



Friends of Recovery - NY

The Value of Recovery Capital:
Building Community, Supporting Families & Allies

Buffalo, NY

September 17th, 2017

Stephanie Campbell
Executive Director

Agenda



- ▶ Welcome & Introduction
- ▶ Stand up for Recovery: Advocacy in Action Video
- ▶ RCO Tool Kit
- ▶ RCO Panel
- ▶ Break
- ▶ Suicide & SUD
- ▶ Family to Family Recovery Resource Guide
- ▶ Family Panel
- ▶ Wrap/Evaluations





Who are we?

Friends of Recovery - New York (FOR-NY) is a statewide coalition of people in recovery from addiction to alcohol and other drugs.

The FOR-NY community includes individuals in recovery, our families, friends and allies.

We come together from across New York State to ensure that any person struggling with addiction has the opportunity to recover and reclaim a meaningful life as a member of society.



Our Mission

To demonstrate the power of recovery from addiction, as well as the tremendous value recovery provides to individuals, families and communities throughout New York State and the nation.



Our Vision

We envision a world in which recovery from addiction is both common and celebrated; a world in which the entire spectrum of effective prevention, treatment and recovery support services are available and accessible to all.



Our Beliefs

- Addiction is a public health issue
- Recovery is possible for everyone
- There are many pathways of recovery and everyone finds their own way
- Adequate resources and support are necessary for sustained recovery
- Recovery is about reclaiming a meaningful life as a member of society



Programs & Activities

- Organize Annual Stand up for Recovery Day in Albany
- Produce New York State Recovery Conference
- Conduct & facilitate Education and Training programs
- Advocate for additional funding and legislative support of Recovery
- Moderate Statewide Community-Based Recovery Supports meetings
- Facilitate “Recovery Talks: Community Listening Forums”
- Offer Recovery-Related Film Screenings
- Conduct and Disseminate Recovery-Focused Research
- Produce E-Newsletter, “Recovery Talk”
- Maintain a State of the Art Recovery Website: www.for-ny.org



Humanize: Real Life Stories

Recovery Education and Training

Education is critical to reducing the stigma associated with addiction and creating an informed society where Recovery for individuals and families becomes a societal norm.

- ❖ *Family-to-Family Resource Guide*
- ❖ *“Our Stories Have Power” – Recovery Community Message Training*
- ❖ *“Science of Addiction & Recovery”*
- ❖ *“The Anonymous People & Generation Found Screenings*
- ❖ *Annual Recovery Conference*
- ❖ *Peer Advocate Training/Recovery Coach Academy Listings*
- ❖ *Recovery Arts Festival*

Organize: The Connecting Tissue Community Engagement

Engage individuals, families and allies impacted by addiction and recovery to:

- * Create a culture of Recovery in communities across New York
- * Ensure addiction is addressed as a public health issue, not a crime
- * Eliminate barriers to getting help
- * Advocate for a system that engages/ supports individuals and families

- ❖ *Community Based Recovery Supports- Statewide Meetings*
- ❖ *Recovery Community Organization (RCO) Toolkit*
- ❖ *Community Asset Mapping Training*
- ❖ *Building Recovery Capital Training*
- ❖ *Technical Assistance to local RCOs, Youth Clubhouses & Recovery Community & Outreach Centers*



Mobilize: Energizing for Change Public Policy and Advocacy

Adequate resources & support are necessary for sustained recovery to:

- * Ensure addiction is addressed as a public health issue, not a crime
- * Eliminate barriers to getting help
- * Advocate for system that engages/ supports individuals and families
- * Develop non-punitive, nonjudgmental recovery services

- ❖ *Recovery Talks:
Community Listening Forums*
- ❖ *Recovery Needs / Life in Recovery
Surveys*
- ❖ *RCO Toolkit*
- ❖ *Technical Assistance to local
RCOs*
- ❖ *Policy/Advocacy
Committee*

The Changing State of Recovery In NY

How advocacy efforts across New York State are changing public policy around addiction and recovery.



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RECOVERY**
New York

ONE COMMUNITY
ONE VOICE

Stand up for Recovery: Advocacy in Action



Impressions?

Overview:

How to develop
and maintain a
thriving Recovery
Community
Organization

Allison Weingarten

&

Tammy Butler-Fluitt



Recovery Community Organization (RCO) Toolkit



Building A Culture Of Recovery:
A How-To Guide For Developing Local Recovery Capital

RCO Panel:

Firsthand accounts
of community
organizing
experiences

Stephanie Campbell, Moderator



- ▶ Dave Attridge, Recovery Now
- ▶ Ashton Lapoza, Community Outreach for Addiction/Recovery
- ▶ Al Robinson, Spirit of Truth
- ▶ Van Smith, Recovery Houses of Rochester
- ▶ Jonathan Westfall, Catholic Charities

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ONE COMMUNITY
ONE VOICE



15 Minutes Please

SUD & Suicide:

The connection
between
Substance Use
Disorder and
Suicide.

Julie Israel, Save the Michaels
of the World



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ADDICTION AND SUICIDE

SUICIDE: 2016 FACTS & FIGURES

Suicide is a preventable public health problem and a leading cause of death in the United States. More investment in suicide prevention, education and research will prevent the untimely deaths of thousands of Americans each year.

SUICIDE – BASIC FACTS

An American dies by suicide every **12.3 minutes**¹



Americans attempt suicide an estimated **1.1 MILLION** times annually²

90% of those who die by suicide had a diagnosable psychiatric disorder at the time of their death³



In 2014, firearms were the most common method of death by suicide, accounting for **49.9%** of all suicide deaths, followed by suffocation (including hangings) at **26.7%** and poisoning at **15.9%**



For every **woman** who dies by suicide, four **men** die by suicide, but women are 3x more likely to attempt suicide⁴

Nearly **43,000** Americans die by suicide every year.¹ Suicide is the **10th leading cause of death**¹ in the United States

- **2nd** leading cause of death for ages 44 and under
- **5th** leading cause of death for ages 45-54
- The suicide rate among American Indian/Alaska Native adolescents and young adults ages 15-24 is **1.5 times** the national average



Veterans comprise **22.2%** of suicides⁵

SUICIDE – THE COST

\$44 BILLION

The combined medical and work loss costs in the United States each year¹

More than **1.6 MILLION** years of life are lost annually to suicide¹

¹ 2014 data, released December 2015, CDC Web Based Injury Statistics Query and Reporting System (WISQARS)
² National Center for Health Statistics for the year 2006
³ Centers for Disease Control and Prevention, Suicide – Facts at a Glance
⁴ Department of Veterans Affairs 2012 Suicide Data Report



AMERICAN FOUNDATION FOR
Suicide Prevention

afsp.org







a Therapist

City or Zip

Carc
Real

Find a Therapist

L.P.T.

Topics

Get Help

Magazine

Tests

E

Suicide: One of Addiction's Hidden Risks

Individuals with addiction are at higher risk for suicide.

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Posted Feb 20, 2014

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Anyone who cares about an addict has a long list of concerns, not the least of which is that addiction may take their loved one's life. Mostly we fear (<https://www.psychologytoday.com/basics/fear>) getting word of a serious accident or injury or perhaps a drug overdose. What few think about, or actively work to prevent, is suicide. And while suicide is a well-known risk for those suffering with mental health (<https://www.psychologytoday.com/basics/health>) problems, it also requires attention in the assessment and treatment of addiction.

Suicide is the 10th leading cause (<http://www.cdc.gov/nchs/fastats/lcod.htm>) of death in the U.S. Depression (<https://www.psychologytoday.com/basics/depression>) and other mood disorders are the number-one risk factor for suicide, but alcohol (<https://www.psychologytoday.com/basics/alcohol>) and drug abuse (<https://www.psychologytoday.com/conditions/reactive-attachment-disorder>) – even without depression – are a close second (http://www.cdc.gov/violenceprevention/pdf/NVDRS_Data_Brief-a.pdf). In fact, research has shown that the strongest predictor (<http://www.ncbi.nlm.nih.gov/pubmed/2529288>) of suicide is alcoholism, not a psychiatric (<https://www.psychologytoday.com/basics/psychiatry>) diagnosis. People with substance use disorders are about six times (<http://www.psychiatrictimes.com/substance-use-disorder/link-between-substance-abuse-violence-and-suicide>) more likely to commit suicide than the general population.

Substance abuse (<https://www.psychologytoday.com/basics/addiction>) not only increases the likelihood

https://www.psychologytoday.com/blog/real-healing/201402/suicide-one-addiction-s-hidden-risks#_

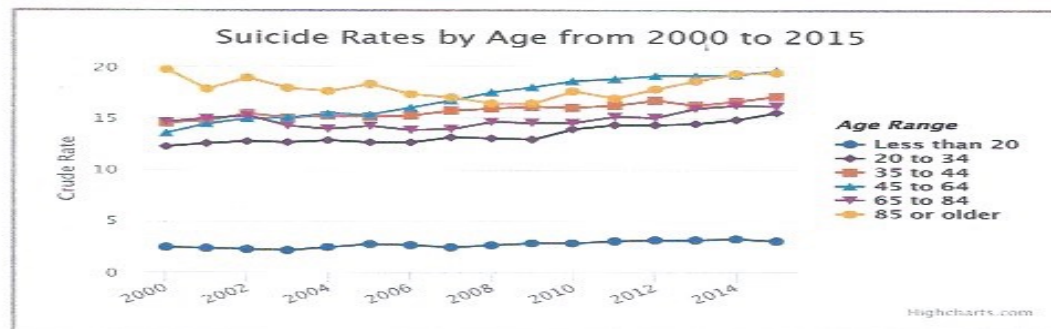
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Clear Selection

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Suicide Rates by Age

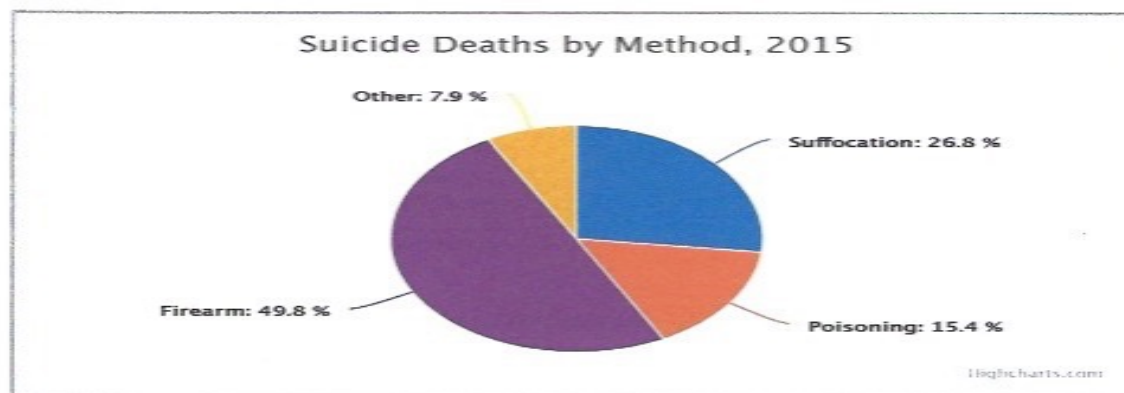
In 2015, the highest suicide rate (19.6) was among adults between 45 and 64 years of age. The second highest rate (19.4) occurred in those 85 years or older. Younger groups have had consistently lower suicide rates than middle-aged and older adults. In 2015, adolescents and young adults aged 15 to 24 had a suicide rate of 12.5.



Suicide Rates by Race/Ethnicity

In 2015, the highest U.S. suicide rate (15.1) was among Whites and the second highest rate (12.6) was among American Indians and Alaska Natives (Figure 5). Much lower and roughly similar rates were found among Asians and Pacific Islanders (6.4), and Blacks (5.6).

Note that the CDC records Hispanic origin separately from the primary racial



Suicide Attempts

No complete count is kept of suicide attempts in the U.S.; however, each year the CDC gathers data from hospitals on non-fatal injuries from self-harm.

494,169 people visited a hospital for injuries due to self-harm. This number suggests that approximately 12 people harm themselves for every reported death by suicide. However, because of the way these data are collected, we are not able to distinguish intentional suicide attempts from non-intentional self-harm behaviors.

Many suicide attempts, however, go unreported or untreated. Surveys suggest that at least one million people in the U.S. each year engage in intentionally inflicted self-harm.

Females attempt suicide three times more often than males. As with suicide deaths, rates of attempted suicide vary considerably among demographic groups. While males are 4 times more likely than females to die by suicide, females attempt suicide 3 times as often as males. The ratio of suicide attempts to suicide death in youth is estimated to be about 25:1, compared to about 4:1 in the elderly.

AFSP's latest data on suicide are taken from the Centers for Disease Control and Prevention (CDC) Data & Statistics Fatal Injury Report for 2015. Suicide rates listed are Age-Adjusted Rates.

**Incidence of Suicide and Self-Inflicted Injuries
Deaths, Hospitalizations, and Emergency Department[†] (ED) Visits
New York State Residents, 1995-2014**

Year of Discharge / Death	Deaths***		Hospitalizations		ED Visits	
	Annual Frequency	Rate per 100,000 Residents	Annual Frequency	Rate per 100,000 Residents	Annual Frequency	Rate per 100,000 Residents
1995	1,469	7.9	9,257	50.0	n/a	n/a
1996	1,415	7.6	8,992	48.4	n/a	n/a
1997	1,369	7.3	8,848	47.4	n/a	n/a
1998	1,381	7.4	8,020	42.6	n/a	n/a
1999	1,276	6.8	7,749	41.0	n/a	n/a
2000	1,266	6.7	8,172	43.0	n/a	n/a
2001	1,272	6.7	8,451	44.3	n/a	n/a
2002	1,317	6.9	8,586	44.8	n/a	n/a
2003	1,252	6.5	9,199	48.0	n/a	n/a
2004	1,261	6.6	9,627	50.1	n/a	n/a
2005	1,310	6.8	9,694	50.3	8,992	46.7
2006	1,292	6.7	9,675	50.1	8,780	45.5
2007	1,378	7.1	9,739	50.5	8,967	46.5
2008	1,392	7.1	10,148	52.1	9,576	49.1
2009	1,376	7.0	9,958	51.0	9,837	50.3
2010	1,514	7.7	10,579	54.0	9,904	50.6
2011	1,595	8.2	10,726	55.1	8,151	41.9
2012	1,635	8.4	11,029	56.4	8,340	42.6
2013	1,637	8.3	10,743	54.7	10,956	55.8
2014	1,624	8.2	10,282	52.1	10,977	55.6

[†]The incidence of ED visits does not include those that were admitted into the hospital.

Rate = Frequency/Population *100,000

***In 1999 the United States began using the World Health Organization's revised International Classification of Diseases coding book (ICD 10) for mortality data. Differences seen between data coded using the 9th revision (ICD 9) and ICD 10 may be due to coding changes and not actual differences in injury causes.



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► FOR MORE INFORMATION PLEASE
VISIT: WWW.SAVETHEMICHAELS.ORG

Overview:

Accessing
Services,
Navigating the
process and Self-
Care.

Susan Salomone
&
Theresa Knorr



Family to Family Recovery Resource Guide



Family Support and Guidance for Navigating Alcohol and Drug
Addiction Treatment and Recovery Services in New York State

Family Panel:

Finding Help,
Hope and Healing:
Family members
share their
experience.

Susan Salomone

&

Theresa Knorr, Moderators



- ▶ Shon Fluitt
- ▶ Margaret Hamilton
- ▶ Deborah LaBello
- ▶ Paul Haumesser
- ▶ Jabril Newman
- ▶ Linda Ventura



Wrap UP:

Where do we go
from here?



Evaluations!!



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Thank You

- ▶ On behalf of Friends of Recovery New York (FOR-NY) thank you for your time, your commitment and your service!
- ▶ “Never doubt that a small group of thoughtful, committed citizens can change the world; indeed, it's the only thing that ever has.” - Margaret Mead
- ▶ If you have additional questions or comments, please feel free to contact us!



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