HOUSING AND HARM REDUCTION-PROMOTING SAFE USE

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HOUSING AND HARM REDUCTION
PROMOTING SAFE USE

• THE COLUMBUS CONNECTION
  YAMCA HOUSING OVER 450 MEN AND A
  WOMAN IN 20 UNIT APARTMENT
  BUILDINGS (340)
• YAMCA HAS A NUMBER FOR
  MEDICATION PROGRAM INCLUDI
  G INTRAVENOUS AND SCATTERED
• YAMCA COLUMBUS CITY)
  HOUSING MEN WITH THE OTHER
  PROGRAMS MEN AND WOMEN

EDUCATING STAFF

• THE YAMCA HOUSING PROGRAMS MAY NOT
  ALWAYS EXIST IN A HARM REDUCTION
  ENVIRONMENT
• SINE 2015, BUT WORKS HARD TO EDUCATE
  STAFF IN THE HARM REDUCTION
  PROGRAMS INTO COMMUNITY AND MENTAL
  HEALTH
• THE STAFF, CLINICAL, AND OPERATIONAL
  STAFF WANT TO EXPOSE THEIR
  STAFF TO THE HARM REDUCTION
  PROGRAMS
• PREVENT CLINICAL STAFF MIGHT USE A
  MEDICATION PROGRAM TO CONSUME
  HARM REDUCTION CLINIC IN NEED OF A
  HEALTHY INCOME
• PREVENT THE STAFF MEMBERS BEING
  OVERWORKED OR STRESSES AT THE YAMCA
  HOUSING AND EDUCATION AS WELL AS
  SUPPORTING SOCIAL WORK AND MENTAL
  HEALTH PROGRAMS AND OTHER
  CLINICAL STAFF.
STAFF ROLES

- Staff roles include the following responsibilities:
  1. Providing a welcoming and supportive environment for clients and staff
  2. Coordinating services to ensure smooth operations
  3. Assisting with client assessments and referrals

STAFF ROLES: BUILDING TRUST AND RAPPORT

- Our mission is to build trust and rapport through:
  1. Active listening
  2. Empathy and understanding
  3. Open communication

WHAT ARE OUR GOALS: TO KEEP OUR CLIENTS HOUSED, IMPROVE THEIR QUALITY OF LIFE AND TO KEEP THEM ALIVE...

- We do not evict residents for using.
- We have a harm reduction and safe public space for clients to engage in safe practices to prevent and reduce drug use.
- We provide free syringes to help our clients and encourage them to pass them on to others.
OUTREACH SERVICES

- Meet with clients after face-to-face meetings to provide information on housing opportunities
- Coordinate with Heartland Alliance to provide wraparound services
- Organize public health and community health services
- Ensure safe and secure environment

HTTPS://WWW.HEARTLANDALLIANCE.ORG/MHRICONFERENCE/535-2-2/

PROVIDING EDUCATION FOR THE CLIENTS

- Work with clients to create a safety plan for the service
- Identify the risk
- Choose the action
- Educate about safety
- Work with clients to develop a safety plan
- Provide safety
- Educate about safety
- Support clients in creating a safety plan

HTTPS://WWW.BRAVE.COOP

PROVIDING EDUCATION AND CONTINUED SUPPORT FOR CLIENTS

- Encourage clients to continue attending support group meetings
- Provide information on community resources
- Connect clients with mental health services
- Provide ongoing support
- Connect clients with community resources

Equitas Health
The City of Columbus
Public Health
RECOVERY CAPITAL TREATMENT AND WHAT IS NEEDED FOR RECOVERY
A BRIEF HISTORY

- Substance Abuse Treatment grew out of the 12Steps model, and many still adhere to an
  abstinence" model, while evidence shows that a Portugal-style approach is more
  successful.
- Private insurance still usually pays for treatment although it was not initially
  required by law under the Mental Health Parity Act and the Pinion Act (Pinion Act
  was not successfully implemented until President Obama signed the last
  portion of it in June 2010).
- Prior to the Act people could receive care only for kicks or if they were in.
- Because people usually needed help in the first place, states usually paid for
  treatment before the Federal and State Block Grants.

RECOVERY CAPITAL TREATMENT AND WHAT IS NEEDED FOR RECOVERY
A BRIEF HISTORY

- Block Grants vs. Medicaid
  - Medicaid is a federal program, whereas block grants are federal
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TYPES OF TREATMENT AND REIMBURSEMENT

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**RECOVERY MANAGEMENT/FIVE YEAR RECOVERY MODEL FOR TX**

- Establish a philosophical framework for sustaining allocation of treatment-related services to provide pre-recovery, recovery, and post-stabilization recovery intervention and stabilization, long-term recovery maintenance, and quality of life enhancement for individuals and families affected by severe substance use disorders.

**RECOVERY CAPITAL**

- Recovery capital is the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery from severe OUD problems (Granfield & Cloud, 1999).

**RECOVERY CAPITAL**

- Family/Social Recovery Capital:
  - Financial support from family members.
  - Family involvement in treatment and support groups.
  - Social network support for recovery.

- Emotional Recovery Capital:
  - Personal recovery capital.
  - Emotional support from family members.
  - Coping mechanisms for recovery.

- Community Recovery Capital:
  - Access to community-based recovery services.
  - Support from the community.
  - Community involvement in recovery services.
Most clients with severely depleted family and community recovery capital gain little from individually focused addiction treatment that fails to mobilize family and community resources. Long term recovery outcomes for those with the most severe AOD problems may have more to do with family and community recovery capital than the attributes of individuals or a particular treatment protocol. Environmental factors can augment or nullify the short term influence of an intervention. Strategies that target family, community recovery capital can elevate long term recovery outcomes as well as elevate the quality of life for both individuals and families in long term recovery.


• The role of recovery support services in recovery-oriented systems of care. [https://store.samhsa.gov/content/sma08-4315/sma08-4315.pdf](https://store.samhsa.gov/content/sma08-4315/sma08-4315.pdf) Retrieved 3/18/2017.


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