

Transforming Youth Recovery

One Community, One School, One Student at a Time

Strategic Plan

Transforming Youth Recovery

P. O. Box 6448

Reno, NV 89513 U.S.A.

(858) 259-0382

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EXECUTIVE SUMMARY

A lot of young people use alcohol and drugs.

The use of alcohol and drugs leads to substance use disorders.

Because of a change in criteria, substance use disorders will be more widely diagnosed in the years ahead.

Because of the Affordable Care Act, more youth with the diagnosis of substance use disorders will have access to treatment.

When more youth have access to treatment, current resources will be overloaded.

To deal with the overload, more school-based recovery services are required.

To reinforce the effort to create more school-based recovery services, The Stacie Mathewson Foundation has launched a 501(c)(3) nonprofit, Transforming Youth Recovery.

The two-pronged strategy of Transforming Youth Recovery is (1) To build the capacity of institutions, local communities and families to help youth in recovery find and access available resources to help them thrive in their primary, secondary and post-secondary settings, and (2) To cultivate networks of all kinds for collective action.

The specific areas of focus for youth in recovery are:

- High Schools—School-Based Recovery Support
- Higher Education—School-Based Recovery Support
- Community Colleges—School-Based Recovery Support
- Life Skills Initiatives
- Family Education, K-8th Grade Prevention and Intervention

In each of these focus areas, Transforming Youth Recovery will add key resources from the private sector to the efforts of government and the educational system with the goal of accelerating the rate of change in how we deal with recovery in the United States.



STATEMENTS OF MISSION

The Stacie Mathewson Foundation creates and brings together innovative and sustainable scholastic recovery communities.

We work with these communities to increase recovery success for students struggling with addiction. We use the real world experiences of students in recovery to educate the public about addiction and recovery and to erase the social stigma that blocks students and their families from seeking help.

In 2013 we created the 501(c)(3) nonprofit, **Transforming Youth Recovery**. Through this organization, we support educators, parents and community members in helping students in recovery thrive in the fullness of everyday life.

Our vision is to transform youth recovery—one community, one school, one student at a time.



ENVIRONMENTAL ANALYSIS CONDUCTED BY THE STACIE MATHEWSON FOUNDATION

The philanthropic areas of focus for activities in and around school-based recovery support efforts are direct responses to a few hard realities: (1) the alarming levels of substance use and/or mental health disorders among youth, adolescents and young adults; (2) the need to raise public awareness and to educate families on substance use disorder treatment and recovery issues; and (3) the political and social agendas that are calling upon private and public enterprises to address the issue. Key agendas include:

2013 National Drug Control Strategy:

Given the developmental nature of substance use disorders and the benefits of intervening early, the Office of National Drug Control Policy is giving special attention to substance use disorders among adolescents and young adults. Data from NSDUH (2011) demonstrates the need for such a focus. Among young adults aged 18 to 25, rates of substance use disorders are nearly three times those found in adults over the age of 25 (21.4% versus 6.3%), while 6.9 percent of young people aged 12 to 17 were estimated to have substance use disorders. Very often, laws, rules, policies, and practices create barriers to sustained recovery. This is why modifying or eliminating laws, rules, policies, and practices that create barriers to recovery remains one of the Administration's priorities. The Stacie Mathewson Foundation believes we must also support the development of a robust recovery research agenda to improve our understanding of what programs and advocacy efforts best support recovery.

2010 Recovery/Relapse Prevention in Educational Settings, Department of Education, Office of Safe and Drug-Free Schools:

Adolescence is a critical period for the onset of substance use. Tragically, too many of our youth move from substance use to abuse and addiction. Approximately 144,000 adolescents receive treatment for substance abuse problems every year; however, this represents only about 10% of youth who meet accepted diagnostic criteria for at least one substance use disorder. Relapse following treatment is all too common. Studies of teens who complete inpatient treatment suggest as many as 85% report some substance use only a year after their programs. For those students who are attempting to remain sober, recovery programs and supports are needed to prevent relapse into addiction or alcohol and drug abuse, as well as promote student success in education. The recovering alcoholic or other drug-addicted youth often faces the challenge of continuing recovery while immersed in a culture of drinking and other drug use that is often found on college campuses and among secondary school peer groups.

2013 Improving Access to Children's Mental Health Care, The Center for Health and Health Care in Schools:

Implementation of the Patient Protection and Affordable Care Act (ACA) is well underway, creating long-overdue opportunities for growing the capacity of child and adolescent mental health systems and meeting children's pressing needs. As of January 2014, coverage of mental health conditions



and substance use disorders will be required as part of the broad Essential Benefits package of services under the ACA. While states determine specific benefits, it is widely accepted that mental health and substance abuse coverage will substantially increase. Additionally, as a result of this new law, we will likely see an expansion of funding for prevention, early intervention, and treatment services and programs for individuals and families affected by addiction.

2010 Families of Youth with Substance Use Disorders: A National Dialogue, Substance Abuse and Mental Health Services Administration's (SAMHSA) Center for Substance Abuse Treatment (CSAT):

Historically, the role of families has been underdeveloped within the treatment system for youth with substance use disorders. The efforts behind promoting state-level substance abuse treatment grants emphasized that a family-focused treatment and recovery system for youth with substance use disorders can result from mutually respectful and beneficial family-professional collaborative partnerships. Through these collaborative partnerships, families can learn about current services, policies and procedures, emerging trends/challenges and research on the system from professionals; and professionals learn to appreciate the unique experiences, perspectives, strengths and challenges from families.

"There are significant and important differences in how the disease of addiction affects families according to their cultural, racial, or ethnic backgrounds; their geographic location; their socioeconomic class; and their access to services, supports, or other resources" (Smith et al., 2009, p. 2). Thus, it is necessary to ensure that all families of youth receiving treatment and recovery services for substance use disorders are engaged, represented, valued, supported, and provided opportunities to be included in meaningful ways. Raising public awareness and educating families on adolescent substance use disorder treatment and recovery issues, and providing information on services and supports greatly benefit families who are trying to navigate the system. Given encouragement, information, tools and resources, family members can not only participate in their own child's recovery, but also expand family involvement in ongoing treatment and recovery system activities at federal, tribal, state, and community levels.

2008 Designing a Recovery-Oriented Model for Adolescents and Transition Age Youth with Substance Use or Co-Occurring Mental Health Disorders:

Five years ago, the Substance Abuse and Mental Health Services Administration (SAMHSA) and its Center for Substance Abuse Treatment (CSAT) and Center for Mental Health Services (CMHS) hosted a consultative session. Youth in treatment or post-treatment for substance use or co-occurring mental health disorders were invited, along with their families. Also invited were providers, researchers, and federal and state-level policy-makers. The objective of this session was to develop a recovery-oriented care model for adolescents and transition age youth with substance use or co-occurring mental health disorders (SU/COD). To date, the concepts and principles of recovery-oriented care have been gaining acceptance for adults with substance use disorders and/or mental health disorders. Less attention, however, has been centered on understanding the need for a developmentally appropriate recovery system for adolescents and transition age youth with substance use or co-occurring mental health disorders. The resulting recommendations



from consultation sessions yielded the “Ecology of Recovery,” which can be used as a guide for evaluating ways to influence the political and social systems surrounding at-risk youth.

The 2020 National College Attainment Goal:

By 2020, America is to once again have the highest proportion of college graduates in the world. To achieve this bold goal for college completion, a strong emphasis has been placed on making America’s community colleges stronger, ensuring that they are gateways to economic prosperity and educational opportunities for millions of Americans each year. There are more than 1,100 community colleges in America providing students and workers with critical skills to succeed in a 21st century economy. To help reach the college attainment goal, the Obama Administration has called for an additional five million graduates from community colleges by 2020. Working in partnership with states and communities, community colleges are well suited to promote the dual goal of academic and on-the-job preparedness for the next generation of American workers.

Social leadership and entrepreneurship is needed to find and fund community-based solutions that create positive social support networks and advance education for students in recovery from a substance use disorder.

Community-based approaches to public health, inclusive of substance use disorders, are being recognized and supported as a preferred strategy.

For the first time, the U.S. Federal Government is prioritizing community-based prevention programs aimed at helping youth in recovery, and numerous studies on public health are pointing to the fact that community-based prevention programs work. An increasing body of evidence demonstrates that well-designed interventions can change behavior and reduce both the incidence and severity of disease. In July 2008, Trust for America’s Health published *Prevention for a Healthier America*, which demonstrated that modest investments in community-based preventions (\$10 per person) could result in dramatic health care savings (\$16.5 billion in five years).

Developmental asset research, which first emerged in the early 1990s, has continued to identify a set of skills, experiences, relationships, and behaviors that enable young people to develop into successful and contributing adults.

During the past two decades, the Developmental Assets framework of the Search Institute has become the most frequently cited and widely utilized set in the world, creating what Stanford University’s William Damon described as a “sea change” in adolescent development. Studies from The Stacie Mathewson Foundation have been leveraging these asset models to describe community-based assets that can help students in recovery to thrive in the educational experience. To date, asset models have had limited application within the field of youth recovery. The application of asset models in this context can aid and inform researchers and practitioners interested in the advancement and proliferation of student-centric and family-oriented recovery programs.



The concept of “network weaving” is being seen as the catalyst in helping community organizers and grant makers to amplify their place-based efforts and connect communities that span geographies. The term refers to the idea of making connections among people in a group in order to strengthen existing ties, bring new people into the fold and bridge divides around social causes. Network platforms, such as the new Capacity site, can serve as vehicles for mobilizing collective action on a large scale so that important change activities can spread quickly without having to be routed through a central authority.

Preferences for consuming information have moved toward information which is presented visually and accessible online.

Increasingly people prefer to go online to get information, where visual information can be consumed at a glance versus through long text-based documents. Moreover, the Internet has become an avenue for people to connect with others who are facing similar (oftentimes niche) medical states or other social pressures. Centers of information regarding niche interests (such as peer-based recovery support services) attract communities of people who are eager to connect with one another.

The economic recession has the most impact on those without certain levels of educational achievement.

With the loss of manufacturing and industry jobs to overseas competitors, the U.S. job market for uneducated jobs is shrinking. Moreover, with the recent recession, those without four-year college degrees have been the hardest hit. This sector alone has lost 5.8 million jobs from late 2007 to early 2012 - a 10% workforce reduction that has not been reversed. This is in contrast to those who have four-year degrees (who regained all jobs lost during that period) and those who have advanced degrees (who experienced no net job loss during the recession). The lack of job prospects for uneducated workers limits options for secondary and post-secondary dropouts, making graduation more of a necessity. For those who dropped out of school for reasons of treatment and recovery, this means that having the life skills needed to return to an educational setting is imperative.

Attention for “America’s Dropout Crisis” is placing renewed focus on existing solutions such as recovery schools and peer-based recovery support programs.

The authors of this crisis report are leading researchers from the Institute for Behavior and Health, Inc., The Center on Young Adult Health and Development and Treatment Research Institute. They are interested in learning more about dropout prevention programs that include the identification and intervention of substance use of at-risk students. Rather than develop strategies de novo, their goal is to identify, extend and improve existing intervention models.



Dr. Andrew Finch of Vanderbilt University, an authority on recovery schools, has identified a unique set of social changes that might greatly impact and influence recovery high schools and school-based recovery efforts at-large. What's driving these changes is a convergence of forces. There have been new insights from recent research on adolescent addiction, treatment and recovery. There have been high-profile incidents such as the tragedy of Newtown and the outbreak of bullying both in person and through social media. There have been revisions to the Diagnostic and Statistical Manual (DSM-V) that will increase the number of qualifying youth. There will be the Affordable Care Act, which will alter the way mental health and substance abuse services are provided and expand the base of adolescents seeking treatment. And there will continue to be a growing need for continuing care, as access to treatment increases.

One or two of these issues could transform youth recovery support services, but due to the convergence of all these factors in such a short period of time, the opportune time for school-based recovery services to dramatically expand is now.

Research over the last decade has confirmed:

- Adolescents can develop substance use and addictive disorders. Many doubted that this was even possible. And while they may present differently than adults, adolescents do become addicted.
- The younger a person starts using, the greater the risk of addiction. The younger a person stops using, the greater the prognosis for recovery. This is a classic good news/bad news scenario, and the key to a positive outcome is intervening earlier in the process.
- Addiction is a chronic disease and recovery is not a linear process. This means it can take years or a lifetime to recover; and recovery is often marked by multiple relapses and treatment episodes.
- Co-occurring mental health and substance abuse disorders are more prevalent than substance use disorders alone. At one time, it was thought a minority of adolescents with an addiction might have a co-occurring mental health disorder. Now we know it is a majority, and many young people in recovery are trauma survivors as well.
- Treatment with a continuing care component has better outcomes than treatment with no continuing care component. Though the outcomes vary according to program quality and implementation, there are empirical studies to support the importance of continuing care.



High profile incidents have generated an interest in school mental health.

In the wake of tragedies such as Newtown and the growth of bullying both in person and in cyberspace, schools have been called to address mental health issues. The value of social emotional learning and character development in schools has grown. Studies have shown how these traits enhance student learning and improve a student's chance of earning a high school diploma. Many states have begun reviewing their school mental health policies, and in some cases, have authorized funding to expand them. In January 2013, Senator Al Franken introduced federal legislation to address school mental health. While passage is not imminent, even the posting of such a law affirms the importance of this issue. In fact, the most recent Race to the Top federal funding legislation offered incentives for schools to offer programs in social emotional learning.

Revised Diagnostic & Statistical Manual (DSM-V) may increase the number of qualifying youth.

The DSM-V was released in May 2013, and while it may take a while to blanket the treatment community, some feel the new manual (and its revised "Substance Use & Addictive Disorders" label) will increase the number of youth who will receive a diagnosis and thus qualify for services. This is in part due to expansion of the list of recognized symptoms for addiction and the reduction in the number of symptoms needed for a diagnosis of substance use or addictive disorder.

The Affordable Care Act (ACA) will bring change to the field.

The ACA will alter the way mental health and substance abuse services are provided and expand the base of adolescents with resources to access treatment. While many elements of the ACA have already been implemented, three major milestones will occur between January 1, 2013 and January 1, 2014.

- Starting January 1, 2013, the law established a national pilot program to pay hospitals, doctors, and other providers a flat rate for an episode of care rather than billing for each service separately. The idea is to coordinate services, and ultimately providers will be paid for an episode and need to find the most efficient way to service the problem.
- On October 1, 2013, states will receive two more years of funding to continue coverage for children not eligible for Medicaid. This will keep children in the pipeline for services.
- Then, on January 1, 2014, most individuals who can afford it will be required to obtain basic health insurance coverage and people can start buying insurance in the Health Insurance Marketplace instead of through employer plans.
- All of these items from the ACA will increase the number of people with access to health care, though none require growth in the number of service providers or programs.



Thus, there will likely be more people eligible for and able to pay for services than there are programs to serve them. This is a golden opportunity for innovation in mental health and substance use disorder programming—especially at access points like school-based clinics.

As access to and demand for treatment grows, so will the need for continuing care.

As more students access services in schools, districts will be compelled to offer continuing care services, and for many students, these services will require more than the traditional school can offer. The types of school-based approaches that can address continuing care include:

- After-school/after-care programs.
- Assertive Continuing Care community-based program.
- Recovery Classrooms (including school-day support group meetings).
- Student Assistance Programs and counselors.
- Recovery High Schools (both schools-within-schools and stand-alone programs).
- Family education and intervention programs.



“One hundred local recovery advocacy organizations, each with a small core of committed members, could change how this country perceives and responds to those with persistent alcohol or other drug problems.”

– William L. White
The Rhetoric of Recovery Advocacy:
An Essay on the Power of Language



Transforming Youth Recovery

The Stacie Mathewson Foundation is a private philanthropic foundation. It was established in 2011 to support initiatives focused on the well-being of young people and families who are courageously facing the disease of addiction. In 2013, The Foundation launched a 501(c)(3) nonprofit, **Transforming Youth Recovery**, to intervene and encourage advocacy for those services needed by youth and families facing substance use disorders. The result will be an accelerated rate of change in how we deal with addiction in the United States.

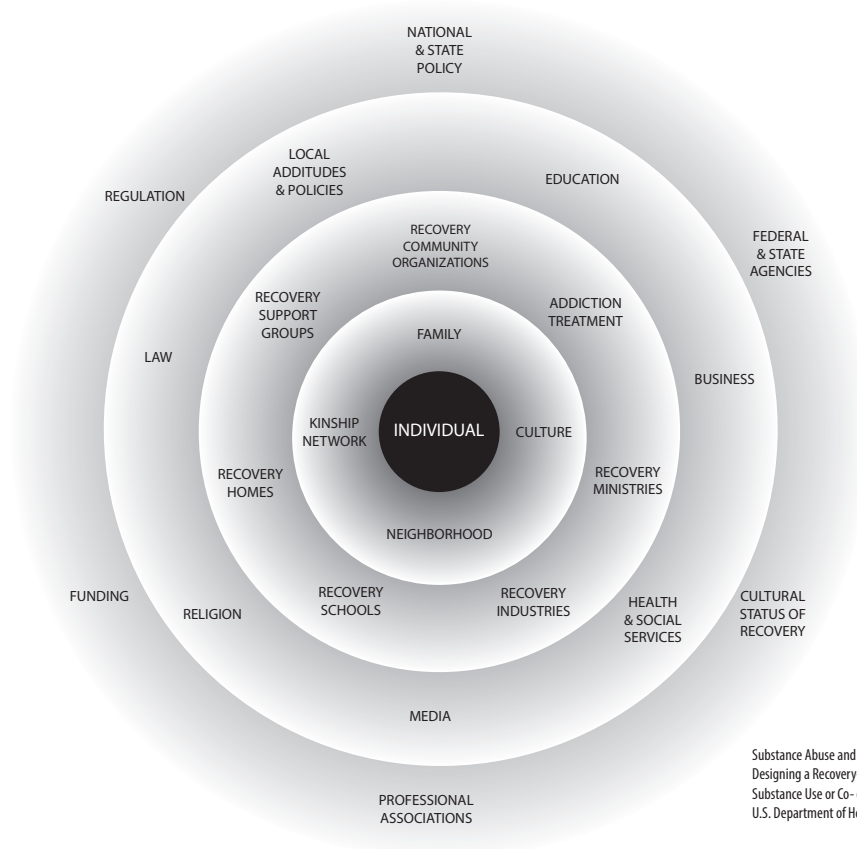
With an emphasis on scale, urgency and organizational unity, *Transforming Youth Recovery* is focused on answering the questions: How can we build the capacity of institutions, local communities and families to help youth and young adults in recovery thrive within primary, secondary and post-secondary educational settings, and how might those efforts create a ripple effect in our communities and the world?

To answer these questions, *Transforming Youth Recovery* is looking specifically at the educational, peer and family networks that influence youth development and achievement, and it is both studying and conceiving novel approaches that have the potential to dramatically expand school-based recovery support services.



Transforming Youth Recovery understands that it is working within an existing ecology of recovery, which was effectively modeled during a 2008 consultative session sponsored by the Substance Abuse and Mental Health Services Administration:

ASSETS AND VULNERABILITIES FOR THE YOUNG PERSON IN RECOVERY



Substance Abuse and Mental Health Services Administration. (2009).
Designing a Recovery-Oriented Care Model for Adolescents and Transition Age Youth with
Substance Use or Co-occurring Mental Health Disorders. Rockville, MD:
U.S. Department of Health and Human Services.

As depicted here, the ecology of recovery begins with the individual, who embarks on the recovery journey with vulnerabilities as well as access to helpful assets. The individual in recovery is immediately influenced by their family, culture, neighborhood and network of kinship; but the ecology doesn't stop there. It radiates outward through succeeding layers that can have important influences on the individual even as they grow more distant and less conspicuous.

Inherent in all approaches conceived by Transforming Youth Recovery is an unwavering belief that support services are best initiated and sustained through the mobilization of localized community assets into relevant recovery practices and coalitions. To help remove barriers to local action, the organization advocates for reforms in public policy, heightens awareness to help erase the social stigma associated with addiction and funds studies aimed at uncovering and promoting best practices within the recovery field.



The emergence of Transforming Youth Recovery comes at a unique time. New insights from research on adolescent addiction, treatment and recovery are informing and shaping new approaches that need dissemination. Revisions to the Diagnostic and Statistical Manual (DSM-V) along with the Affordable Care Act are poised to significantly alter the way mental health and substance abuse services are provided. They will also expand the base of adolescents seeking treatment. As access to treatment increases, the need for continuing care will surge—with significant implications for the educational system and the connected family and community support network.

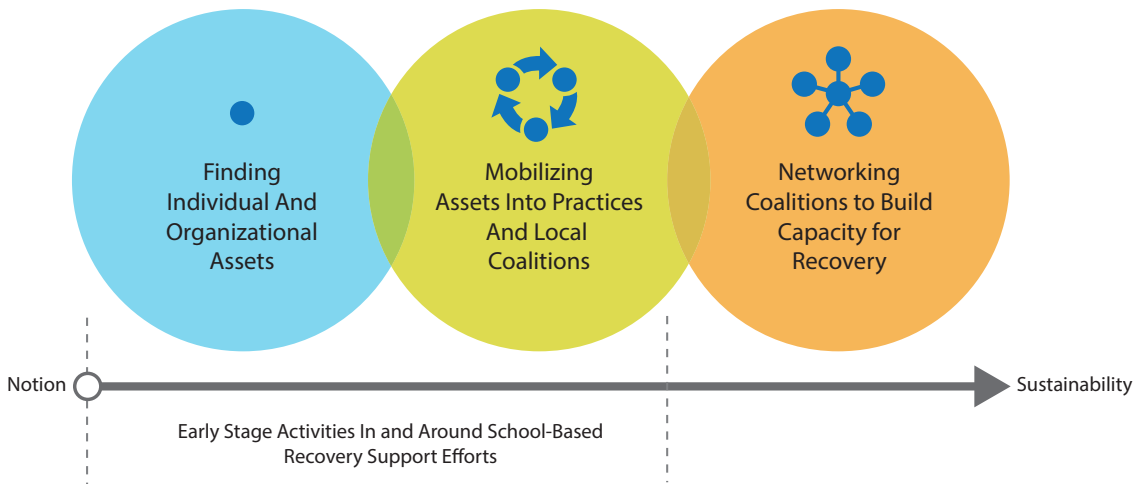
The effort behind Transforming Youth Recovery is in direct response to those forces that are driving current national political and social agendas:

- The Office of National Drug Control Policy is giving special attention to substance use disorders among adolescents and young adults through the National Drug Control Strategy (2013). This will emphasize the modification or elimination of laws, rules, policies, and practices that create barriers to recovery.
- The Working Draft on Recovery/Relapse Prevention in Educational Settings (Department of Education, Office of Safe and Drug-Free Schools, 2010) suggests that adolescence is a critical period for the onset of substance use. The recovering alcoholic or other drug-addicted youth will often face the challenge of continuing recovery while immersed in a culture of drinking and other drug use commonly found in peer groups.
- The Report on Improving Access to Children’s Mental Health Care Report (The Center for Health and Health Care in Schools, 2013) reminds us that as of January 2014, coverage of mental health conditions and substance use disorders will be required as part of the broad Essential Benefits package of services under the Affordable Care Act. The expectation is that mental health and substance abuse coverage will substantially increase and funding for prevention, early intervention, and treatment services and programs will likely expand.
- The 2020 National College Attainment Goal has been called on by the Obama Administrations for an additional five million graduates from community colleges by 2020.

Also inherent in all approaches conceived by Transforming Youth Recovery is the belief that progress is driven by connecting people, ideas and resources. This means investing in more than discrete programs. It means cultivating networks of all kinds—coalitions, alliances, school-based initiatives and learning communities. And it means creating capacity-building network platforms designed to help local organizers both amplify school-based efforts and connect recovery communities that span geographies.



The combination of taking a capacity-building approach while actively cultivating networks for collective action reflects the strategic intention of Transforming Youth Recovery. By acting in this way, Transforming Youth Recovery is helping to broaden the impact of those that are serving and supporting youth and young adults in recovery, both locally and across the nation. The vision is to give students, families and communities the ability to look out, find others who have are building capacities similar to their own, and rapidly copy and emulate those recovery practices that are helping youth and young adults live their best life.



CAPACITY NETWORK

Connecting people, ideas and resources to amplify school-based and recovery community efforts that span geographies.



AREAS OF FOCUS

Transforming Youth Recovery looks to initiate capacity-building activities in and around a diverse set of school-based recovery support efforts. Stated areas of focus signal an intention to accelerate the rate of change within those environments that directly influence youth and young adults in recovery. The acceleration comes from funded “seeds of hope”—grant programs made available to initiate early-stage activities capable of building school-based and community capacity for recovery efforts. It is through these early-stage activities that the organization hopes to move dispersed or underutilized services to networked support structures accessible to any youth vulnerable to a substance use disorder.

Areas of focus for Transforming Youth Recovery include:

- [Higher Education \(School-Based Recovery Support\)](#)
- [High Schools \(School-Based Recovery Support\)](#)
- [Community Colleges \(School-Based Recovery Support\)](#)
- [Life Skills Initiatives](#)
- [K-8th Grade Prevention and Intervention \(Family Education and Support\)](#)



Higher Education-Based Recovery Support

Strategic Intention—To increase the capacity of collegiate environments to provide students in recovery the practices and support necessary to help them thrive in the fullness of the college experience.

Tactical Intention—To help students in recovery and the faculty/staff who support them find and mobilize community assets through the provision of toolkits, assistance and \$10,000 seed grants to early-stage efforts at 100 colleges by 2015.

With an increasing social awareness of the number of young adults facing substance abuse, a belief has developed that institutional acceptance of programmatic tools is needed to support these students in higher education. According to this belief, college administrators and counselors currently lack the dedicated resources for helping students in recovery fulfill their academic and personal potential. In other words, there is a perception that a resource gap is contributing to the limited number of collegiate recovery programs that are active and flourishing in the United States.

This premise has led federal agencies and academic institutions to approach the needed expansion of collegiate recovery from a program focus—a problem-solving view that seeks to identify and bring forward a distinctive set of activities and services necessary to address supposed deficiencies in supporting college students in recovery. The primary strategy to date has been to research and create collegiate recovery programs, and then disseminate specific standards to expand the reach of recovery support on college campuses.

Findings from an asset-based research project funded by The Stacie Mathewson Foundation indicates a nearly universally held opinion that supporting college students in recovery consists largely of being able to manage access to resources (many of which are already available within collegiate communities) and building those types of relationships that enable students to take advantage of the full breadth of the collegiate experience. This insight has led Transforming Youth Recovery to concentrate on shifting from a program focus to a relationship focus when it comes



to promoting early-stage initiation of any collegiate recovery effort. This conceptual shift reflects a migration from problem solving to capacity building. It is an approach grounded in the assumption that college communities already have the resources and capabilities necessary to help students in recovery to thrive. Transforming Youth Recovery is placing attention on the removal of barriers that may be constraining students in recovery from accessing those things that could help them thrive in the fullness of their college experience. The focus is on stimulating community support for collegiate recovery programs with a goal of working toward institutional acceptance and ownership of support services necessary in an environment prone to drug and alcohol exposure. Extending further, the organization recognizes there is work needed to influence state and federal policies that might better support collegiate recovery efforts.



High School-Based Recovery Support

Strategic Intention—To support the awareness and implementation of an accreditation process for recovery high schools in order to take advantage of advancements in public and educational policies that extend health care benefits and services to adolescents qualifying for treatment and recovery support.

Tactical Intention—To fund the development of an accreditation process to be administered by the Association of Recovery Schools, resulting in all operating recovery high schools being accredited by 2016.

According to the Substance Abuse and Mental Health Service Administration (SAMHSA), approximately 250,000 youth ages 12-17 are admitted to alcohol and drug treatment programs every year in the United States. This represents only 10% of the total number of youth who need treatment and who meet the diagnostic criteria for a substance use disorder.

Addiction is quickly becoming the number one preventable health issue facing the nation today. A National Institute of Drug Abuse (NIDA) Monitoring the Future survey of over 46,000 youth found an alarming increase in the use of illicit substances while perceived risk of use declined. Most alarming, however, are findings that non-medical use of highly addictive prescription pain medications are on the rise and are being used in relatively high numbers.

Addiction is a preventable disease with its origin in adolescence. One in four people who begin using alcohol and drugs before the age of 18 will develop an addiction. Compare this to one in twenty-five whose first use is at age 21 or older. The age at which people first try many substances has remained relatively constant in recent years. For those using in their teenage years, the age of first use is somewhere between 15 and 17 years old.



All of this points to high schools as the critical educational focal point when it comes to addressing the potentially devastating long-term effects of the disease of addiction. It is essential to ready the nation for serving adolescents in recovery in an environment that promotes both academic and recovery advancement.

A broad market study on recovery high schools is being undertaken by The Stacie Mathewson Foundation on behalf of the Association of Recovery Schools. Included in the study is a state-by-state analysis of the laws, rules, policies and practices that might best support the proliferation of secondary school mental health and recovery support programs across the nation. As more students access treatment and support services, school districts will be compelled to find solutions for continuing care. For many students, such services will require more than a traditional school can offer. Evidence suggests that influences and social environments play a key role in sustained recovery for many young people, and recovery high schools reflect the only approach that involves changing the environment for students. Focus will be placed on sharing legislative advancements at local, state and national levels that support operating and sustaining recovery schools in accordance with evidence-based best practices.



Community College-Based Recovery Support

Strategic Intention—To increase the capacity of community college environments to provide students in recovery the support and skills necessary to help them successfully transition to desired life and academic pursuits.

Tactical Intention—To help students in recovery and the faculty/staff who support them create asset-rich community college recovery environments through the dissemination of a seed grant program by the end of 2014.

Finally, a planned study of community college receptiveness to students in recovery will seek to expand the existing asset-based framework for recovery efforts being created by Transforming Youth Recovery for post-secondary educational settings.

Community colleges, which enroll about 44% of the nation's college students, are positioned to play a major role in determining how quickly educational attainment rises in the United States. While the nation once led the world in educational attainment by a wide margin, that position has been lost over the past generation. Recent focus has been placed on regaining the lead by 2020, and community colleges will need to adapt significantly for that goal to be met.

While the role of community colleges in advancing educational attainment is recognized, what is less understood is the existence of these institutions as a major crossroad for students in recovery. Addiction is destructive in many ways; perhaps no more so than in the advancement of academics. Most adolescents in recovery who have been able to satisfy requirements to successfully graduate from high school find themselves ill equipped for an immediate transition to a four-year higher education institution. Community colleges offer the opportunity to regain self-efficacy and student skills that are needed to succeed in more rigorous academic environments.



But little is known about recovery support and services in the community college setting. While collegiate recovery communities in more established higher education institutions are beginning to advance through attention to best practice sharing and replication models, the community colleges landscape for students in recovery is relatively unknown.

Transforming Youth Recovery is committed to addressing the important transitional environment of community colleges by designing ways to help students in recovery find and access the support they need to advance their educational goals. Similar to the approach taken for collegiate recovery efforts, a capacity-building approach will guide Transforming Youth Recovery in extending assistance to community colleges receptive to serving and supporting students in recovery.



Life Skills Initiatives

Strategic Intention—To study, identify and build community coalitions capable of addressing barriers to the acquisition of life skills needed by young adults in recovery.

Tactical Intention—To help communities build capacity for life skills initiatives through a direct assistance and dissemination program by the end of 2014.

The impact of adolescent substance abuse on the educational system is profound. Adolescent substance abuse is one of the largest preventable and costly public health issues in the United States. It is estimated that the total costs to federal, state and local governments of substance abuse, which has its roots in adolescence, costs the nation more than \$600 billion dollars per year. Add to this the further impact that the use of drugs and alcohol is having on academic success and retention in a nation where currently 30% of high school students are not graduating.

Teenagers face the most difficult of life's passages; and knowing when and how to seek help is crucial. Once dependency on drugs and alcohol becomes a part of an adolescent's routine, behavioral problems most certainly intensify. Most substance use disorders and mental health problems are considered chronic. That is, once an adolescent is facing these problems, they will not go away on their own. Suspending or dropping out of traditional school systems becomes a common occurrence for the substance use disorder population.

Students drop out or have limited academic success for a variety of reasons including being under-motivated, unchallenged, overcrowding, lacking basic life skills, lacking confidence in their ability to apply themselves, and educational systems that are not evolving with student needs. Transforming Youth Recovery looks to play an active role in two of these areas—the needed acquisition of basic life skills while advocating for an evolved educational system that recognizes the need for intervention, prevention and recovery support programs.



The efforts of the organization are predominately focused on the gap between high school and higher education, which students in recovery are most vulnerable to the 'failure to launch' phenomenon. Nationwide, there is a large and growing group of intelligent youth who just are not prepared for the demands of a college or work routine. The strategies and supports that worked in high school when protected at home are not adequate to the new demands that independent living and advanced learning can place on young adults.

Studies initiating through Transforming Youth Recovery aim to identify how best to define and deliver needed life skills to transitioning young adults in recovery. It is expected that these initiatives will require significant outreach and coalition building. The organization stands ready to be a major contributor to helping those students just identifying their addiction to successfully sustain recovery and find their life's path.



Family Education for K-8 Intervention and Prevention

Strategic Intention—To undertake outreach efforts aimed at delaying first use of substances that correlate to a higher rate of potential dependence later in life.

Tactical Intention—To equip families and communities with emerging knowledge and strategies for strengthening efforts aimed at protecting youth at-risk for substance use disorders.

Involving families and local communities in any recovery process is vital. Family history often plays a significant role in addiction, and outcomes can be enhanced when family members are actively involved in a youth recovery plan. To ensure a healthy and thriving “ecology of recovery,” focused attention must be placed on the community recovery resources and family support services that can be critical in any effort to serve students in recovery.

The capacity building efforts undertaken by Transforming Youth Recovery are intended to expose and maximize all family, institutional and community assets that can be leveraged to help students in recovery thrive in the fullness of their educational experiences. This is the organizational North Star.

But efforts need to go deeper. Sixty-five percent of Americans report that addiction to alcohol and other drugs has had a significant impact on their lives and families. Emerging research is pointing to a new direction that may assist in reducing the damaging effects of the disease of addiction on families and communities. That direction is rooted in prevention efforts designed to “delay the onset of initiation”—the age of first use of alcohol or drugs.

Initiation of substance use typically occurs during late teens and early twenties. For those who are at-risk for substance use disorders, initiation happens between ages of 15-17. The initiation age when people first try many substances has remained relatively constant in recent years. But studies have also shown that first drug and alcohol use can start much earlier--as early as age 11 or 12. Many times behavioral issues displayed by a child as young as five years-old can be red flags for



predisposition to the disease of addiction. This is especially true if addiction is already in the family history.

An early age of first use is correlated with a higher rate of dependence later in life. However, it is unclear if there is a causal relationship between age of initiation and dependence, or if this correlation merely reflects other risk factors such as socio-economic status. What is clear from 20 years of National Institutes of Health research that has identified prevention and treatment programs that work, is the fact that most programs still need to be implemented broadly. This is particularly true when it comes to family education on intervention and prevention programs available for children ages 5-13 and in their early years of schooling.

Transforming Youth Recovery is positioned to be part of a solution of delaying substance use initiation and finding novel ways to strengthen the support system surrounding youth who emerge in recovery when unable to escape the disease of addiction. A continual focus for the organization is to better understand the life trajectory of youth when they are introduced to substances such as alcohol, medicine and prescription drugs at certain ages. The belief is that a greater exposure of the impacts of initiation at certain ages can help families and communities protect the well-being of youth at all points of life and educational development.



STRATEGIC DESTINATIONS 2013-2015

Inherent in the articulation of any strategic destination is the commitment from the board of advisors and professional staff to follow a purposeful path that will bring the mission to life. Three key near-term destinations have been identified, which symbolize the desire to dramatically accelerate the rate of change when it comes to serving and supporting youth in recovery in our communities and in our schools.

We are not shy in proclaiming that acceleration is why we exist. While significant contributions continue to emerge from academic and governmental sectors, the rate of change has been too slow in the context of lives that need saving. We simply have run out of time.

These are the destinations we are moving toward—rapidly and without pause.

1 • Research-driven studies will be completed to uncover the programmatic, political and social landscape in and around school-based recovery efforts.

Transforming Youth Recovery is looking to take an entrepreneurial approach to building capacity for advancing change within defined areas of focus. The formula is straightforward. Study what is working and become steeped in the knowledge necessary to establish expertise and gain authority. Based on what is working, organize and disseminate accessible toolkits for communities and practitioners to implement capacity-building activities with and for students in recovery.

These are the near-term studies that have been identified:

The Assets for Building Collegiate Recovery Capacity—April, 2013

- Identify community-based assets that can help students in recovery to thrive in the fullness of the college experience.
- Inform early-stage grants for collegiate recovery efforts.
- Conduct annual program surveys to refresh asset categories and identify asset-based practices.

Market Study for Recovery High Schools—July, 2013

- Undertake state-by-state analysis for favorability indicators, identification of legislative challenges and opportunities for collaborative sharing on state-specific tactics for starting and operating recovery schools.
- Inform necessary support for a national accreditation process through the Association of Recovery Schools.
- Guide significant operating support for the Association of Recovery Schools as the nation's only nonprofit organization supporting recovery high schools.



Thriving Quotient for Students in Recovery—August, 2013

- Develop beta instrument for indicators of “thriving” among students in recovery.
- Identify existing research into academic and well-being thriving assessments and use to create a unique, unified survey instrument for recovery support program use and testing.
- Use to better understand correlation between students “thriving” in recovery and access to identified community-based assets.
- Pay specific attention to family involvement in the “recovery process”.

Asset Framework for Community Colleges—December, 2013

- Expand initial asset-based research into the community college setting to derive strategy for expansion and growth of recovery support services.
- Define the landscape for recovery support at national community colleges.
- Investigate definable “life skills” that can benefit transitional youth in recovery.
- Address potential influence on emerging national goals for educational attainment.

Market Study for Youth and Family Intervention, Prevention and Recovery Support Services - 2014

- Investigate the school-based programs and services that are “working” in terms of prevention for youth at-risk for substance use disorders.
- Identify family support services, needs and influences.
- Pay attention to research on “delaying initiation of alcohol and drug use” during adolescence and the trajectory of life paths with initiation at certain ages.
- Evaluate correlative high risk behaviors displayed in children and family components between grade levels of Kindergarten through middle school.

2. Investments in network platforms will be made to connect people, ideas and resources.

Transforming Youth Recovery is building a robust network platform, Capacitytype, to serve as a vehicle for mobilizing collective action on a large scale. The big idea is to allow activities to spread quickly without being routed through a central authority. The platform is to offer space for making connections among people in order to strengthen existing ties, bring new people into the fold and bridge divides. It is how organizers and funders can both amplify their place-based efforts and connect communities that span geographies.

The engine underneath the platform is the act of community mapping. Community mapping is the dynamic discipline of creating an inventory of individual, organizational and physical assets that shape the practices of each school-based recovery effort. Community-specific contributions help others rapidly find, copy and emulate those capacity-types that are emerging to support students in recovery.



Ongoing investments into Capacitytype are aimed at supporting relationship and network analysis within and among coalitions emerging to support and serve youth in recovery within communities. Integration of partner GIS mapping efforts will enhance the efforts of students and families looking to access and take advantage of recovery support near or at their school of choice. Professionals will also be able to weave those relationships that can seamlessly flow to create a continuum of care in and out of recovery.

The collective knowledge offered through networked activities (crowd sourcing), as opposed to anecdotal knowledge from one or a few programs, will provide an effective way to help address research gaps and share best practices within and among recovery communities across the country. And community capacity building through networking offers a way to strengthen and teach organizations and students the value of relationships that can thrive in recovery outside of the school setting.

3. Dissemination grants will provide seeds of hope, infuse energy and mobilize community-based assets to dramatically expand the footprint of youth recovery support efforts.

The creation of toolkits to implement capacity-building activities and the promotion of a networked community of students and practitioners are to be stimulated by “seeds of hope” grant programs administered by Transforming Youth Recovery.

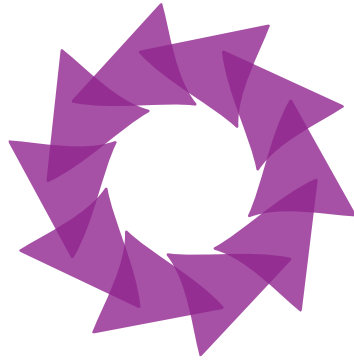
The grant programs, created for each defined area of focus, are designed to take advantage of multiple tactics understood to advance change and garner genuine community support for local recovery support efforts.

The cultivation of grant-specific peer classes of practitioners is intended to rapidly expand recovery support capacities. A pilot program for early-stage collegiate recovery efforts has a goal of reaching 100 new colleges by the end of 2015. Along the way careful evaluation will inform the grant programs due to come online after completion of each areas of focus study.

To assist in measuring the effectiveness of grant programs and the health of networks, partnerships with recognized subject-matter experts and advocacy leaders aim to strengthen and deepen the utility of asset-based research that is being applied to help students in recovery thrive in the fullness of their educational experiences.

4. Sustain the North Star of strengthening healthy action taken by families to properly care for the disease of addiction.

In total, Transforming Youth Recovery is undertaking a comprehensive strategy to accelerate change and give every student what they deserve—a sober place to learn and grow.



Transforming Youth Recovery

“It is from numberless diverse acts of courage and belief that human history is shaped. Each time a man stands up for an ideal, or acts to improve the lot of others, or strikes out against injustice, he sends forth a tiny ripple of hope, and crossing each other from a million different centers of energy and daring, those ripples build a current that can sweep down the mightiest walls of oppression and resistance.”

—Robert Kennedy