, job, and counseling services. To date, SAMHSA grantees have conducted more than 79,000 screenings and diverted more than 3,300 people with mental illness from jail to community treatment services.[30]

Once released, people involved with the justice system have an opportunity to reclaim their lives and live successfully, and many are already doing so. However, barriers extend beyond the realm of the prison walls, and the path to recovery is difficult for many individuals who have been involved with the criminal justice system. For instance, about two-thirds of individuals who are re-incarcerated report active substance use within the six months prior to re-incarceration.[31] Because of these challenges, a growing number of correctional facilities are recognizing that helping inmates successfully return to their communities is beneficial to individuals, families, and communities.[32]

The following are some of the challenges and solutions for individuals with mental and/or substance use disorders who are in the criminal justice system.

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Challenge: Social withdrawal, social misconceptions

Individuals involved with the justice system may feel a diminished sense of self-worth and personal value.[33] This may lead to social withdrawal, when inmates disconnect themselves from others,[34] rendering social support and inclusion an important component of the recovery process and reentry to a community. In addition, the general prejudice of being incarcerated exacerbates issues of withdrawal and encourages ex-offenders to hide their past problems.

Fear of being judged for mental and/or substance use disorders often reduces the desire of individuals with behavioral health problems to seek treatment. Prejudice and discrimination are major barriers to recovery for people who have mental and/or substance use disorders, including those in the justice system.[35] They: [36]

- Reduce access to resources and opportunities – such as housing, employment, and community participation; and
- Contribute to feelings of low self-esteem, isolation, and hopelessness.

Providing Some Solutions

- SAMHSA's Resource Center to Promote Acceptance, Dignity, and Social Inclusion (ADS Center) helps build support and restore dignity for many who face discrimination or prejudice, including those involved in the criminal justice system. The ADS Center states that recovery can mean being able to hold down a job, go back to school, and have a close relationship with family and friends. It is a feeling of responsibility for one's life and a sense of control over one's problems.[37]
- The Legal Action Center (LAC) is an organization devoted to fighting discrimination against people with criminal records, as well as those with behavioral health conditions. The organization works to help these individuals fully participate in society while maintaining their dignity. To aid these efforts, the LAC helps people with criminal records access employment services and provides legal counseling to individuals with substance use disorders, as well as encourages sentencing reform and criminal justice community advocacy.
- The American Civil Liberties Union (ACLU) works to defend targets of discrimination, including those in the criminal justice system and ex-offenders. The organization promotes policies that ensure individuals are treated equally. The many local chapters within the ACLU help to address cases of injustice in communities across the country.

Challenge: Transitioning from prison or jail

In 2010, an estimated 1.5 million adults aged 18 or older were on parole, probation, or other supervised release from prison at some time during the past year.[38] While reentering society upon release from prison and jail is challenging, support from friends and family, as well as other available resources, can help people integrate back into their neighborhoods and communities. It's important to recognize that individuals who are on parole or supervised release are at increased risk for behavioral health conditions – an estimated 27 percent of these adults were current drug users.[39] Although these individuals are more likely than the general population to receive some mental health treatment, they are also most likely to report an unmet need for mental health treatment.[40] This finding highlights the importance of behavioral health treatment and recovery services among the criminal justice population.

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When services are available to these individuals, the benefits are widespread. Better outcomes are associated with treatment that lasts longer than 90 days, with the greatest reductions in drug abuse and criminal behavior attributed to those who complete treatment.[41] Similarly, individuals involved in the criminal justice system who were treated by evidence-based interventions, including cognitive-behavioral therapy, learned social and coping skills, approaches to reinforce behavioral change, and motivational enhancement to increase treatment engagement.[42]

However, fully capitalizing on these services comes with some challenges. While seeking treatment and recovery, individuals may be confronted with pressures to find stable housing and employment, which can complicate their recovery process.

Furthermore, individuals may be subject to other emotional factors. Stress, a feeling of emotional and physical tension,[43] can also impact a person's recovery following release from jail or prison and may ultimately lead to relapse.[44] For those transitioning from jail or prison, stress can be induced by a variety of reasons, including reuniting with family members, securing housing, daily decision-making, and complying with criminal justice supervision requirements.[45]

Providing Some Solutions

To address these challenges, individuals and their families and friends can turn to transitional services, which are offered to help ease the adjustment from prison or jails back to the community. Transitional services are provided in the community to assist recently released individuals and have been shown to improve individuals' reentry into society post-release. For example:

- SAMHSA's Ex-Offender Re-Entry Program helps individuals formerly in the criminal justice system access treatment and services in alternate settings to jails and prisons. The program awards grants to provide screening, assessment, and comprehensive treatment and recovery support services to offenders reentering the community.
- The U.S. Department of Justice's National Reentry Resource Center provides education, training, and technical support to government, service providers, correctional facilities, and nonprofit organizations focused on prisoner reentry. The Resource Center's website includes a database of the programs that receive assistance, many of which are dedicated to behavioral health services.
- The process of finding housing and employment is often overwhelming for individuals in the criminal justice system. To address these challenges, the National Institute of Corrections supports the Transition from Prison to Community (TPC) and Transition from Jail to Community (TJC) projects. These projects drive collaboration between public, private, and community agencies to offer resources to transitioning individuals, as well as develop effective preparations for release.[46]
- A program coordinated by the Council of State Governments Justice Center, the Criminal Justice/Mental Health Consensus Project, helps improve services offered to individuals in the criminal justice system with mental health problems, including local, State and Federal policymakers, and criminal justice and health care professionals. The program also maintains an online database of joint criminal justice and mental health services across the country.
- SAMHSA offers both a substance abuse treatment locator and a mental health services locator as a source of information for people seeking treatment for themselves or for someone else.

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Additionally, it is important to be prepared for any roadblocks that can be stressful. Managing stress includes placing an emphasis on physical health, nutrition, and emotional support.[47] Other elements of stress management include making an effort to socialize, taking regular breaks, and finding positives in negative situations.[48] Healthfinder.gov offers an extensive database of information and tools to help individuals stay healthy. The site includes health news, tips, and listings of services in local communities.

Recovery is Worth it for People in the Criminal Justice System

Through ***Recovery Month***, many more people will become aware of the opportunities that make recovery possible, and will learn about the successful recovery journeys of others. SAMHSA defines recovery as a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.[49]

Once a person begins to live in recovery, he or she may need to reach out to others for guidance and support. People in the criminal justice system can take their first steps of recovery by:[50]

- Recognizing that they have a disorder and that it is a treatable problem;
- Asking family members for help beginning a treatment program;
- Asking a court or probation officer about getting help with mental or substance use disorders; and
- Asking a lawyer or a court officer about local programs.

There is no "single solution" for how to address mental and/or substance use disorders, but for every individual, every step is worth it.

Make a Difference During *Recovery Month* and Throughout the Year

This September and throughout the year, SAMHSA encourages all people involved in the criminal justice system to participate in ***Recovery Month***. To make a difference in someone's life:

- **Provide information about local reentry programs and resources** to individuals reentering the community. As a family member, friend, probation officer, or legal counsel to someone in the criminal justice system, consult the U.S. Office of Justice Program State Activities and Resources database to locate available resources to ease the transition from jail or prison back to the community.
- **Act as a supportive figure** to friends or family who are incarcerated, on probation, or on parole by listening to and understanding their challenges, monitoring for signs of mental and/or substance use disorders, and encouraging them to seek recovery support services, if necessary. Refer to the "Overview: It's Worth It" document in this toolkit to learn about potential signs.
- **Share your story** if you were involved in the criminal justice system and are now in recovery from a mental and/or substance use disorder. Help others learn about treatment and recovery options, as well as provide support and encouragement for those just beginning their journey. Letting others know they are not alone has a profound effect on an individual's will to live in recovery.

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Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour, free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to counteract prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Federal Bureau of Prisons** – Provides progressive, safe, and humane care for Federal inmates. It offers mental health services, substance abuse treatment, and other self-improvement opportunities.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

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JOIN THE VOICES FOR RECOVERY It's Worth It

FAMILIES AND FRIENDS CAN MAKE A DIFFERENCE

For millions of people, having a solid support system is essential for their recovery from a mental and/or substance use disorder. People of all ages who have behavioral health conditions are just like those with other treatable conditions – deserving of empathy, compassion, and respect.[1] Encouragement from peers, loved ones, colleagues, and the community where they live can have a significant impact on people's overall health and well-being in recovery.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery is sometimes difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

Recovery Month aligns with SAMHSA's Recovery Support Strategic Initiative, which partners with people in recovery as well as family members to promote individual, program, and system approaches to building recovery and resilience. Family and friends make a difference by offering support, reassurance, companionship, and emotional strength. They share the message that treatment and recovery support services are available and help their loved ones find a recovery program that meets their individual needs.

This document provides tips for recognizing the signs of a behavioral health condition and encouraging a positive change in the life of someone you know, while learning ways you can cope with your loved one's condition.

Targeted Outreach

Targeted Outreach

ORYX COHEN

Technical Assistance Center Director, National Empowerment Center
Lawrence, MA

In the fall of 1999, at age 26, I had my first of two major spiritual and emotional life crises. I had just moved 3,000 miles from my familiar life in Oregon to attend graduate school in Massachusetts and reinvent myself. One week later, after little sleep and several strange experiences, I totally lost grip on physical reality. I even convinced myself that I could fly my car, leading to a near-fatal car crash where I was air-lifted to the nearest trauma unit.

Soon afterwards, I was thrust into a system that didn't see me as a whole person with a story to tell. Instead I was a collection of symptoms, a diagnosis. For me, this just piled additional trauma onto the traumatic experiences I was already having.

The major pieces of my recovery have been peer and family support, sleep, reading literature about recovery, exercise, holistic alternatives, diet, and having meaningful work helping others. Recovery is a very individual process, and some strategies work for some but not others. I found it was helpful to try different alternatives like yoga, acupuncture, Reiki, and meditation to see what worked best.

Because of strong family support, I was able to leave the hospital system fairly quickly and begin slowly rebuilding my life. I returned to graduate school and earned my master's degree in public administration. After graduating, I co-founded the Freedom Center and currently work with the National Empowerment Center. Now, I'm married, a homeowner, have two young children, and have been fully recovered for 10 years.

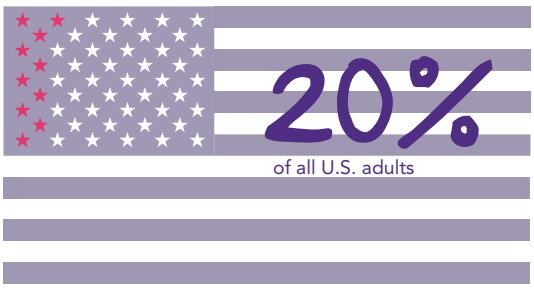
Recognize Mental Health Problems

While most people believe that mental health problems are rare,[2] these conditions are, in fact, common.

In 2010, there were an estimated

45.9 million =

adults aged 18 or older in the United States with any mental illness.*



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In 2010, 1.9 million youths aged 12 through 17 (8 percent of the youth population) in the United States experienced a major depressive episode.[3] Furthermore, the Centers for Disease Control and Prevention (CDC) recently projected that nearly half of Americans will develop at least one mental health problem during their lifetime.[4]

Remember that you are not responsible for and did not cause the mental or substance use disorder of a family member or friend. However, it is important to learn about the recovery process so you can help your loved one. It's also valuable to be able to recognize the signs of mental health problems, which vary by age group, so you can be alert to any new changes:[5, 6]

- **Young children:** Changes in school performance; poor grades despite strong efforts; excessive worry or anxiety; hyperactivity; persistent nightmares; persistent disobedience or aggression; and frequent temper tantrums.
- **Older children and pre-adolescents:** Substance use; inability to cope with problems and daily activities; changes in sleeping and/or eating habits; excessive complaints of physical ailments; defiance of authority; truancy, theft, and/or vandalism; intense fear of weight gain; prolonged negative mood, often accompanied by poor appetite or thoughts of death; and frequent outbursts of anger.
- **Adolescents:** Feelings of sadness, hopelessness, or worthlessness; prolonged grief after a loss or death; excessive feelings of anger or worry; alcohol or drug use; exercising, dieting, or binge-eating obsessively; hurting others or destroying property; doing reckless things that may result in self-harm or harm to others.
- **Adults:** Confused thinking; prolonged depression (sadness or irritability); feelings of extreme highs and lows; excessive fears, worries, and anxieties; social withdrawal; dramatic changes in eating or sleeping habits; strong feelings of anger; delusions or hallucinations; growing inability to cope with daily problems and activities; suicidal thoughts; denial of obvious problems; numerous unexplained physical ailments; and substance use.

If your friend or family member tells you that he or she has a mental health condition, the following tips can help you offer support:[7]

- Express your concern and support;
- Ask about how he or she is managing, and really listen to the answers to show an interest in continuing the conversation;
- Ask what you can do to help. You can leave this open-ended or help the person create options for addressing his or her needs;
- Offer to help your loved one with errands or everyday tasks. However, be careful not to make the person feel powerless or incapable of managing his or her life; Reassure your loved one that you care about him/her, and include him or her in your everyday plans, such as going out to lunch, seeing a movie, or exercising; and
- Find out if the person is getting the care that he or she needs and wants. If not, offer your help in identifying and getting the necessary support.

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Some friends or family members may not share that they have a mental health condition, but you can still offer support and encouragement. For example, if you suspect a loved one is suffering from depression, consider the following:[8]

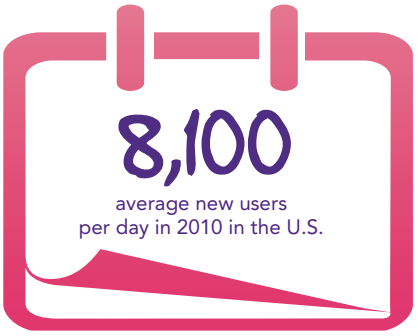
- Start by learning about their condition – in fact, sometimes you may notice the signs of a behavioral health condition before your loved one does.
- Although it may be difficult to figure out where to begin, think about ways you can start the conversation. It's important to remember to talk to loved ones in language they will understand, even if they are in a depressed state of mind. For instance, you can say, "You are not alone in this. I'm here for you" or "I have been feeling concerned about you lately."
- Encourage loved ones to admit they have a condition, an essential step to recovery, and help them understand the necessity of seeking treatment.
- If a loved one resists treatment, suggest scheduling a check-up with a general physician, or offer to accompany the person to an appointment.

You can also visit SAMHSA's What a Difference a Friend Makes website to watch an interactive video that shares tips on how to support a friend who is living with a mental illness. The website also provides additional resources that emphasize the positive impact a friend's caring and understanding can have on a person with a mental health problem.

Recognize Substance Use Disorders

Like mental health conditions, substance use disorders affect families of every race, ethnicity, socio-economic status, and location.

First-time Illicit Drug Users Over The Age Of 12**



= 3 million per year

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Learn the signs of substance use and misuse to help recognize the problem, so you can encourage your loved one to seek treatment and recovery support services. The following are signs that a friend or family member may be abusing drugs:[9]

- **Physical signs:** Bloodshot eyes or pupils larger or smaller than usual; changes in appetite or sleep patterns; sudden weight loss or weight gain; deterioration of physical appearance or personal grooming habits; unusual smells on the breath, body, or clothing; and tremors, slurred speech, or impaired coordination.
- **Behavioral signs:** Drop in attendance and performance at work or school; unexplained need for money or financial problems; engaging in secretive or suspicious behaviors; sudden change in friends, favorite hangouts, and hobbies; and frequently getting into trouble (fights, accidents, illegal activities).
- **Psychological signs:** Unexplained change in personality or attitude; sudden mood swings, irritability or angry outbursts; periods of unusual hyperactivity, agitation, or giddiness; lack of motivation; appearing lethargic; and appearing fearful, anxious, or paranoid, with no reason.

In adolescents, specific signs of substance use include:

- Bloodshot eyes or dilated pupils, and use of eye drops to try to mask these signs;
- Absenteeism from class and poor classroom performance;
- Trouble/misconduct at school;
- Missing money, valuables, or prescriptions from the home;
- Uncharacteristic behaviors, including isolation, withdrawal, anger, or depression;
- Secrecy about a new peer group;
- Lost interest in old hobbies;
- Dishonesty about new interests and activities; and
- Demands for more privacy and sneaking around.

If you are a parent who suspects your child or teen is using drugs or alcohol, it's important to take action right away. Casual drug use can quickly turn into a long-term problem. There are ways you and other family members can intervene:[10]

- Set tighter limits with clear consequences;
- Get outside help and support if necessary;
- Have productive conversations by remaining calm, sharing your concerns, and listening; and
- Monitor behavior and activities.

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When offering support to someone with a substance use disorder, refer to the following tips to guide the conversation with your family member or friend:[11]

- Express your concern and provide examples of ways in which the person's substance use has caused problems – be sure to include the most recent incident;
- Don't cover up or make excuses for substance use-related accidents or occurrences.
- Intervene as soon as possible after a substance use-related argument, incident, or accident, when the individual is no longer under the influence;
- Gather information on treatment options and offer to accompany the person to the first appointment or meeting; and
- Recruit other friends, family members, or people in recovery to deliver the message that help is available and treatment is effective.

Most importantly, remind these individuals that recovery is possible, and that millions of people just like them were able to regain their lives and live healthy, rewarding lives in recovery.

Learn the Facts

Misconceptions about mental and/or substance use disorders exist. If you learn the facts, you can correct these misconceptions and support your family members or friends in their recovery journeys.

Myths and Facts: Mental Health Problems

In 2010, 31.3 million adults received mental health services.[12] Despite the prevalence of mental health problems, myths and misconceptions about these diseases exist. Inform your family members and friends of the correct information:[13]

Myth: People with mental health problems are violent and unpredictable.

Fact: **The vast majority of people with mental health problems are no more violent than anyone else.** People who suffer from these conditions are much more likely to be the victims of a crime than people without these conditions.

Myth: Once people develop a mental health condition, they will never recover.

Fact: **Studies show that most people with a mental health condition get better, and many recover completely.** Recovery refers to the process in which people are able to live, work, learn, and participate fully in their communities. For some individuals, recovery is the ability to live a fulfilling and productive life. For others, recovery implies the reduction or complete remission of symptoms. Having hope plays an integral role in an individual's recovery.

Myth: Mental illness is the same as an intellectual disability.

Fact: **Mental illness is completely unrelated to intellectual disability.** Intellectual disabilities are characterized by

limitations in learning, reasoning, and problem-solving, as well as in conceptual, social, and practical skills.[14] In contrast, people with mental health problems – which cause changes in a person's thinking, mood, and behavior – have varied levels of intellectual functioning, similar to the general population.

Myths and Facts: Substance Use Disorders

In 2010, 4.1 million people aged 12 or older (1.6 percent of the population) received treatment for a problem related to the use of alcohol or illicit drugs.[15] Learn the facts and dispel the myths about substance use disorders so you can encourage your family or friend to acknowledge a problem and seek help:[16]

Myth: Overcoming substance misuse is simply a matter of willpower. You can stop using drugs and alcohol if you really want to.

Fact: Prolonged exposure to drugs alters the brain in ways that result in powerful cravings and a compulsion to use the substance again and again. These brain changes make it extremely difficult to quit by sheer force of will.

Myth: Substance dependence isn't a disease; there's nothing you can do about it.

Fact: Substance dependence is a brain disease. The brain changes associated with dependence can be treated and reversed through therapy, medication, exercise, and other treatments.

Myth: Someone with a substance use disorder has to hit rock bottom before he or she can get better.

Fact: Recovery can begin at any point in the process – and the earlier, the better.

Myth: You can't force someone into treatment; a person has to want help.

Fact: Treatment doesn't have to be voluntary to be successful. People who are urged into treatment by their family, friends, employer, or the legal system are just as likely to benefit as those who choose to enter treatment on their own. As they become engaged in treatment and their thinking clears, many formerly resistant individuals decide they want to change.

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Myth: Treatment didn't work before, so there's no point trying again.

Fact: **Recovery from substance misuse and dependence is a long process that often involves setbacks.** Relapse doesn't mean that treatment has failed or the cause is lost. Rather, it's a signal to get back on track, either by going back to treatment or adjusting the approach.

Mental and/or Substance Use Disorders Affect the Whole Family

Individuals with mental and/or substance use disorders aren't the only ones whose lives are impacted by these conditions. These disorders affect family members and friends emotionally, physically, spiritually, and economically.

If someone in your life is suffering from a mental illness, you may wonder what caused your loved one to become ill or worry what others think. These are normal feelings, and it is important to remember that there is hope.[17] The following tips will help you cope with changes in your life:[18,19]

- **Set limits, roles, and boundaries.** It may be tempting to help your loved one in what are actually counterproductive ways. For instance, calling in sick for someone or bailing someone out of jail can make things worse by delaying the person from getting help. Setting personal limits instead can encourage people with behavioral health conditions to take action themselves, empowering them on their road to recovery.
- **Develop a coping strategy.** Change is difficult, both for you and your loved one. As you develop new ways of dealing with your loved one's behavioral health condition, that person may respond to you with anger, hostility, or unusual behavior. Preparing in advance how you will deal with these behaviors and being consistent in your response will help the affected person see that you are serious about helping him or her. Consistency is essential.
- **Accept your feelings.** You may find yourself denying warning signs, worrying that your family will be exposed to prejudices, or unable to understand how a loved one's behavioral health condition developed. These feelings are normal and common among families going through similar situations. Find out all you can about mental and/or substance use disorders by researching them and talking with health professionals. Seek your own support network and share what you have learned with others.
- **Support recovery.** There are many ways to support recovery. Clearly let the affected individual know that you are there for him or her throughout the recovery process. Offer praise about positive change, attend support group meetings, and participate in family therapy. Ask the person about his or her progress and celebrate even small successes.
- **Simplify your approach by setting small goals.** People with mental and/or substance use disorders must set small goals, such as "one day at a time." The same is true for families and friends who care about them. It is easy to become overwhelmed, so it is important to step back and set one small goal for yourself at a time.
- **Sustain your own physical, mental, and spiritual health.** All three of these can decline for the person who suffers from substance use or a mental health condition, and the same often happens to those around them. Eating properly, getting exercise, taking breaks, and addressing spiritual needs are very important for family members. Taking time to focus on yourself is essential and will ultimately help you keep things in perspective and improve your patience and compassion for helping your loved one.

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When family members and friends are involved with and supportive of a person seeking treatment for substance misuse, the likelihood of success is improved.[20] You can work toward making things better for yourself and also increase the chances of your loved one reaching and maintaining recovery.

Make a Difference During *Recovery Month* and Throughout the Year

This September and throughout the year, SAMHSA encourages all friends and family members to become involved in ***Recovery Month*** and support people with behavioral health conditions. You can:

- **Share your story.** Whether you are in recovery yourself or supporting someone you know who is in recovery, your story will inspire others to seek help. Consider talking to youth through school or community programs and spreading the message that prevention works, treatment is effective, and people recover.
- **Offer encouragement to others.** Let your friend or family member know how much he or she means to you and that you love him or her. Remind your loved ones that life in recovery is possible, and that professionals can help to manage a mental and/or substance use condition.
- **Join in the celebration.** If your friend or loved one is in recovery, join that person this September to recognize his or her accomplishment. Whether it's going to dinner together, going on a group run, or attending a ***Recovery Month*** event – remind your loved one that his or her achievement is great and that you are proud!

The support of others is crucial to achieving recovery. SAMHSA supports a number of programs designed to provide opportunities for people with behavioral health conditions and their families and friends to work together. These programs can help people address mental and/or substance use disorders, support recovery, and become actively engaged with policy reforms to promote health and wellness.

- SAMHSA's What a Difference a Friend Makes initiative encourages, educates, and inspires people between ages 18 and 25 to support their friends who are experiencing mental health problems.
- SAMHSA's Family Centered Substance Abuse Treatment Grants support the implementation of evidence-based procedures, and were developed to provide substance abuse resources to adolescents and their families, or other primary caregivers, in areas with unmet needs.
- SAMHSA's Children's and Family's Health Transitions program uses a system of care approach to provide an easy transition to adulthood for youth and young adults with mental health issues, as well as to support their families.
- SAMHSA's Consumer and Family Network grant encourages participation from families, individuals, and youth in mental health system reforms, including leadership development, policymaking, and coalition building.
- SAMHSA's Bringing Recovery Supports to Scale Technical Assistance Center Strategy provides policy and practice analysis, as well as training and technical assistance, to States, providers, and systems to increase the adoption and implementation of recovery support services.

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Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour, free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English or Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report** – Shares extensive information on the benefits, issues, and successes of e-therapy.
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to reduce prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **National Association for Children of Alcoholics** – Advocates for the public awareness, education, and support of children whose parents suffer from substance use disorders.
- **National Council on Alcoholism and Drug Dependence, Inc. (NCADD)** – Offers assistance to individuals, parents, youth, and friends and family who are fighting alcoholism and drug addiction.
- **Teen Challenge International** – Provides youth, adults, and families with effective and comprehensive faith-based solutions to life-controlling alcohol and drug problems.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

Targeted Outreach

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JOIN THE VOICES FOR RECOVERY It's Worth It

PARTNER WITH THE RECOVERY COMMUNITY

Every day, people with mental and/or substance use disorders begin to reclaim their lives and rebuild their futures through the journey of recovery. Millions of individuals are already in recovery from mental and/or substance use disorders or have learned to manage the effects of these problems. Members of the recovery community and their family members are important role models for people in recovery, helping to promote the effectiveness of intervention, support, and treatment, as well as spreading the hope of recovery.

The 23rd annual ***National Recovery Month (Recovery Month)*** observance this September will celebrate the effectiveness of treatment services and the reality of recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

This year's theme, ***"Join the Voices for Recovery: It's Worth It,"*** emphasizes that while the road to recovery is sometimes difficult, benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities. They also prove to family members, friends, and others that prevention works, treatment is effective, and people recover.

Recovery Month supports SAMHSA's Strategic Initiatives, which guide SAMHSA's work to help people with mental and/or substance use disorders and their communities and families. SAMHSA works to prevent behavioral health conditions and promote overall health and well-being for all Americans. SAMHSA's Recovery Support Strategic Initiative partners with people recovering from mental and/or substance use disorders and their family members to promote individual, program, and system approaches to building recovery and resilience.

This document details how members of the recovery community can share the benefits of recovery and act as leaders and role models. People in recovery are experienced in recognizing the signs of mental and/or substance use disorders, which are listed on the pages that follow, and can support their peers in identifying and implementing appropriate action steps to meet individual needs. In addition to providing a reminder of the signs of behavioral health conditions and possible action steps, the next section promotes self-care among people in the recovery community to address the potential for relapse. The "Join the Voices for Recovery" document in this toolkit shares positive journeys from the perspectives of multiple individuals in recovery.

Targeted Outreach

Targeted Outreach

ERIC MCDANIEL

Program Coordinator,
Faces & Voices of Recovery
Washington, DC

I have been in recovery since February 10, 2008, and it has completely changed my life for the better. I come from a family with a history of alcoholism, and I drank – and blacked out – for the first time when I was 9 years old. I started drinking again as an 18-year old college freshman. I could never control my drinking. Once I started, I never knew when I would stop, or what I might do.

After law school, it took only 2 years for my alcoholism and depression to turn a promising young trial lawyer, good friend, and devoted husband into an isolated and suicidal 29-year old with little hope. But God sent me a therapist who happened to specialize in trauma and addiction, and she told me where to find help. After a failed suicide attempt, I went to treatment and started to receive care for my illness.

With the help of other people in recovery, I have learned to practice a new way of living without alcohol. I found an Oxford House that supported my recovery while I worked toward regaining my independence. My life is not perfect, but recovery has given me a second chance to face challenges with a measure of grace and gratitude. I have the capacity to help others, and to ask for (and accept) help when I need it. I have been able to pursue my dream of working in public policy, and I now use my education and experiences in my work as a recovery advocate. I share my recovery with others, and encourage them to speak out about issues that matter to our community. Recovery has given my life new meaning and purpose.

Signs of Behavioral Health Conditions

People in the recovery community have experienced mental and/or substance use disorders themselves, and therefore are likely familiar with the challenges a person in recovery may face. This understanding enables the recovery community to identify warning signs in someone in need, share their own stories to promote recovery, and help themselves and others recognize signs of possible relapse and seek appropriate support. It is important to note that while mental and substance use disorders can co-occur, meaning someone may have both at the same time, people may not always know the warning signs associated with all of these conditions. Below are tips to help identify them.

Symptoms of mental health problems among children, adolescents, and adults include:[1]

- Feelings of extreme highs and lows;
- Excessive fears, worries, and anxieties;
- Social withdrawal;
- Changes in eating or sleeping habits;
- Strong feelings of anger;

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- Substance misuse;
- Inability to cope with problems and daily activities;
- Excessive complaints of physical ailments;
- Changes in school performance; and
- Hyperactivity.

Symptoms of substance misuse among children, adolescents, and adults include:[2]

- **Mood swings:** Virtually all mood-altering drugs produce mood swings ranging from euphoria to depression;
- **School and work problems:** Changes in school and work performance can occur, such as excessive tardiness, absences, missed deadlines, failure to turn in assignments, suspension, or expulsion; and
- **Changes in appearance:** People with substance use disorders may have worsening personal appearance or hygiene or a sudden gain or loss of weight.

Although all of these signs may suggest behavioral health conditions, these generalized symptoms and signs may also be indicative of other problems or disorders. While it is important to be aware of these signs and their relationship with behavioral health conditions, it is critical not to automatically discount physical conditions as a possible cause.

Signs of Relapse

Stable recovery requires self-awareness and self-care. Relapse of substance use and re-emergence of mental disorder symptoms is normal and may occur during the process of recovery. The potential for these problems makes recognition of personal warning signs and access to a personal recovery support network important.

Although the warning signs of re-emergence of a mental and/or substance use disorder may be subtle and specific to an individual, there are some general practices that may be beneficial in managing the recovery process. These practices can also be enhanced with the help of a support network:[3]

- Develop self-assessment tools to address recovery, relapse prevention, and wellness needs;
- Identify personal relapse prevention needs, triggers, and warning signs;
- Reinforce lifestyle changes, including stress management, relaxation techniques, spiritual practices, and conflict resolution;
- Understand factors that threaten recovery from mental and/or substance use disorders, including violence, abuse, neglect, and other environmental, interpersonal dynamics; and
- Utilize community resources, including peer supports to maintain recovery and wellness.

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Understand Recovery

There are perhaps no stronger advocates for the power of recovery than people who are already sustaining their own recovery. Social supports improve recovery outcomes,[4] and many people struggling with mental and/or substance use disorders need someone who has experience coping with these issues to trust and relate to when embarking on their own recovery journey.

It is important for the recovery community to share what that journey entails. With specific knowledge and personal expectations, people pursuing recovery can advance on a path that is best suited for their overall health and well-being. Examples of recovery inspire people to look beyond mere survival and existence and to map out their own unique pathway.[5]

For people in recovery from behavioral health conditions, sharing experiences and describing the value of recovery instills hope. While recovery is a unique journey, for many the recovery process:[6]

- Emerges from hope;
- Is person-driven;
- Occurs via many pathways;
- Is holistic;
- Is supported by peers and allies;
- Is supported by relationships and social networks;
- Is culturally based and influenced;
- Is supported by addressing trauma;
- Involves individual, family, and community strengths and responsibilities; and
- Is based on respect.

Recovery encompasses various aspects of an individual's life, including mind, body, spirit, and community life. It involves factors such as housing, employment, education, mental health and health care services, addiction treatment, peer recovery support services, spirituality, creativity, social networks, community participation, and family supports.[7]

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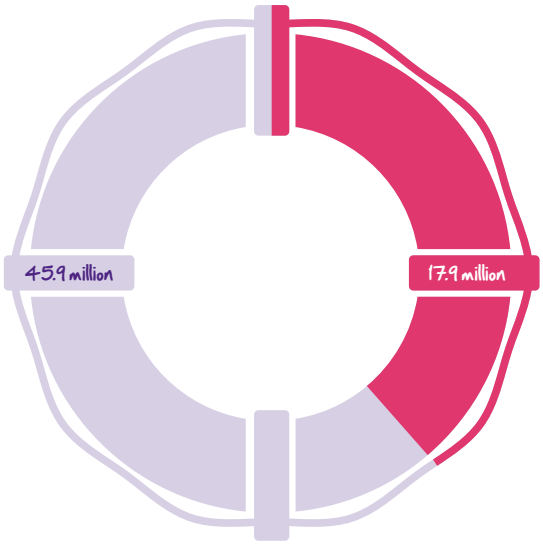
Opportunities to Achieve and Sustain Recovery

As people establish expectations and proceed on the road to recovery, they also learn about the different treatment methods that best fit their personal needs. Access to individualized treatment and support services is critical. For example, in 2010, 23.1 million people aged 12 or older needed treatment for an illicit drug or alcohol use problem (9.1 percent of people aged 12 or older). Of these, 2.6 million (1.0 percent of people aged 12 or older and 11.2 percent of those who needed treatment) received treatment at a specialty facility.[8, 9]



In 2010, among **45.9 million** Americans aged 18 or older who experienced any mental illness, **17.9 million** received mental health treatment.*

The recovery community plays an instrumental role in other people's recovery journeys and has a unique opportunity to educate individuals with a mental health and/or substance use disorder about the different treatment approaches available, the effectiveness of treatment, available recovery support services, and how to sustain long-term recovery. In addition to the tips in this section, the "Treatment and Recovery" document of this toolkit also details treatment methods for behavioral health conditions.

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Share Stories: The Recovery Community Can Help

Real-life stories bring to life the power of recovery. Stories engage people, connect with their emotions, and share passions, sadness, hardships, and joys.[10] For the recovery community, the use of words – through stories or conversations – may help a person realize that he or she has a problem and needs to seek treatment. Peer-to-peer interventions may inspire people to seek assistance prior to needing formalized treatment.

Often, stories resonate when they relate to a person's own experiences or conditions. By listening to or watching a testimonial, individuals learn what to anticipate during their recovery journey. For people in recovery, there are a number of ways to motivate others and help them discover the opportunities that exist to combat behavioral health conditions. The following are options to get involved in the recovery community.

Speak publicly and/or plan an event

People in recovery are proof that recovery is possible, and it is worth it. In 2011, there were more than 1,200 ***Recovery Month*** events nationwide, and many featured real-life examples of community members who overcame a behavioral health condition. In addition, organizations exist to mobilize advocates to speak on behalf of those with behavioral health conditions. To build confidence during a speech or presentation, become familiar with the material and relevant facts about mental and/or substance use disorders. It helps to practice, be aware of the audience and environment, and embrace the experience.[11]

People in recovery can share their story through many channels:[12]

- Neighbors;
- Friends;
- Civic organizations;
- Media;
- Faith-based organizations;
- City councils;
- State legislators; and
- Behavioral health treatment providers.

Events such as a run/walk bring attention to those in recovery, help educate communities about behavioral health conditions, and demonstrate the reality of recovery, as well as raise money to support local resources. See the "Promote ***Recovery Month*** with Events" document in this toolkit for more information on how to plan an event this September!

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Form or participate in a support group

Support groups are a place for people to give and receive both emotional and practical support, and exchange information.[13] They allow people to reinforce their own recovery, while conversing with others and sharing experiences.

Participants in support groups may:[14]

- Feel less lonely, isolated, or judged;
- Gain a sense of empowerment and control;
- Improve their coping skills and adjustment;
- Have an opportunity to talk openly and honestly about feelings; and
- Reduce distress, depression, or anxiety.

Support groups are a great place to find practical tips and resources, such as details about medical treatments, research, and treatment strategies. They can also provide information about public policy, legal resources, privacy laws, and protection from discrimination.[15]

To find a support group:[16]

- Ask a doctor or other health care provider for assistance. A doctor, nurse, social worker, chaplain, or psychologist may be able to recommend a support group.
- Contact local community centers, libraries, churches, mosques, synagogues, or temples.
- Ask others with the same illness or life situation for suggestions.
- Contact a State or national organization devoted to a mental and/or substance use disorder.
- Search the Internet. Online support groups are available as email lists, newsgroups, chat rooms, blogs, and social networking sites, such as Facebook. If you need help on how to use these online tools, visit the "New Media Glossary" and "Develop Your Social Network" documents in this toolkit.

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Offer assistance and encouragement

People in recovery don't need a large forum to spread their message that treatment is effective and recovery is possible. The recovery community makes an impact through everyday dialogue, encouragement, and taking time to support others on their recovery journey. Because mental and/or substance use disorders affect a person's ability to maintain a healthy lifestyle, handle stress, relate to others, and make choices, below are some positive coping strategies to manage these issues.[17, 18]

- Eat nutritious meals and snacks;
- Get physical activity and enough rest;
- Reduce caffeine intake and stop smoking;
- Seek help from counselors or support groups on a regular basis;
- Get support from family and friends; and
- Find time to take care of yourself and relax.

In addition, the tools below may help people in need feel stronger and more hopeful.[19]

- **Connect with and help others.** People who feel connected with others are happier and healthier – and may even live longer. Additionally, people who consistently help others experience less depression, greater calm, and fewer pains.
- **Stay positive.** Those who regularly focus on the positive aspects of their lives are less upset by painful memories. Positive emotions boost one's ability to bounce back from stress.
- **Take care of your spirit.** People who have strong spiritual lives may be healthier and live longer. Spirituality seems to reduce the stress that can contribute to diseases.
- **Seek assistance if needed.** Those who tackle problems or get support in a tough situation tend to feel less depressed.

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Additional Recovery Resources

A variety of resources provide additional information on ***Recovery Month***, mental and/or substance use disorders, and prevention, treatment, and recovery support services. Use the toll-free numbers and websites below to share your experiences, learn from others, and seek help from professionals. Through these resources, individuals can interact with others and find support on an as-needed, confidential basis.

- **SAMHSA's Website** – Leads efforts to reduce the impact of mental and/or substance use disorders on communities nationwide.
- **SAMHSA's National Helpline, 1-800-662-HELP (4357) – or 1-800-487-4889 (TDD)** – Provides 24-hour, free and confidential treatment referral and information about mental and/or substance use disorders, prevention, and recovery in English and Spanish.
- **SAMHSA's "Find Substance Abuse and Mental Health Treatment" Website** – Contains information about treatment options and special services located in your area.
- **SAMHSA's "Considerations for the Provision of E-Therapy" Report** – Shares extensive information on the benefits, issues, and success of e-therapy.
- **SAMHSA's ADS Center** – Provides information and assistance to develop successful efforts to reduce prejudice and discrimination and promote social inclusion.
- **National Suicide Prevention Lifeline, 1-800-273-TALK (8255)** – Provides a free, 24-hour helpline available to anyone in suicidal crisis or emotional distress.
- **Ensuring Solutions to Alcohol Problems** – Provides information and tools to increase access to effective and affordable screening and treatment for individuals, families, and businesses.
- **Faces & Voices of Recovery** – Organizes and mobilizes Americans in recovery, their family, and their friends to promote the right and resources to recover. It accomplishes this through advocacy, education, and demonstrations of the power and proof of long-term recovery.
- **National Council on Alcoholism and Drug Dependence, Inc. (NCADD)** – Fights alcoholism and drug addiction and offers assistance to individuals, parents, youth, and friends and family.
- **Recovery Connection** – Provides people and their loved ones in need of addiction help with detox or treatment information. It provides a free national helpline with staff who have had addiction problems and understand the recovery process.

Inclusion of websites and resources in this document and on the *Recovery Month* website does not constitute official endorsement by the U.S. Department of Health and Human Services or the Substance Abuse and Mental Health Services Administration.

Targeted Outreach

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JOIN THE VOICES FOR RECOVERY It's Worth It

COMMON MENTAL HEALTH PROBLEMS AND MISUSED SUBSTANCES

Each year, individuals, families, and communities are impacted by mental and/or substance use disorders. The aim of ***National Recovery Month (Recovery Month)*** is to raise awareness about the many resources available to help prevent these conditions and encourage treatment and recovery. ***Recovery Month*** is sponsored by the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS).

Learning about some of the most common mental health problems and the misuse of alcohol and illicit and prescription drugs can help you recognize the signs of behavioral health conditions and provide help to individuals experiencing them. In 2010, 23.1 million Americans aged 12 or older (9.1 percent) needed treatment for an illicit drug or alcohol use problem – of these individuals, only 2.6 million (1.0 percent of people aged 12 or older, and 11.2 percent of those who needed treatment) received treatment at a specialty facility.[1] Additionally, among 45.9 million Americans aged 18 and older who experienced any mental illness in 2010, just 17.9 million (39.2 percent) received mental health treatment.[2] Although the prevalence of mental and/or substance use disorders is a growing public health concern, individuals and their friends and families can provide support and spread the message that prevention works, treatment is effective, and people recover.

Included in this document are key statistics about common mental health problems and substances that are often misused. Also included are alternate names for each disorder or substance, signs and symptoms of a problem, adverse health effects, prevalence, and average age of onset or age of first-time use of a substance. Information in the following charts was collected from the *2010 National Survey on Drug Use and Health*, as well as reports and data released by The Partnership at Drugfree.org, the National Institute of Mental Health, and the National Institute on Drug Abuse.

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The following chart includes information on common mental health problems:

Anxiety Disorders

Mental Health Problem	Signs & Symptoms[3, 4, 5]	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old)[6, 7, 8]	Average Age of Onset[9]
Agoraphobia	Intense fear and anxiety of any place or situation where escape might be difficult; avoidance of being alone outside of the home; fear of traveling in a car, bus, or airplane, or being in a crowded area	2.4 percent of youth; 1.4 percent of adults	20 years old
Generalized Anxiety Disorder	An overwhelming sense of worry and tension; physical symptoms including fatigue, headaches, muscle tension, muscle aches, trouble swallowing, trembling, twitching, irritability, sweating, lightheadedness, nausea, and hot flashes	1.0 percent of youth; 5.7 percent of adults	31 years old
Obsessive Compulsive Disorder (OCD)	Persistent and unwelcome anxious thoughts or "obsessions," often accompanied by rituals that are performed to try to prevent or get rid of them, called "compulsions"	(youth data not available) 1.6 percent of adults	19 years old
Panic Disorder	Feelings of sudden terror that often occur with a pounding heart, sweating, nausea, chest pain, faintness, or dizziness; an avoidance of places or situations where panic attacks have occurred	2.3 percent of youth; 4.7 percent of adults	24 years old
Post-Traumatic Stress Disorder (PTSD)	Relived trauma after experiencing a terrifying event, through nightmares or disturbing thoughts throughout the day; feelings of detachment, numbness, irritability, or aggressiveness	4.0 percent of youth; 6.8 percent of adults	23 years old
Social Phobia	Intense feelings of anxiety and dread about social situations; a persistent fear of being watched and judged by others and being humiliated or embarrassed by the person's own actions; physical symptoms such as blushing, profuse sweating, trembling, nausea, and difficulty talking	5.5 percent of youth; 12.1 percent of adults	13 years old
Specific Phobia	Marked and persistent fear and avoidance of a specific object or situation, such as a fear of heights, spiders, or flying	15.1 percent of youth; 12.5 percent of adults	7 years old

Mood Disorders

Mental Health Problem	Signs & Symptoms[3, 4, 5]	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old)[6, 7, 8]	Average Age of Onset[9]
Bipolar Disorder	Recurrent episodes of highs (mania) and lows (depression) in mood; changes in energy and behavior; extreme irritable or elevated mood; an inflated sense of self-importance; risky behaviors, distractibility, increased energy, and a decreased need for sleep	3.0 percent of youth; 3.9 percent of adults	25 years old
Major Depressive Disorder	A pervading sense of sadness and/or loss of interest or pleasure in most activities that interferes with the ability to work, study, sleep, and eat; negative impact on a person's thoughts, sense of self-worth, sleep, appetite, energy, and concentration	11.2 percent of youth; 16.5 percent of adults	32 years old

Other Mental Health Problems

Mental Health Problem	Signs & Symptoms[3, 4, 5]	Lifetime Prevalence in the United States Among Adults and Youth (13 to 18 Years Old)[6, 7, 8]	Average Age of Onset[9]
Attention-Deficit/ Hyperactivity Disorder (ADD/ADHD)	Inattention or difficulty staying focused; hyperactivity, or constantly being in motion or talking; impulsivity, meaning often not thinking before acting	9.0 percent of youth; 8.1 percent of adults	7 years old
Personality Disorder	Difficulties dealing with other people and participating in social activities; inflexibility, rigidity, and inability to respond to change; deeply ingrained, inflexible patterns of relating, perceiving, and thinking that cause distress or impaired functioning	(youth data not available) 9.1 percent of adults*	Not available
Schizophrenia	Hearing voices or believing that others are trying to control or harm the person; hallucinations and disorganized speech and behavior, causing individuals to feel frightened, anxious, and confused	(youth data not available) 1.1 percent of adults*	Not available

JOIN THE VOICES FOR RECOVERY

It's Worth It

The following chart includes information on commonly misused substances:

Alcohol, Tobacco, and Inhalants

Substance	Other Names[10, 11, 12]	Immediate Intoxication Effects[13, 14]	Negative Health Effects[15, 16]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[17]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[18, 19]
Alcohol	Booze, beer, wine, liquor	Dizziness; talkativeness; slurred speech; disturbed sleep; nausea; vomiting; impaired judgment and coordination; increased aggression	Brain and liver damage; depression; liver and heart disease; hypertension; fetal damage (in pregnant women)	17.2 years (16.9 years in 2009); rate of current alcohol use among youths aged 12 to 17 is 13.6 percent	131.3 million people (similar to 130.6 million people in 2009)
Tobacco Products	Cigarettes, cigars, smokeless tobacco, snuff, spit tobacco, chew	Increased blood pressure and heart rate	Chronic lung disease; coronary heart disease; stroke; cancer of the lungs, larynx, esophagus, mouth, and bladder; poor pregnancy outcomes	17.3 years (17.5 years in 2009); rate of current tobacco use among youths aged 12 to 17 is 10.7 percent	69.6 million people (similar to 69.7 million people in 2009)
Gases, Nitrites, and Aerosols (Inhalants)	Ether, chloroform, nitrous oxide, isobutyl, isoamyl, poppers, snappers, whippets, laughing gas	Increased stimulation; loss of inhibition; headache; nausea; vomiting; slurred speech; loss of motor coordination; wheezing; cramps; muscle weakness	Memory impairment; damage to cardiovascular and nervous systems; unconsciousness	16.3 years (16.9 years in 2009); rate of current inhalant use among youths aged 12 to 17 is 1.1 percent	70,000 people (similar to 60,000 people in 2009)

Illicit Drugs

Substance	Other Names[10, 11, 12]	Immediate Intoxication Effects[13, 14]	Negative Health Effects[15, 16]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[17]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[18, 19]
Cocaine	Blow, bump, C, candy, Charlie, coke, crack, flake, rock, snow, toot, white lady	Increased alertness, attention, and energy; dilated pupils; increased temperature, heart rate, and blood pressure; insomnia; loss of appetite; feelings of restlessness, irritability, and anxiety	Weight loss; cardiovascular complications; stroke; seizures	21.2 years (20.0 years in 2009); rate of current cocaine use among youths aged 12 to 17 is 0.2 percent	131.3 million people (similar to 130.6 million people in 2009)
Ecstasy	Adam, E, eve, decadence, M&M, roll, X, XTC	Enhanced sense of self-confidence and energy; involuntary teeth clenching; a loss of inhibitions; transfixion on sights and sounds; nausea; blurred vision; chills; sweating; increased heart rate and blood pressure	Muscle cramping/ sleep disturbances; depression; impaired memory; kidney, liver and cardiovascular failure; anxiety	19.4 years (20.2 years in 2009); rate of current ecstasy use among youths aged 12 to 17 is 0.5 percent	69.6 million people (similar to 69.7 million people in 2009)

Illicit Drugs, cont.

Substance	Other Names[10, 11, 12]	Immediate Intoxication Effects[13, 14]	Negative Health Effects[15, 16]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[17]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[18, 19]
Hallucinogens	Acid, boomers, doses, hits, LSD, microdot, peyote, shrooms, sugar cubes, tabs, trips	Dilated pupils; higher body temperature; increased heart rate and blood pressure; sweating; loss of appetite; sleeplessness; dry mouth; tremors	Flashbacks that may occur within a few days or more than a year after use	19.1 years (18.4 years in 2009); rate of current hallucinogen use among youths aged 12 to 17 is 0.9 percent	1.2 million people (similar to 1.3 million people in 2009)
Marijuana	Blunt, dope, ganja, grass, herb, joint, bud, Mary Jane, pot, reefer, green, trees, smoke, skunk, weed	Distorted perception; trouble with thinking and problem solving; loss of motor coordination; increased heart rate	Respiratory infection; impaired memory; anxiety; exposure to cancer-causing compounds	18.4 years (17 years in 2009); rate of current marijuana use among youths aged 12 to 17 is 7.4 percent	17.4 million people (increased from 16.7 million people in 2009)
Methamphetamine	Chalk, crank, crystal, ice, meth, speed, white cross	State of euphoria; insomnia; decreased appetite; irritability/ aggression; anxiety; nervousness; convulsions	Paranoia; hallucination; repetitive behavior; delusions of parasites or insects crawling under the skin; psychosis; severe dental problems; heart attack	18.8 years (19.3 years in 2009)	353,000 people (decreased from 502,000 people in 2009)

Prescription Drugs

Substance	Other Names[10, 11, 12]	Immediate Intoxication Effects[13, 14]	Negative Health Effects[15, 16]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[17]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[18, 19]
Pain Relievers	Vike (Vicodin®), oxy, O.C. (Oxycontin®), M (roxanol), schoolboy (empirin with codeine),China white, dance fever (Actiq®)	Pain relief; euphoria; drowsiness, respiratory depression and arrest; nausea; confusion; constipation; sedation; unconsciousness; restlessness	Muscle and bone pain; drowsiness; seizure; coma; respiratory depression; decreased heart rate	21.0 years (20.8 years in 2009); rate of current non-medical use of prescription pain relievers among youths aged 12 to 17 is 3 percent	5.1 million people (similar to 5.3 million people in 2009)
Psychotherapeutics	Prozac®, Zoloft®, Ritalin®	Increased heart rate, blood pressure, and metabolism; feelings of exhilaration and energy; increased mental alertness; rapid or irregular heartbeat; reduced appetite	Heart failure; weight loss; tremors and muscle twitching; fevers, convulsions, and headaches; irregular heartbeat and respirations; anxiety; restlessness; paranoia; hallucinations; delusions of parasites or insects crawling under the skin	22.3 years (21 years in 2009)	7.0 million people (same as in 2009)

Prescription Drugs, cont.

Substance	Other Names[10, 11, 12]	Immediate Intoxication Effects[13, 14]	Negative Health Effects[15, 16]	Average Age of First Use in 2010 (vs. in 2009) Among Recent Initiates aged 12 to 49 and Current Rate Among Youth[17]	Number of People (Aged 12 or older) Who Used it in the Past Month in 2010 (vs. in 2009)[18, 19]
Tranquilizers	Benzos (Mebaral®, Ativan®, Xanax®, Valium®, Nembutal®, Librium®)	Slurred speech; shallow breathing; sluggishness; fatigue; disorientation and lack of coordination; dilated pupils; reduced anxiety; lowered inhibitions	Seizures; impaired memory, judgment and coordination; irritability; paranoid and suicidal thoughts; sleep problems	24.6 years (22.4 years in 2009)	2.2 million people (similar to 2.0 million people in 2009)
Stimulants	Adderall®, Ritalin®, Concerta®	Increased alertness, attention, and energy	Increased hostility or paranoia; dangerously high body temperatures; irregular heartbeat; cardiovascular failure; lethal seizures	21.2 years (21.5 years in 2009)	1.1 million people (similar to 1.3 million people in 2009)

Targeted Outreach

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