Hazelden Betty Ford Foundation

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Next Pandemic Relief Bill Needs to Include Additional Funding for Behavioral Health

By Emily Piper

With the second impeachment of former President Trump behind them, Members of Congress have turned their attention to where President Biden's Administration is focused: COVID-19 relief.

While vaccines and unemployment benefits continue to receive top billing in media coverage about the nation's pandemic-related needs, a growing number of lawmakers are also calling for additional funding to support behavioral health. U.S. Sens. Rob Portman (R-OH), Sheldon Whitehouse (D-RI), and Amy Klobuchar (D-MN) have introduced a bill coined CARA 2.0, building upon the 2016 Comprehensive Addiction and Recovery Act's investments in response to the opioid epidemic. Additionally, we were fortunate to host Sen. Klobuchar at our Plymouth, Minn., location just last week to advocate for bipartisan legislation she sponsored with Sens. Young (R-IN) and Van Hollen (D-MD) entitled the Coronavirus Mental Health and Addiction Assistance Act. This bill would authorize $100 million in grants to programs offering mental health and substance use services in response to the pandemic. Much of the Senators' proposed investments were recently included in the U.S. House Energy and Commerce Committee's "markup" of the relief

bill, which is moving forward in the lower chamber and aligned with President Biden's call-to-action on COVID relief.

Finally, Sens. Shaheen (D-NH) and Baldwin (D-WI) are looking beyond the pandemic to next year's budget, calling on President Biden to prioritize systemic investments, including additional grant dollars, as well as targeted funding to build harm reduction resources, invest in the substance use treatment and recovery workforce, and more. As the new Congress continues its work, we can expect much more on this front in the coming months.

State advocacy

We are also seeing action at the state level as legislatures across the country come back into session. Just to name a few …

- Last week at his State of the State Address, Gov. Jim Justice announced a partnership between Hazelden Betty Ford and WV Game Changer, focused on bringing substance use education and prevention programs to schools across West Virginia.
- In Minnesota, Hazelden Betty Ford's Dr. Steve Delisi and General Counsel Jenni Lohse (pictured) testified on the impacts of the pandemic on youth mental health, and quality addiction treatment industry regulation, respectively.

- And, in Oregon, the debate on increasing the alcohol sales tax and using proceeds to fund investments in the substance use prevention, treatment and recovery continuum continues to heat up. Our friends at Oregon Recovers took their case to the press, arguing that an increase in alcohol taxes is long overdue.

With all of the activity under way at the state and federal level, it is crucial that we tell public officials what is important to us, and why. To that end, please consider responding to Hazelden Betty Ford's newest call-to-action, in support of Congress taking action to systemically and robustly invest in behavioral health now—in the next pandemic relief package—and into the future.

Contact Congress Now →

Emily Piper *is the executive director of government relations and contracting for the Hazelden Betty Ford Foundation.*

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The Cumulative Effects: The Personal Versus the Systemic

By David Sherrell

I know I'm not the only person to have recently unfriended someone on Facebook. This was a dear friend I've known since our early recovery over a decade ago, yet her support of

perspectives grounded so thoroughly in institutional racism felt like a personal betrayal.

I've had plenty of discussions with this friend about the racism I have experienced in my life. More than a few of those were perpetrated by peers in recovery. She was predictably disturbed and empathetic, so I'm confident her bias is unconscious. She doesn't see, as I do, how her persistent claims of widespread election fraud in large, diverse cities—after dozens of courts rejected such claims—connect to the bruises, slurs and marginalization I've endured in my life.

I pondered drawing that connection for her, calling out the unconscious bias, but I simply didn't have the fight in me. Instead, I chose the path of self-care, and blocked her.

The timing of this choice—during Black History Month—made me reflect on what I see as a missed opportunity. Because while I'm certain she believes "racism is bad," and I'm sure she can name many of the luminaries we celebrate during Black History Month, I do not believe she understands Black history.

Too many use this month to teach Black history from a very personalistic perspective. They reduce deeply entrenched systemic iniquities to mere personal adversities that individuals should overcome. They tell tales of luminaries who achieved great things in the face of discrimination, advancing the struggle for civil rights thanks to the strength of their individual character. Such portrayals

serve the individualistic moral that Black Americans can triumph over anything if we put our minds to it. By inference, anyone who cannot “triumph over racism” (however you define that) just isn't trying hard enough.

This narrative focuses heavily on an oversimplified presentation of person-to-person discrimination, the kind most easily spotted and most commonly protested. But what about the cumulative effects of generations worth of traumatizing structural forces that promote wage inequity; health disparities including many related to addiction and mental health; a biased educational system, and law enforcement and correctional systems that criminalize, imprison and even murder Black people?

In recent years, the National Institutes of Health, American Medical Association, American Public Health Association and many other institutions have labeled racism a public health crisis, deserving the same attention and interventions (and funding!) as any other we face. This is a huge stride forward in battling the forever-ramifying effects of this country’s original sin – but it’s a cry for progress that demands action, much of it discomfiting, from all of us.

We must take advantage of Black History Month to learn and to teach about historic forces and historic trauma, not just historic people. We must observe the insidious unconscious bias that challenges progress even in the minds of those who would tell you, “I’m all for progress!” Even in the hearts of those who practice love,

tolerance and acceptance as a means of securing their own survival and wellbeing.

We must be receptive—in the recovery space and everywhere—when someone raises the possibility that unconscious bias plays a role in our behaviors, our perspectives, and our impact on others. It's hard work, but it's the only path to effective intervention on this dire public health crisis.

David Sherrell *is the interim executive director of FCD Prevention Works, a part of the Hazelden Betty Ford Foundation.*

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Advancing the Peer Support Movement: 'We're all in this for the same reason'

By Tori Utley

For many, the unfolding of recovery usually brings with it the process of connection.

Connection to supportive resources and systems, yes, but most importantly, connection to one another. It's this connection to each other and the shared experience of recovery that lays the foundation for peer recovery support.

On Jan. 28, leaders from across the Hazelden Betty Ford Foundation gathered for a virtual discussion about the growing

movement of peer recovery support. Joining forces with experts from outside of the Foundation, the session was designed to provoke discussion and inspire ideas surrounding the peer profession—a growing workforce led by those with lived experience in recovery.

Nearly 50 members of the Foundation were joined by national experts and panelists including William Stauffer, executive director of the Pennsylvania Recovery Organization Alliance (PRO-A); Patty McCarthy, CEO of Faces & Voices of Recovery; Andre Johnson, CEO of the Detroit Recovery Project; and Anita Bradley, CEO of the Northern Ohio Recovery Association.

Following an afternoon of conversation, the resounding point was made clear: The movement is stronger when we work together.

"We're all in this for the same reason—we want to help individuals recover," says McCarthy. "Ideally, we're working in partnership. We're supporting one another so the recovery community can support people in treatment or their communities stay in recovery for the long-term."

By deploying and elevating the lived experience of recovery within the walls of treatment facilities, primary care settings, correctional facilities and beyond, peer support has become increasingly recognized as a supportive link between these systems and the various other settings people may encounter as they navigate recovery.

Differentiated from other supportive roles in a person's life and recovery, peer specialists use their stories to help others. In other words, peers perpetuate a powerful, unparalleled message: "I've been there," and "You're not alone."

As the founder of a recovery community organization myself, I've seen firsthand the profound impact of peer support. It's powerful to see shared experience exchanged between two people, and even more valuable when stitched together with a continuum of support that gives people the best opportunities recovery has to offer.

But there's more work to be done.

The road ahead to formalize and equip the peer workforce includes a comprehensive agenda outlined by panelists to include reducing the stigma of substance use disorder (SUD); advocating for equitable reimbursements with payers; influencing SUD policy; and building workforce capacity. Additionally, resources are needed to equip both peers and their employers with knowledge, training and tools to integrate the profession across our systems of care.

Yet, while these priorities for growth are important, Stauffer suggests we need to consider the peer first in order to build sustainability for the profession: "We need to consider who does this work, and how to get more of these people in the door while we work to change things."

As the future of peer support advances, it's imperative that we continue to support our partners in advocating for the parity and

sustainability of the peer support profession and recovery movement at large. For Hazelden Betty Ford, this means continuing work underway in the buildout of our recovery management portfolio spanning research, resources, curriculum and technology to support those on the front lines of this work. As our panelists stated, our shared goal is a recovery-oriented system of care that elevates lived experience, ultimately helping more people access recovery and experience the connection that is transformational along the way.

Watch our interviews with Andre Johnson and Anita Bradley, and a joint interview with William Stauffer and Patty McCarthy.

Tori Utley *is a product market manager for Hazelden Publishing's Professional Education Continuum Solutions team and the co-founder of Doc's Recovery House in Rochester, Minn.*

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If Not Now, When?

By Carol Pine

Addiction thrives in secrecy everywhere, and it has a secure foothold in my adopted home in the deep South: Savannah, Georgia.

Savannah: the intoxicating city of history, mystery, live oak trees draped with Spanish moss and abundant azaleas.

Savannah: the city of the Big Red Cup, cocktails on the porch, “roadies” and stocked coolers. It’s a culture familiar to this Yankee in long-term recovery.

With addiction on the rise in America, faith leaders in Savannah are shining a bright light on the disease of addiction. They are confronting secrecy and equipping themselves with knowledge so they can do more than tell a struggling congregation member or family, “I’ll pray for you.”

This is all happening in Savannah, thanks to a young, nonprofit organization founded in mid-2018 called the Interfaith Addiction and Recovery Coalition. The sole purpose of our all-volunteer effort is to provide faith leaders of *all* faiths with reliable information, education and resources on the subjects of addiction and recovery.

We have been told that the Interfaith Addiction and Recovery Coalition is a first of its kind in Georgia and yet it is replicable in many cities in our state – and nationally. All we needed were energetic volunteers and engaged faith leaders.

Hazelden Betty Ford has been an invaluable collaborator, especially during COVID-19, offering to our community virtual presentations by Jerry Moe and Dr. Steve Delisi, as well as its daylong virtual Family Program. Before the pandemic, we offered in-person educational forums that were very well-attended, and will do so again. We also hope to host Hazelden Betty Ford experts in person.

Nationally, we are told that nearly one in three “people in the pews” struggle with addiction, either personally or with someone they love. And yet, a landmark 2001 study for the National Center on Addiction and Substance Abuse (CASA) told us only 12% of faith leaders received any education on the subject in seminary.

Without knowledge, how can a faith leader have the confidence to reach out to a congregation member in a positive, healing way? We know that our Interfaith Addiction and Recovery Coalition is already making a positive difference in our community on this very subject. Listen to some of our Savannah faith leaders:

“Thanks to the forums, I’m more aware now that addiction is an issue that we need to focus on,” says Rev. J. Michael Culbreth, senior pastor of ConneXion Church. “This is a ministry we’ve been overlooking and we need to be more intentional. Addiction has been hidden. We need to get real. As a pastor, I realize that there are people in my congregation who are wrestling with addiction. Many people wear ‘masks’ and pretend they are doing well, but their lives are falling apart.”

“I don’t think we talk about addiction nearly enough,” Rev. Ben Gosden, Trinity United Methodist Church, told the *Savannah Morning News*. He estimates that close to 20% of his church attendees face addiction, either personally or through a loved one. Not long ago, after delivering a four-part sermon entitled “The 12 Steps for Everyone,” Rev. Gosden said he saw an unprecedented

response, including numerous emails about loved ones' addictions and steady, higher church attendance.

The following are some survey comments from faith leaders who have attended our educational forums:

"I see how easily addiction can be hidden in plain sight."

"We need to 'unveil' addiction issues in our faith communities."

"I need to be better informed about the devastation that comes from substance (mis)use."

In each of our periodic e-newsletters, we ask faith leaders to write in first-person about their experience with the disease. Rabbi Robert Haas of Congregation Mickve Israel wrote this in 2020:

"I remember loaning a good friend $500 only a few short years after beginning my rabbinical career. Why wouldn't I give that kind of money to a pillar of the community, to a middle school teacher who taught Sunday School and sat on just about every committee in the Jewish community? Only a short time later, I visited my friend at the rehab center, and only a short time after that, I officiated at his funeral.

"As a faith leader, I counsel everyone to seek assistance as soon and as often as possible. Today I feel much more informed and able to help. I believe God gave humanity the intelligence and tenacity to solve our problems together, with the aid of friends, family members and professionals. Rabbi Hillel once said, 'If I am

not for myself, who will be for me? But if I am only for myself, who am I? If not now, when?'"

Our Interfaith Addiction and Recovery Coalition in Savannah is answering the call. Our team of Faith Leader Cabinet Advisors includes the Muslim, Christian, Buddhist, Jewish, Bahá'i and Quaker faiths in Savannah. They guide our work and our educational programs.

We believe the new Addiction Alliance of Georgia, created by the Hazelden Betty Ford Foundation in partnership with Emory Healthcare, will be a powerful force in our state—a force to help eradicate the secrecy around addiction and save even more lives.

Here in Savannah, we are blessed to support the new Alliance and do our part to prove that reliable, grassroots addiction and recovery education for faith leaders is achievable and powerful.

Carol Pine *is a person in long-term recovery and former Board Chair of the Hazelden Foundation (today Hazelden Betty Ford). She is co-founder of the Interfaith Addiction and Recovery Coalition in Savannah. She spends most of her year in Savannah close to her sailboat and the Georgia coast.*

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Trending Issues in the News

By Samantha Moy-Gottfried

Happy Year of the Ox and Happy Black History Month! As much of the country begins a tentative unfurling after a punishing stretch of weather, our health—physical and mental—reflects the force of a winter compounded by the pandemic:

- Lost touch: how a year without hugs affects our mental health (The Guardian)
- 'I'm literally breaking inside': As COVID-19 leaves millions jobless and struggling, the mental health toll rises (USA Today)
- The pandemic has erased entire categories of friendship (The Atlantic)
- Child psychiatrists warn that the pandemic may be driving up kids' suicide risk (NPR)
- How to help when adolescents have suicidal thoughts (New York Times)
- Laughter yoga breathes away the stress even when things don't feel especially funny (Seattle Times)
- American Indians, Alaska Natives hit hardest by methamphetamine overdose surge (Addiction Professional)

- Mental health professionals are the ones taking care of us: Who's taking care of them? (USA Today)

Samantha Moy-Gottfried *is the communications and public affairs manager for the Hazelden Betty Ford Foundation, where she also leads the organization's Diversity, Equity and Inclusion communication subcommittee.*

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"Let's Talk" Podcasts and Webinars

By Lisa Stangl

Language is both a reflection of, and an influence on, public attitudes and perceptions. Therefore, any effort to end the stigma of addiction starts with changing the language we use to talk about the disease and the people it affects. With this in mind, be sure to check out our award-winning Let's Talk podcast series and the recent episode on using person-first language to reduce public stigma and private shame. I hope you'll listen, watch and share it, along with other new episodes.

We'd love to hear from you! Let us know what you're watching and listening to and topics you would like us to cover. And stay tuned next month for something all new: The Recovery Equity Series.

“Let’s Talk” Podcasts—New Releases

How Person-First Language Reduces Stigma

Words can hurt, and words can heal—especially words used by health care professionals concerning substance use and mental health disorders. Listen in as psychiatrist Stephen Delisi, MD, talks with host William C. Moyers about the power of choosing person-first language to reduce bias, stigma and shame (internalized stigma) around the disease of addiction. Quite literally, the difference between using the term “alcoholic” or “a person with alcohol use disorder” can be life-changing. Listen | View Now

Parenting in Recovery: Accentuate the Positive

Parenting involves navigating a multitude of issues, even when everything's running smoothly for a family. Add a major stressor—like the challenges of early recovery—and it doesn't take much for family interactions to deteriorate. Listen in as family systems research scientist Kate Gliske, PhD, talks with William about parenting skills that foster positive interactions. Listen | View Now

Person-Centered Care for LGBTQ+ People

Studies indicate that members of the LGBTQ+ community experience substance use and co-occurring mental health disorders at twice the rate of the general population. Listen in as William talks with clinician Princess Drake, PsyD, about related risk factors including historical trauma and the fear of “not being accepted for who you are.” Drake discusses the importance of

person-centered, culturally competent addiction treatment and inclusive peer recovery support communities. Listen | View Now

(View All "Let's Talk" Podcasts)

"Let's Talk" On-Demand Webinars

Substance Use and Women's Reproductive Health presented by Alta DeRoo, MD. View Now

(View More Trending Topics)

"Living in Recovery" Speaker Series

(Browse Topics)

Lisa Stangl *is a marketing director for the Hazelden Betty Ford Foundation.*

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Miscellaneous Musings

By Jeremiah Gardner

- "*A particular deep heartache is what's happened with the opioid crisis in the United States. When you look at … deaths from opioids and from stimulants like methamphetamine,* ***it is the other great tragedy of 2020****."* That from Dr. Francis

Collins, director of the National Institutes of Health (and Dr. Fauci's boss), in a Sunday interview with *Axios* about the COVID-19 pandemic and its impact on other health crises.

- Have you checked out Hazelden Publishing's new podcast Recovery Road? Two new 10-minute episodes a week with a dose of insight and inspiration from our most popular authors.
- New study: Emergency department visits for opioid overdoses were 29% higher in 2020 than before the pandemic. And the CDC says 81,230 overdose deaths in a 12-month period sets tragic new record.
- Meanwhile, pain patients who take opioids can't get in the door at over half of primary care clinics.
- Health care workers replaced Denver cops in handling hundreds of mental health and substance use cases — and officials say it saved lives.
- Another recovery advocate, Ariel Britt, landed a job working in the Biden Administration.
- Alcohol-related liver disease was a growing problem even before the pandemic, with 15 million people diagnosed with the condition around the country. The pandemic has dramatically added to the toll.
- A consulting firm has reached agreements with 49 states and will pay $600 million because of its sales advice to opioid

makers. One potential conflict of interest is getting attention as a result.

- Our friends at the Recovery Research Institute published an interesting new study suggesting medical terms for opioid addiction don't always reduce stigma.
- William White's blog includes posts this month about recovery innovations and the latest data on recovery prevalence in the U.S.
- Light on the musings this month because I'm busy working on a big announcement. Stay tuned, and thanks for reading this edition's excellent contributions. What do you think? Send a note anytime, and, once again, stay healthy, well and grateful!

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ISSUES WE CARE ABOUT

Industry Reform | Fighting Addiction Stigma

Opioid Epidemic | Access to Treatment

Marijuana Education | Criminal Justice Reform | Alcohol Prevention

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