

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

A recovery revolution is sweeping the nation and is having a profound impact on all substance abuse services and supports. There is even a change to the way we refer to substance abuse and addiction – they are now referred to as substance use disorders (SUD). Michigan, like many other states, is undergoing a transformation of the SUD service system to a recovery oriented system of care (ROSC).

Why do we need recovery-oriented services?

Individuals with SUD and related problems do not live in isolation from others. They are members of families, they have networks of friends, and they live in communities; all of which are impacted by the personal and collateral damage inflicted by their SUD.

- It takes four to five years for the risk of relapse to drop below 15%. Our current system focuses on acute treatment, but not the sustained support necessary to stabilize recovery. All of our resources are needed to change this.
- People typically enter treatment after ten years of active addiction. The longer people use, the more difficult it is for them to enter and sustain recovery.

The longer the use, the higher the negative impacts for families and communities. Therefore, prevention, early intervention, treatment and post treatment recovery supports are needed to change this.

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.

What we know about services that support recovery and resilience.

Effective ROSC services focus on:

- Greater emphasis on continuity of care: effective prevention, assertive outreach and engagement, treatment, and ongoing monitoring and support.
- A continuum of care in which services are holistic and integrated, culturally responsive, and with systems that are anchored in the community.
- Expanded availability of non-clinical services such as: peer supports, prevention, faith-based initiatives, etc.
- Resources to help prevent the onset of substance use disorders.
- A public health approach being taken to help create healthy communities.
- More assertive outreach to families and communities impacted by substance use disorders.
- More assertive post-treatment monitoring and support is provided.
- A partnership/consultation approach rather than an expert/patient model.
- The lives and experiences of other people in recovery are valued and used to help others on the journey.

Additional elements of a ROSC include a person-centered self-directed approach to recovery, and the use of peer support services to sustain an individualized recovery effort.