

MICHIGAN'S TRANSFORMATION TO A RECOVERY ORIENTED SYSTEM OF CARE FOR SUBSTANCE USE DISORDER SERVICES – TREATMENT

This is an extraordinary time in the history of substance use disorder (SUD) service systems. A recovery revolution is sweeping the nation and is having a profound impact on the design and delivery of all services and supports. Michigan, like many other states, is undergoing a transformation to a recovery oriented system of care (ROSC). This transformation entails a shift from models of care that promote brief bio-psychosocial stabilization to those that support strength-based sustained recovery and community health.

In an acute care model, many individuals are able to successfully initiate their recovery in treatment, but they often have difficulty maintaining their recovery following treatment. As a result, they cycle in and out of a series of disconnected treatment episodes. In a ROSC, SUDs are viewed as long-term or chronic illnesses that often require ongoing support and multiple coordinated strategies to promote sustained recovery. As such, people are provided with a diverse range of services and supports that assist them in not only initiating their recovery, but also sustaining it and rebuilding their life in the community.

Additionally, traditional systems focus little on promoting community health. A ROSC, however, places greater emphasis on community health and wellness for all. As a result, prevention services, which have a long history of promoting personal and community health and wellness, are integral elements within a ROSC.

What is a ROSC?

Michigan's recovery oriented system of care supports an individual's journey toward recovery and wellness by creating and sustaining networks of formal and informal services and supports. The opportunities established through collaboration, partnership and a broad array of services promote life enhancing recovery and wellness for individuals, families and communities.

Why do we need a ROSC?

- Limited Attraction: Less than 10% of people who meet the DSM-IV criteria for a SUD currently seek treatment.
- Poor Engagement and Retention: Less than half of those in treatment complete their treatment program.
- Lack of Continuing Care: Post-discharge continuing care can enhance recovery outcomes, but only one in five receives it.
- High Rates of Relapse: The majority of people completing addiction treatment resume alcohol and other drug use within one year, and most within 90 days following discharge.

- Resource Expenditures: Most resources are expended on a small portion of the population requesting services.
- Readiness for Change: Services are not aligned with the client's readiness for change.

Examples of how a ROSC differs from traditional service systems:

- The goal of treatment extends beyond abstinence or symptom management to helping people achieve a full, meaningful life in the community.
- Prior treatment is not viewed as a predictor of poor treatment outcomes and is not used as grounds for denial of treatment.
- People are not discharged from treatment for relapsing or confirming their diagnosis.
- Post-treatment continuing care services are an integrated part of the service continuum rather than an afterthought.
- Focus is on all aspects of the individual and the environment, using a strength-based perspective and emphasizing assessment of recovery capital.

What are some implications for treatment services and supports?

- Greater emphasis on outreach, pre-treatment supports, and engagement.
- More diverse menu of services and supports available for people to choose from based on their needs.
- A more assertive effort by providers to connect individuals to families and natural supports.
- Expanded availability of non-clinical/peer-based recovery supports.
- Post-treatment recovery check-ups.
- Service relationships shift from an expert/patient model to a partnership/consultation approach.

The Importance of Culture in a ROSC

Our system of care will be culturally sensitive, gender competent and age appropriate. There will be recognition that beliefs and customs are diverse and can impact the outcomes of recovery efforts. It will be recognized that the cultures of those who support the recovering individual affect the recovery processes. We need to respect the culture of recovery itself. The culture of recovery requires long-term relationships, and collaborations that support and encourage individuals, families and communities to embrace recovery.

Michigan's recovery transformation efforts are designed to promote greater health and wellness for individuals, families and communities. We invite you to join this exciting effort. For more information, please contact the Bureau of Substance Abuse and Addiction Services at (517)373-4700 or mdch-bsaas@michigan.gov.