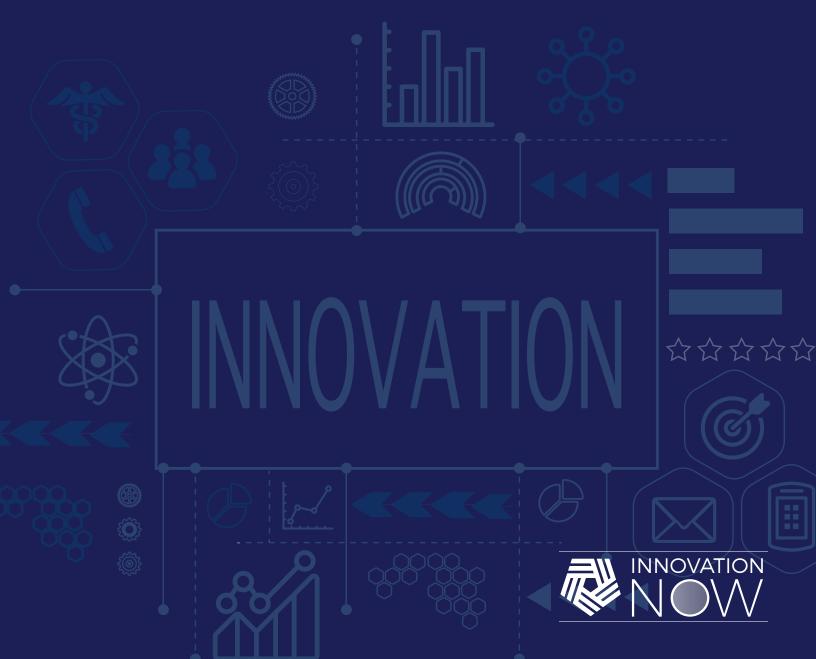
INDIANA INNOVATIONS TO ADDRESS ADDICTION

Nine Innovative Solutions that are Transforming Addiction Prevention, Treatment and Recovery



INNOVATION NOW

Innovation Now reimagines how we can address addiction as a nation. A project of Addiction Policy Forum, the initiative showcases innovative programs and interventions from every sector that are actively transforming the field of addiction across the nation.

Many thanks to our partners for their support.

- Pharmaceutical Research and Manufacturers of America (PhRMA)
- Faces & Voice of Recovery (FAVOR)
- The National District Attorneys Association (NDAA)
- The National Association for Children of Addiction (NACoA)
- Young People in Recovery (YPR)
- The Police, Treatment, and Community Collaborative (PTACC)
- Casey Family Programs
- Treatment Alternatives for Safe Communities (TASC)

By engaging entrepreneurs, leaders, healthcare providers, and experts across the country, the Innovation Now initiative aims to increase transformative ideas to prevent and treat substance use disorders and support recovery.





















Dear Reader,

Indiana is famous for its farm products, auto racing and traditional America values. Fifty years ago, a well-known midwestern novelist wrote, "[T]he name of Hoosier has had a lasting appeal for Indiana people ... [f]or more than 100 years, it has continued to mean friendliness, neighborliness, an idyllic contentment with Indiana landscape and life."

Yet today, the Hoosier State faces many of the same challenges confronting the rest of the country when it comes to addiction. According to Indiana University, every 2.5 hours, someone in the state is hospitalized for an opioid overdose. More Indianans die each day from drug overdose than from gun violence and homicide combined.

But there's a reason for hope, because Hoosiers are combining their neighborly tradition with an innovative spirit to devise new ways to help people seeking to overcome addiction. Innovators across Indiana are tackling it with fresh ideas and a can-do attitude. And that's producing inspiring results.

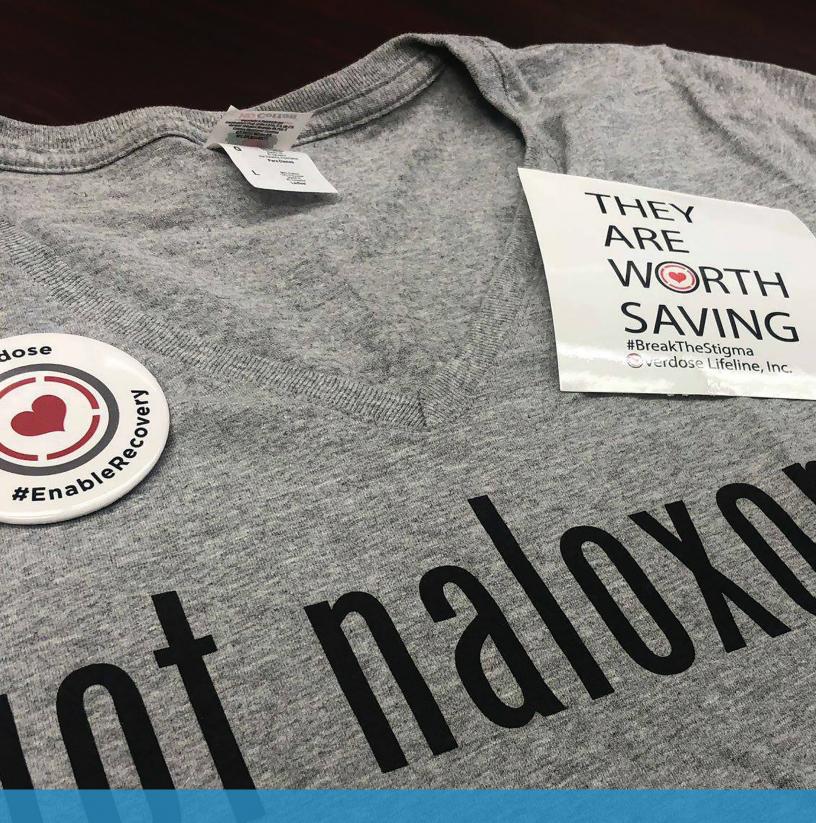
The Innovation Now initiative recognizes leaders across the multiple sectors needed at the table to address addiction—prevention, treatment, recovery, child welfare, criminal justice, law enforcement and health professionals—leaders who are creating solutions and driving change. As the founder of Addiction Policy Forum, it's my pleasure to work with patients, families, community members, and state and local leaders who are passionate about solving addiction. As a person whose family has been devastated by this disease, I share the Addiction Policy Forum's mission to eliminate addiction as a major health condition.

It's an honor to recognize these Indiana innovators who are leading the way. In the following pages, you'll learn about their outstanding work that's improving our response to addiction, saving lives, and serving as a model to the nation.

Jessica Hulsey Nickel

Founder, Addiction Policy Forum





OVERDOSE LIFELINE INDIANAPOLIS, IN

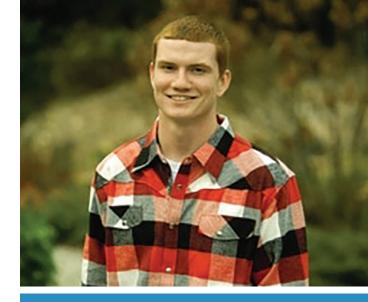
In 2014, Justin Phillips spoke out. She spoke about losing her son Aaron and she bravely shared how he died: a heroin overdose. While it doesn't seem like it was that long ago, back then, people didn't talk about drug use and they certainly didn't talk about the related loss experienced by so many. "I told Aaron's story because I didn't want another mother to have to feel my pain," says Justin.

She saw her son struggle with substances at an early age. Throughout the years, Aaron used marijuana and Justin would fight with him about this regularly. Justin was not aware that Aaron was abusing heroin until he admitted that he had been using the drug for 8 months and could not stop on his own. Aaron expressed his strong desire to receive help.

Aaron knew "recovery was possible because you and Dad have shown me recovery is possible." Both have been in recovery since before their children were born. Yet the shame, stigma, and denial that are present in families suffering from substance use disorder are powerful. And even more prevalent then was the complete misinformation and lack of knowledge around opioids and the death sentence that can accompany them. Justin tried all she knew to help her son: tough love, a trip to rehab and constant support. As she tried to help Aaron, Justin was continuously met with stigma and misinformation. Despite all her efforts, Aaron died in 2013 at the young age of 20.

In 2014, Justin founded Overdose Lifeline to honor Aaron and to help her community. Overdose Lifeline is dedicated to helping individuals, families, and communities affected by the disease of addiction through advocacy, education, harm reduction, prevention, resources and support.

Justin educated herself and learned more and more about addiction. For instance, it wasn't until after Aaron's death that she became aware of the life-saving drug, naloxone, which reverses the effects of an opioid overdose. Her first priority was



INNOVATIONS TO PREVENT SUBSTANCE USE DISORDER

Effective prevention contributes to significant societal cost-savings and dramatically reduces the prevalence of both substance use and mental illness.

The best way to prevent the development of substance use disorders is to delay the age of drug and alcohol use initiation while the adolescent brain is still developing. It is also critical to intervene early when a person is misusing substances so that risky use does not progress into an addiction.

Evidence-based prevention programs prevent or delay the onset of substance use as well as other behavioral health problems. Prevention should also address individual and environmental factors that contribute to use disorders.

to make sure that everyone knew what naloxone was and to make it accessible. In 2015, she got "Aaron's Law" passed, increasing public access to naloxone. To date, Overdose Lifeline has distributed over 20,000 naloxone kits to first responders and the community, saving thousands of lives in the process.

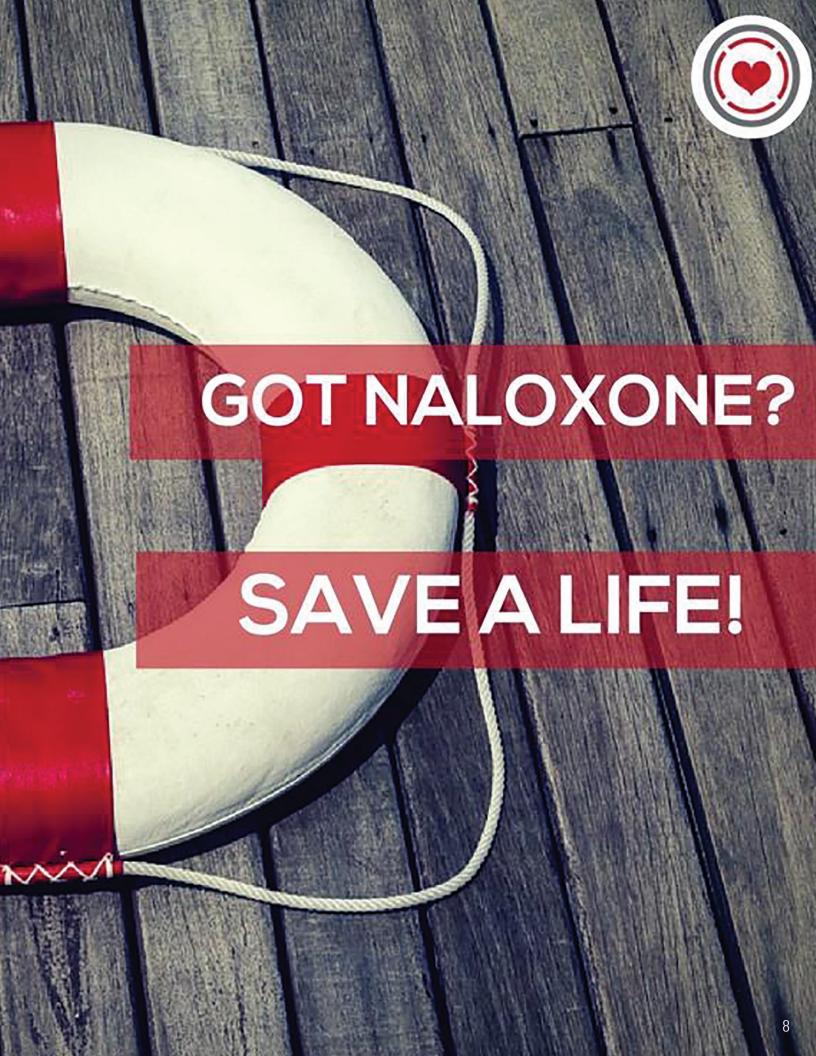
Overdose Lifeline recognized that naloxone is not the only way to save someone from an overdose; prevention is an important tool as well. The organization developed the "This is (Not) About Drugs" curriculum, the first youth prevention education program addressing the opioid epidemic. Using an outcome-based, science-based brief intervention, the goal of the program is to delay adolescent use of substances. The program was named as a promising program by SAMHSA's Center for Substance Abuse. It is clearly doing something right. In just a few short years, This is (Not) About Drugs has over 350 delivery partners, is available in over 20 states and has reached more than 30,000 students.

Justin has testified in front of Congress numerous times and won many awards, including a White House Champions of Change Award. However, the primary mission of Overdose Lifeline is to carry the message of hope to individuals, families, and communities affected by the disease of addiction. Justin concludes, "I want people to recognize addiction as they would any other disease. We should not let the stigma keep us from talking about this completely preventable and treatable disease. I can't bring Aaron back but through Overdose Lifeline, I can work hard on behalf of individuals affected by the disease of addiction and their families to assure adequate resources and support exists." Through her work, Justin is offering a much-needed lifeline to her community.

NUMBERS:

- Distributed over 20,000 naloxone kits.
- The curriculum, "This is (Not) About Drugs" is available in 20 states.
- Reached over 30,000 students.

- Overdose Lifeline is a statewide Indiana nonprofit dedicated to helping individuals, families, and communities affected by the disease of addiction and substance use disorders through advocacy, education, harm reduction, prevention, resources, and support.
- This is (Not) About Drugs was the first youth prevention education program addressing the opioid (prescription pain medicine, heroin) public health crisis.
- Overdose Lifeline offers a monthly Lifeline for Loss support group.





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preventable and treatable disease. I can't bring Aaron back but through Overdose Lifeline, I can work hard on behalf of individuals affected by the disease of addiction and their families to assure adequate resources and support exists.

- Justin Phillips









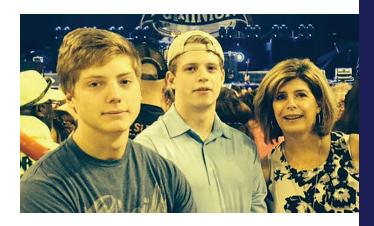
525 FOUNDATION SOUTH BEND, IN It was a typical high school graduation party in northern Indiana back in 2015. Grads, family, and friends celebrating the big achievement. As Becky Savage was preparing to leave, her teenage sons Nick and Jack were heading to a second party. When she said goodbye, she had no idea she would never see them alive again.

Someone brought prescription pills to the other party. And lots of kids took them. There were five overdoses that night. Nick and Jack were the only two who didn't wake up.

Becky and her husband faced an overwhelming loss. Many people would have been emotionally crippled by losing two of their four children at once. They were a close-knit family and the grief was intense. They took a year to focus on healing together: counseling, and crying, and lots of hugs.

One year later, Becky was invited to speak at a community forum about underage drinking. She believed her sons' experimentation with alcohol opened the doors for other experimentation, and she wanted to share her experience. Becky was told 15-20 people would be at the forum. Instead, more than 200 people showed up.

"It scared me to speak to that many people," she admits. "I'd never done public speaking before. But it showed me that our community was scared of something like this happening to their families." She told them what had happened in hers. "I was trained as a nurse and educator, and I didn't know kids were misusing pills."



It turned out others didn't know, either. Becky started getting requests from local schools because kids were responding to her story.

So Becky and her husband established the 525 Foundation. Its name holds special significance to the Savages. Jack and Nick were avid hockey players; "5" and "25" were their jersey numbers.

Now, Becky travels across the country, speaking at high schools and sharing her story.

She encourages students to be good friends while also letting them know about the dangers of improperly using prescription medications.

The organization quickly snowballed into other areas. Becky got involved in DEA drug take-back days. "I didn't know anything about it until my sons passed," she says. "But I thought, 'let's do something about the pills in the community'. Then people wanted to know what to do with drugs outside of those take-back days." So the Drop2Stop program was started, with drop boxes placed in a local grocery store. It soon grew to ten stores. "The boxes are front and center and are a visual reminder to people



It scared me to speak to that many people. I'd never done public

speaking before. But it showed me that our community was scared of something like this happening to their families. I was trained as a nurse and educator, and I didn't know kids were misusing pills.

- Becky Savage



Set 1 Ost Cit 1990 Jam Aleks (2011)

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to get rid of their prescriptions responsibly," Becky says. "Now they don't have to drive downtown to the police station." That easy access produced an enthusiastic response. In the last 23 months, more than three tons of pills were collected.

The Foundation's ultimate goal is saving lives. "You never know whose life you're going to touch," she says. Becky Savage's life was devastated by a double tragedy. Now it is her motivation to reach as many lives as she can.

NUMBERS:

- 525 Foundation was started in 2016.
- Becky travels hundreds of miles annually, speaking around the country.
- Drop2Stop boxes collected more than 3 tons of medications in 23 months.

- The 525 Foundation was formed out of tragedy when Becky lost 2 of her sons to opioid overdoses on the same night.
- The organization is dedicated to bringing awareness to the dangers of prescription drug misuse by promoting prevention through awareness.
- The Drop2Stop program has drug drop boxes prominently placed at 10 grocery stores.



INDIANA UNIVERSITY'S ADDICTIONS GRAND CHALLENGE BLOOMINGTON, IN

Talk about addiction and the conversation tends to focus on reaching people who're misusing drugs, on getting them in treatment, or supporting their recovery. Each component is important. But other efforts are actively going on behind the scenes. It is essential to understanding what works, in which setting and for whom. You don't hear much about it. Yet it's playing a significant role in combating the problem.

It's research.

The Addictions Grand Challenge at Indiana University is the largest and most comprehensive, university-led response to the opioid addiction crisis. IU has dedicated \$50 million to projects focused on improving the quality of life for the people of Indiana, easing the burden of addiction on Hoosier communities and improving health and economic outcomes.

"By making more strategic use of resources, focusing on critical issues facing the state, and working closely with key partners, we hope to achieve a greater impact in Indiana and around the world," says Fred Cate, IU's Vice President for Research.

Responding to the Addictions Crisis Grand Challenge initiative was launched in 2017 and is one of three grand challenges at IU. (Precision Health and environmental change are also part of the Grand Challenges program).

"The Grand Challenge's goals are clearly defined and aligned with Governor Holcomb's state goals," according to Robin Newhouse, Dean and Distinguished Professor at the IU School of Nursing and Primary Investigator of the Responding to the Addictions Grand Challenge. "They are to reduce the incidence of substance use disorders, reduce the number of Hoosiers dying from drug overdoses and to reduce the number of babies born with prenatal exposure to harmful substances."

That's a tall order. It's being tackled through a series of targeted research areas. The action plan includes:

- Gathering ground-level data to provide community leaders, health professionals and policymakers a clear picture of what's driving this epidemic and where it's headed.
- Equipping current and future health care professionals with the skills and tools needed to prevent and treat substance use disorder.
- Generating results that uncover the interwoven biological, psychological, social and environmental forces driving substance misuse and test interventions to prevent, treat and build resilience for recovery.
- Creating and implementing innovative approaches to treating substance use with partners, lessening its devastating consequences.

The Grand Challenge sets a pace for research activity understanding that lives and health are at risk. It's purposefully synchronous with and inclusive of multiple partners including state and local government as well as business and nonprofit leaders to advance strategies that are helping the countless individuals, families, employees and businesses suffering as a result of the addiction crisis.

- Robin Newhouse

Where is IU Working?

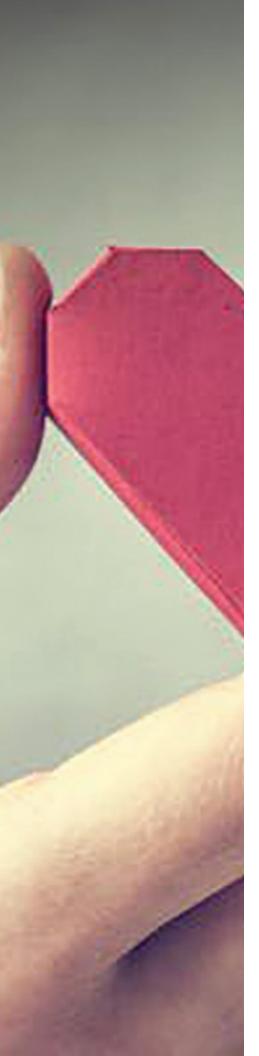




Grand Challenge

Responding to the Addictions Crisis





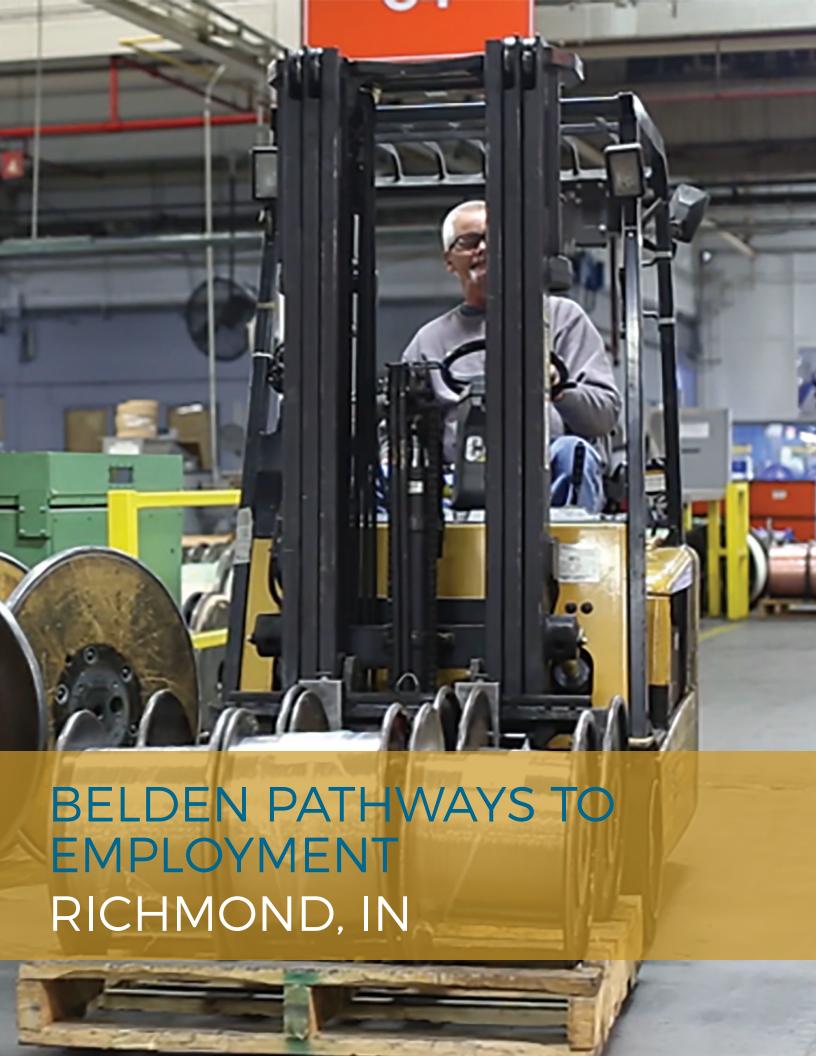
Within those areas of research, 31 different projects are underway and range from lab-based neurobiological research to school-based educational programs designed to enhance prevention and recovery among adolescents to analysis of policy and law to data gathering to the training and education of the addictions treatment workforce.

"The Grand Challenge sets a pace for research activity understanding that lives and health are at risk," Newhouse says. "It's purposefully synchronous with and inclusive of multiple partners including state and local government as well as business and nonprofit leaders to advance strategies that are helping the countless individuals, families, employees and businesses suffering as a result of the addiction crisis."

NUMBERS:

- Launched in 2017.
- Includes more than 30 interdisciplinary research teams (95 faculty and staff).
- Engages with 176 external partners.

- There are three Grand Challenges. One addresses addiction while the other two focus on precision health and environmental change.
- The goals of the program are to reduce the incidence of substance use disorders, decrease the number of opioid overdose fatalities and reduce the number of babies born with prenatal exposure to harmful substances.
- The large-scale effort is uniting leaders in the government, business and nonprofit sectors in working to achieve a common goal.



For over 90 years, Belden has manufactured high-end broadcast and industrial cables. Its 700 employees make it Richmond, Indiana's second-largest employer.

But it recently faced a challenge. With one-third of its workforce set to retire within five years, the company wanted to hire new workers to replace them. Richmond deals with the same drug and alcohol misuse issues as the rest of the state. Addiction and opioid deaths in Wayne County increased dramatically over the years, with 91 reported in 2017. The result: 10 percent of those new hires were failing drug screenings. That's a big problem in a small community with a limited pool of potential workers.

So Belden launched the Pathways to Employment Program in February 2018.

"If an individual fails the pre-employment drug screen, they are sent to an assessment with a health care provider," explains Dean McKenna, Senior Vice President of Human Resources at Belden. "The provider determines the level of risk and treatment path that's required. People get individualized treatment based on their needs. If they are successful in treatment and commit to a life free of substance misuse, we'll offer them a job."

In addition to incoming employees, the program is made available to existing employees.

The 18-month program addresses all types of substances, not just opioids. It is supported by key community partners, including Centerstone of Indiana, Meridian Health Services, Manpower Richmond and Ivy Tech Community College.

INNOVATIONS IN HEALTHCARE

It is crucial for people to have access to a system of care that has adequate capacity to provide all levels of treatment and address all levels of severity for substance use disorders.

In 2016, according to the National Survey on Drug Use and Health, 391,000 Indiana residents had a substance use disorder. Of those, 361,000 did not receive treatment from a specialty substance use disorder treatment provider.* Delays in treatment access can mean an increased risk for death and other harms associated with substance misuse.

Substance use disorders (SUDs) remain one of the only illnesses that is treated outside of general health care systems. Because of this, there is very little, if any, communication between specialty SUD treatment providers and primary care doctors. This affects the overall quality of care and health outcomes of the patient.

Evidence-based SUD treatment integrated into healthcare systems helps to close the gap between the number of people who need treatment for an SUD and the number of people who actually receive it.

The innovations featured in this section show promise for accelerating our progress in improving treatment access and quality of care patients.

^{*} Substance Abuse and Mental Health Services Administration, 2016 National Survey on Drug Use and Health, Tables 22 and 25, available at https://www.samhsa.gov/ data/sites/default/files/NSDUHsaeTotal2016/

Before the program, if you failed screen, that was it. Existing employees now feel comfortable asking for help and can participate in the program without fear of losing their job.

– Dean McKenna







"Before the program, if you failed screen, that was it," McKenna says. "Existing employees now feel comfortable asking for help and can participate in the program without fear of losing their job."

Of the 30 people who have entered Pathways to Employment, McKenna says three are currently undergoing assessment and treatment; six are in safety-sensitive roles; 12 are in machine operator roles; and nine left the program. "The promise of a job is what they can hang on to as they are going through treatment."

While many companies often turn a blind eye to drug misuse or lower their drug standards to avoid losing employees, Pathways to Employment retains people in Belden's workforce while maintaining safety standards and production excellence. The program has worked so well, in fact, it's being expanded to other Belden plants in Syracuse, New York and Washington, Pennsylvania.

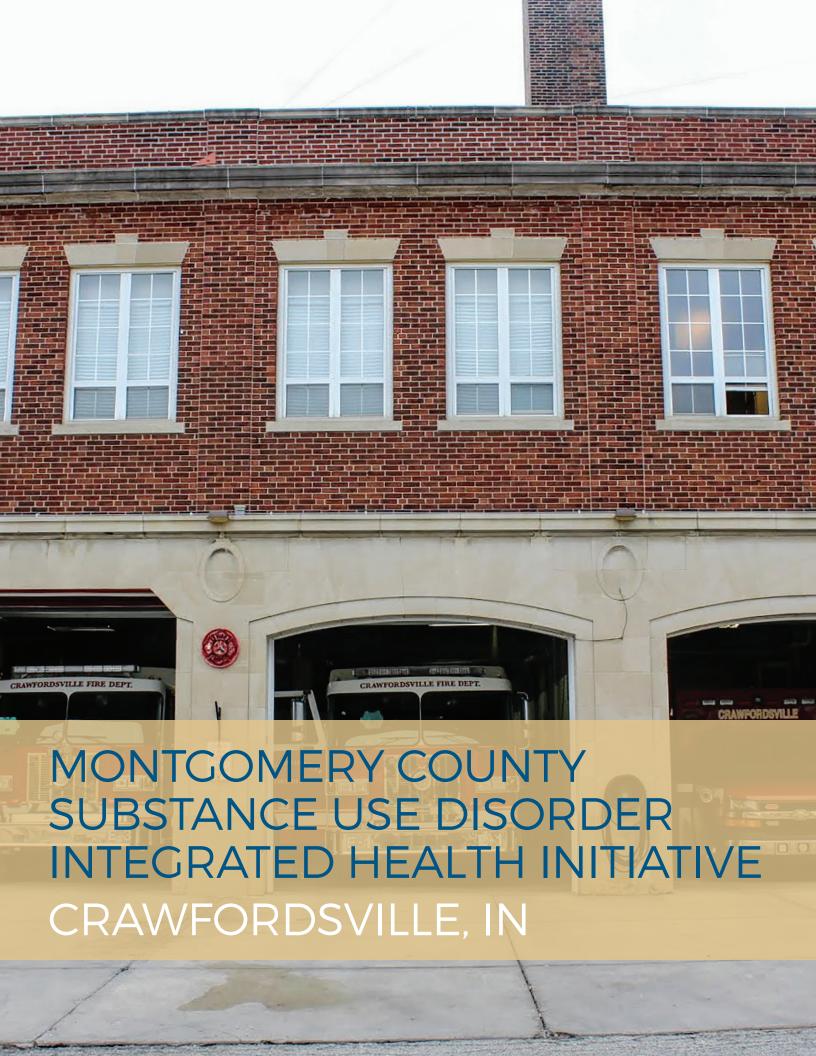
"As much as the program was a business need, it also meets a community need," McKenna says.

Consider these words from a Pathways to Employment participant: "I really appreciate the opportunity to continue employment with Belden. This program is fantastic as it gives those who have made mistakes a second chance. It provides the support needed to become and remain successful."

NUMBERS:

- Belden is Richmond's second-largest employer.
- Program launched in February 2018.
- 30 people have entered the program.

- If potential Belden employees are denied positions because of a positive drug screen, they can participate in an individualized drug rehabilitation program.
- Successful participation will lead to a job at Belden once the rehabilitation program is completed.
- The program is designed to address two major problems currently facing Indiana: addiction and workforce shortage.



"This started because Amber wasn't afraid to start the conversation," Paul Miller, Division Chief of EMS (Crawfordsville Fire Department) begins. And that initial conversation is making a big impact in this rural county of 38,000 people.

Crawfordsville is the seat of Montgomery County, ranked the ninth most at-risk in the state for opioid addiction. When Scott County's HIV outbreak made national headlines, the state identified which counties needed the most focus and resources. And Montgomery County was high on the list.

So Amber Reed and her team decided to do something about it. A billboard went up in March 2016 highlighting the problem by showing a person with a needle in their arm. "The community was up in arms," recalls Reed, department administrator at the Montgomery County Health Department. "There were calls to take it down. It was only intended to be up for 30 days, so we kept it up."

That sparked a conversation about the county's ranking. In fact, it was the first time many people had ever talked about the local problem. The Crawfordsville Quick Response Team was soon founded to discuss what could be done in the community. They brought everyone to the table: law enforcement, courts, paramedicine, coroner, schools, hospitals, probation, mental health, some 25 different stakeholders in all representing prevention, education, response, law enforcement/courts, and recovery.



Then things began to happen. There was no naloxone treatment in the community at the time. Grants were sought and received. Now all first responders are equipped with naloxone.

A community attitudes and awareness survey was conducted to gauge how people felt about addiction, policies, and treatment centers and to guide future decisions.

"We were very siloed. We do great work within silos, but didn't have reference points within the others," Miller said. "We didn't want to duplicate efforts. We wanted to make better use of resources and become a community project, something we're all working on at all levels and agencies."

"Because we are a rural community, we didn't have as much red tape to go through," Reed adds. "We came together. No one is afraid to say no and everyone is willing to help."

Last November they began working on an ED/MAT Bridge, utilizing firefighters and paramedics to work as physician extenders. They work with We've had people walking to us with controlled substances and saying they want help. We navigate them to treatment. We work with many primary care physicians to assist with bridging the gap. We just want to fix the problem. It doesn't matter who gets the credit. It's all about being proactive rather than reactive.

- Paul Miller



the emergency room and navigate patients from an overdose to treatment.

Quick Response Teams officially started going out on June 1 of this year. In that short time, they've made over 160 "touches," have connected 11 people to mental health providers and three others to addiction treatment providers.

"We've had people walking up to us with controlled substances and saying they want help. We navigate them to treatment. We work with many primary care physicians to assist with bridging the gap," Miller says. "We just want to fix the problem. It doesn't matter who gets the credit. It's all about being proactive rather than reactive."

Not bad results for something that started with a conversation about a single billboard.

NUMBERS:

- Ranked 9 of 92 for most at-risk population for opioid addiction.
- In just 2 months, quick response team made over 160 touches.
 - Connected 11 people to mental health providers.
 - Connected 3 people to addiction providers.

- Montgomery County's Substance Use Disorder Integrated Health Initiative encompasses prevention, preparedness, response, and recovery to address addiction.
- The initiative is a community effort that uses firefighters/medics to fill the existing gaps in addiction care.
- Quick response teams were established in June 2019.







Substance use disorder is a disease that can be treated. Acknowledgement of this fact is often the first step for those that need treatment. However, finding treatment has not always been the easiest process.

In early 2018, Indiana Family and Social Services Administration (FSSA) partnered with Indiana 211 (IN211) and OpenBeds® to provide Hoosiers live treatment access across the state, by simply dialing 2-1-1.

IN211 is a free service that connects Hoosiers with help and answers from thousands of health and human service agencies and resources right in their local communities. The service is available 24 hours a day, seven days a week via talk, text, and online.



"We provide callers with resources and referrals for everyday needs and in times of crisis," explains Catherine McNaughton, Community Resource Manager. "Calls range from basic needs to disaster response, suicide, abuse claims, mental health and addiction, and family support."

In March 2018, Indiana FSSA and IN211 partnered with OpenBeds®, a software platform that helps government health agencies increase access to behavioral health care and decrease costs.

"It's focused on substance use disorder treatment and recovery," McNaughton says. "Hundreds of treatment providers across the state are in the database. When someone calls, they're assessed on a 1-10 scale. Their number helps to determine the level of care they need, such as inpatient, outpatient, support services, etc."

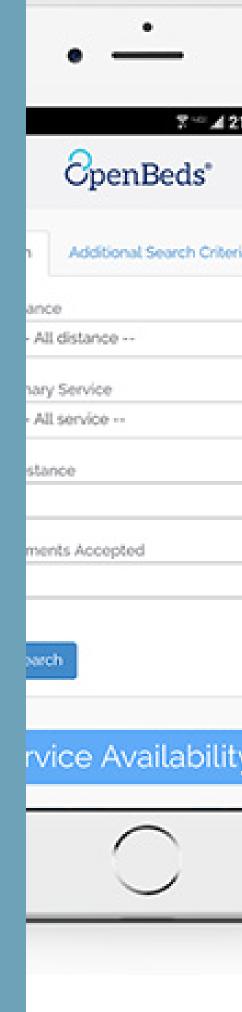
Once the assessment is complete, a direct referral is made through the system. The program provides real-time data showing open beds at treatment facilities that cater to a specific user's needs. That enables people to get into treatment quicker.

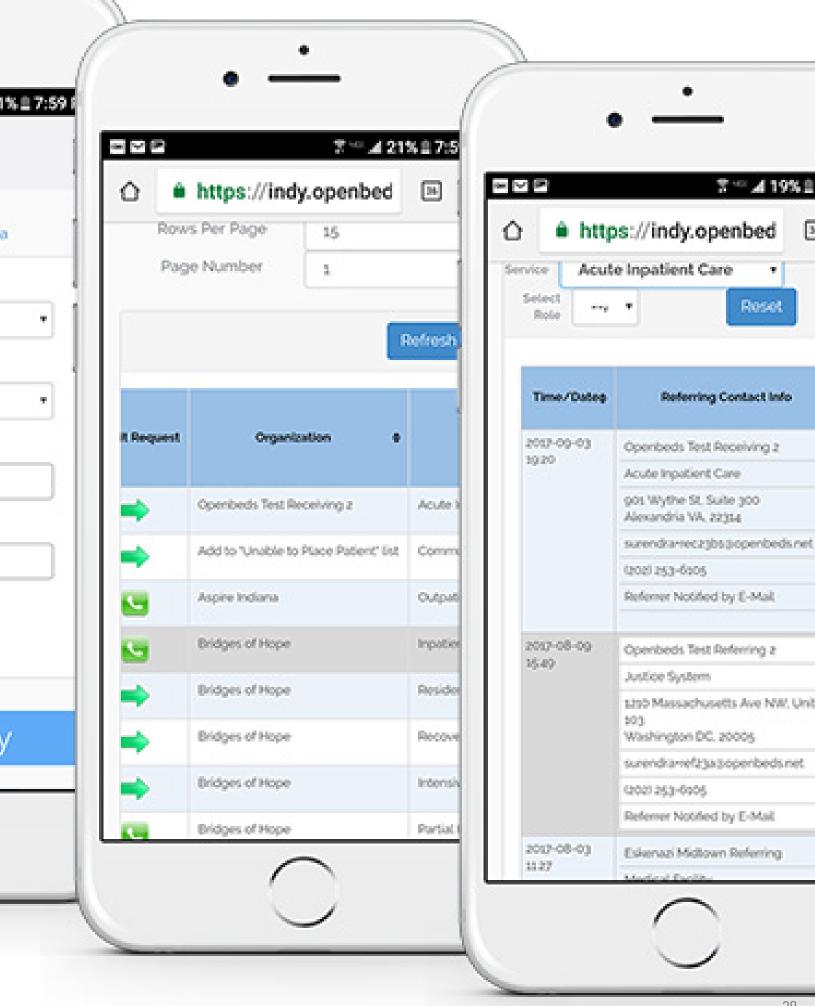
The new service quickly became a hit. In its first month alone, 100 people received referrals.

By making access faster and more efficient, the IN211 and OpenBeds® project is removing significant barriers to treatment.

We provide callers with resources and referrals for everyday needs and in times of crisis. Calls range from basic needs to disaster response, suicide, abuse claims, mental health and addiction, and family support.

> – Catherine McNaughton



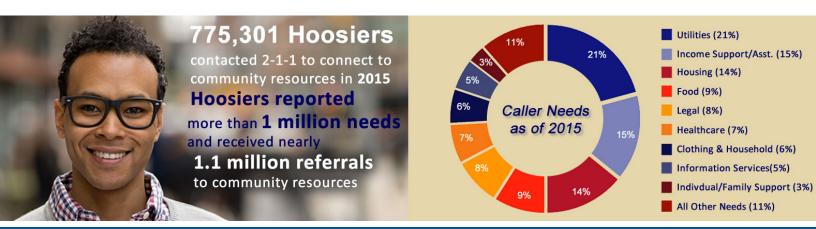


NUMBERS:

- Started in March 2018.
- Callers are linked to over 8,000 social service agencies.
- In its first month, more than 100 people called for treatment referral.

SUMMARY:

- The Indiana 211 and OpenBeds® project immediately connects people with available inpatient or residential treatment services.
- The statewide nonprofit, Indiana 211, partners with OpenBeds®, a software platform that helps government health agencies increase access to behavioral health care and decrease costs.

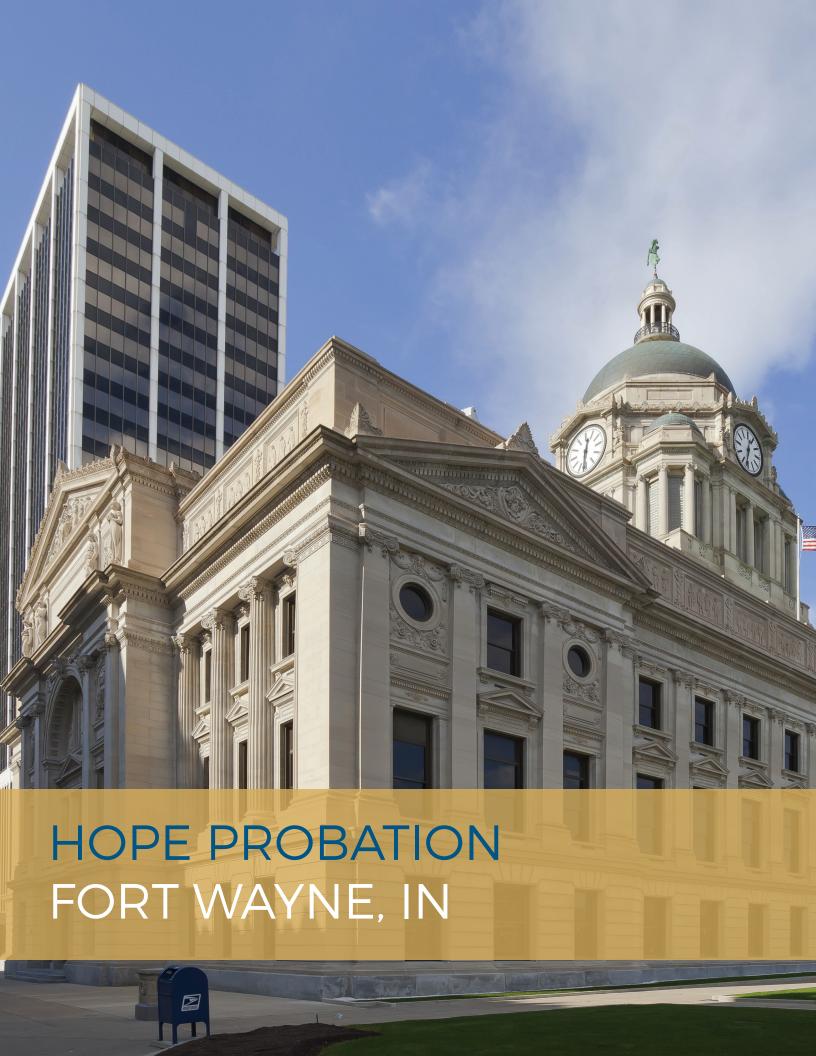




HELPING HOOSIERS LIVE BETTER.

CALL 2-1-1 TO GET CONNECTED WITH THE LOCAL RESOURCES YOU NEED.





Judge Wendy Davis joined the Allen Superior Court bench in 2011. In the years since, she has seen thousands of cases involving substance misuse. "A lot of the men and women who appear before me are low-level, non-violent drug offenders who are placed on probation after conviction. However, when they are released, you can't just say, 'Ok, stop using drugs' and expect them to do it. You have to help them to do it, or they'll wind up right back in jail."

In 2015, as Indiana's statewide drug addiction epidemic reached crisis level, Judge Davis was asked to join the Governor's Task Force on Drug Enforcement, Treatment & Prevention. She quickly encountered a problem common in many states.

"Most of the resources to combat addictions were flowing into major metropolitan areas," Judge Davis remembers. "Here in Allen County, we were left fighting an uphill battle trying to get people help. We didn't have enough beds for treatment, but I also knew that many of these people would be better served by treatment instead of incarceration."

From that challenge, with the idea of recovery over jail, HOPE Probation (Hoosiers Opportunity Probation with Enforcement) was born.

Judge Davis discovered the HOPE Probation concept in Hawaii, where it was developed and launched by First Circuit Judge Steven Alm. She met with the judge and even sat in on court to witness it in operation. Judge Davis quickly decided it was the right idea for helping Allen County residents battling substance use disorders.

While on HOPE, clients must call every day and give a number that is unique to them. If they do not call or miss an appointment, a warrant is issued. Its purpose is to get them in front of Judge Davis, who acts as the chief probation officer. "This allows for high accountability," she explains.

INNOVATIONS IN CRIMINAL JUSTICE RESPONSES TO ADDICTION

First responders, law enforcement and criminal justice personnel are increasingly at the center of the addiction issue—from being first at the scene of an overdose to responding to the lack of resources and limited treatment options for individuals with substance use disorders who are in our jails and criminal justice systems.

About 63 percent of people in jail, 58 percent of people in state prison, and 45 percent of people in federal prison have substance use disorders, compared to just 5 percent of the U.S. adult population.* Data indicates that law enforcement and probation see an increasing number of individuals struggling with addiction. Criminal justice systems equipped with training, services and early detection tools create opportunities to stop the progression of the disease.

* Jennifer Bronson, Jessica Stroop, Stephanie Zimmer & Marcus Berzofsky, Drug Use, Dependence, And Abuse Among State Prisoners And Jail Inmates, 2007-2009, Bureau of Justice Statistics, Office of Justice Programs, U.S. Department of Justice (2017), http://www.bjs.gov/index.cfm?ty=pbdetail&iid=5966.



Most of the resources to combat addictions were flowing into major metropolitan areas. Here in Allen County, we were left fighting an uphill battle trying to get people help. We didn't have enough beds for treatment, but I also knew that many of these people would be better served by treatment instead of incarceration.

Judge Davis wants HOPE clients to remain accountable and to confront their addictions head-on. When they receive a court order to be released to community corrections or to probation officers, they are then driven to treatment, which is based on an evidence-based assessment and is post-conviction.

Every Monday morning, Judge Davis meets with the HOPE Probation team. It includes the prosecutor, public defender, community corrections, service providers, probation, and a faith-based representative. They discuss clients and make decisions together as a team before court convenes.

To enter the program, the probation department puts together a pre-sentence assessment to determine eligibility. If Judge Davis sees a person with a long history of opiate misuse and if there is a needle charge, she recognizes they may need HOPE Probation. "I call them by their first name," she adds. "I try to make them feel like humans and not criminals — as long as they aren't acting like criminals."

Judge Davis recalls the case of a woman named Marisa. "She came to the program in its second year, charged with possession of methamphetamine. She kept violating her parole and was eventually sentenced to time in the Department of Corrections. When she got out, she did HOPE Probation. It worked for her. She's still in recovery, recently graduated from college and is now running a halfway house."

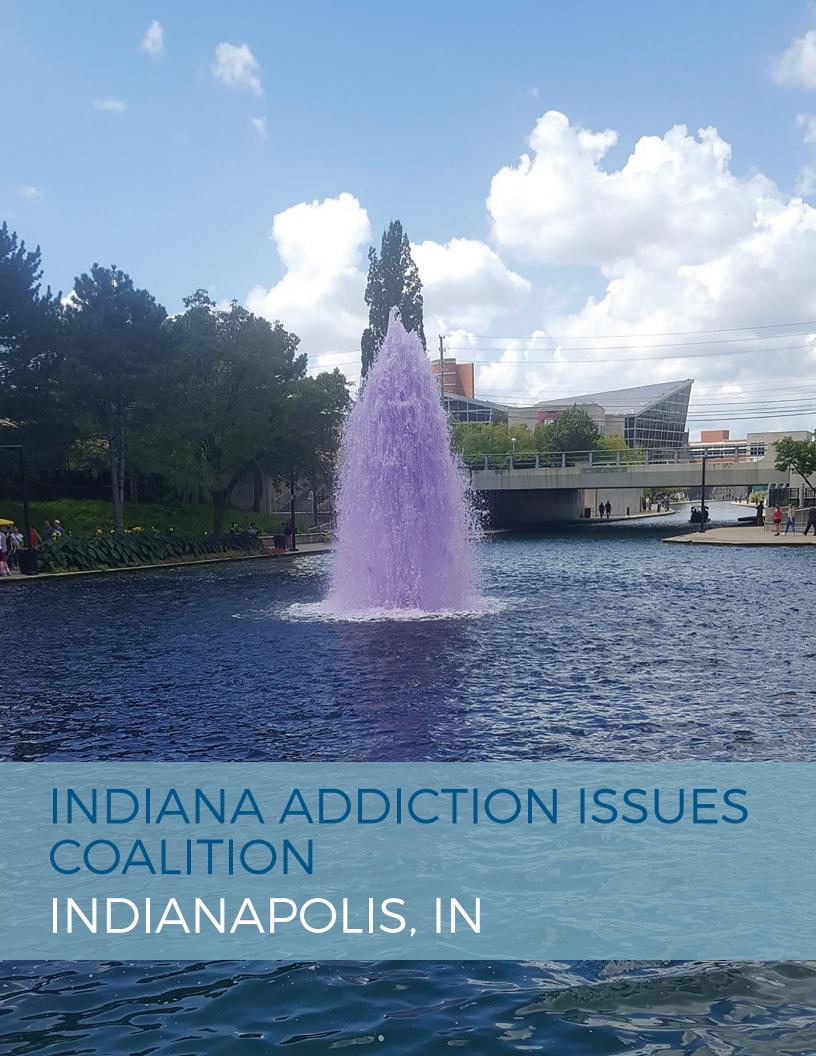
More than 900 people have participated in the program to date. So far, 354 people have graduated from it. Judge Davis shakes graduates' hands, looks them in the eye, and personally delivers an important message: "Welcome to the community."

NUMBERS:

- Program originally started in 2011.
- Over 900 participants to date.
- 354 people formally graduated from the program.

SUMMARY:

- HOPE Probation (Hoosiers Opportunity Probation with Enforcement) began in Hawaii.
- The program offers addiction treatment to low-level, nonviolent drug offenders.
- The HOPE Probation team includes the prosecutor, public defender, community corrections, service providers, probation, and a faith-based representative.



It may not be the first way we think of helping people who struggle with addiction, but the Indiana Addiction Issues Coalition (IAIC) advocates for people and their recovery through public policy and education.

"Treatment is not the goal, recovery is the goal," says IAIC director Brandon George. "People need ongoing connections to systems. Indiana has a pretty good infrastructure for treatment. But it doesn't have an infrastructure for recovery. That's where we come in."

Founded in 1999, the goal of the IAIC is to create a statewide grassroots network composed primarily of members of the recovery community, family members, and care providers. They do this through advocacy, public education and service. It's helping build capacity for recovery by training 300 recovery coaches over the past five years. "We go all over the state," George says. "Before the creation of recovery-informed communities, people had no idea what to do and were relying on internet services to learn. The internet isn't going to solve a health care crisis."

The IAIC also works at the grassroots level. Federal and state grants in recent years have allowed the group to expand and offer recovery support services.

IAIC created the Indiana Recovery Network. As the name indicates, it is a network of people and organizations around the state. They have monthly conference calls and share resources, breaking them down into four areas: health (health department, treatment, buprenorphine, naloxone, hepatitis treatment), home (recovery residences, housing, emergency shelter), communities, and purpose (state chapter, workforce development, collegiate recovery).

"We also have a digital collaboration space," George points out. "For instance, people in the north can talk to places like Scott County in the south or talk to cities and towns who've already



INNOVATIVE APPROACHES TO RECOVERY SUPPORT

A community that is recovery ready provides the entire continuum of support for people in or seeking recovery and their families. A community focused on recovery also promotes prevention by having a variety of substance-free community and activities to events promote health and wellbeing for all ages. Twentythree million Americans are in recovery from a substance use disorder today.



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AIC

Indiana Addictions Issues Coalid Advocacy. Education. Recovery Forward. done the work. There's an app that goes with it, as well as a function for recovery coaches. Over 100 programs and organizations are involved."

Its Project CLEAR (Civil Legal Aid and Recovery) works with people in recovery to help get records expunged to increase employment opportunities as well as issues like licenses, housing, and debt.

Do you speak stigma?" and StigmaNeverHelps.com campaign addresses the stigma issue.

The IAIC also works as a neutral party that pulls together state resources and partnerships from across state and community agencies, particularly in funding. And it hosts monthly community events on self-advocacy in the recovery community.

George points to IAIC efforts in Scott County as an example of its success. "Part of the response there was recovery support. The stigma was palpable, it was thought these were moral issues and moral failings. We did multiple recovery coach trainings and now 30 recovery coaches work there. It was so successful, at one point 20 percent of the state workforce for recovery coaches was in Scott County. Before that they had two recovery meetings a week; now they have 18. The Coalition was instrumental in building recovery support and peer support there. Scott County went from how not to handle something to a white paper on how to build a recovery community from scratch. George sums it up this way: "We feel like we did good, we were humbled to walk alongside their community."

NUMBERS:

- Started in 1999.
- Trained 300 recovery coaches over the past five years.
- Over 100 programs are involved with the Indiana Recovery Network.

SUMMARY:

- The mission of the Indiana Addiction Issues Coalition is to promote recovery through advocacy, public education and service.
- The basic goal of the IAIC is to create a statewide grassroots network composed primarily of members of the recovery community, family members, and care providers.
- The IAIC runs a Recovery Network for communities throughout Indiana to collaborate and learn from each other.



High school is difficult for anyone; you're meeting new people, worried about fitting in, and your body is changing. For some it has the added stress of dealing with a substance use disorder, making this already difficult time harder. That's where Hope Academy, a recovery charter school, comes into play. As Indiana's only recovery high school, it gives hope to the seemingly hopeless.

A teenage girl, whom we will call Jane, struggled with a substance use disorder for years. She sought out treatment, but like so many with an addiction, Jane relapsed and found herself searching for help once again. She went to



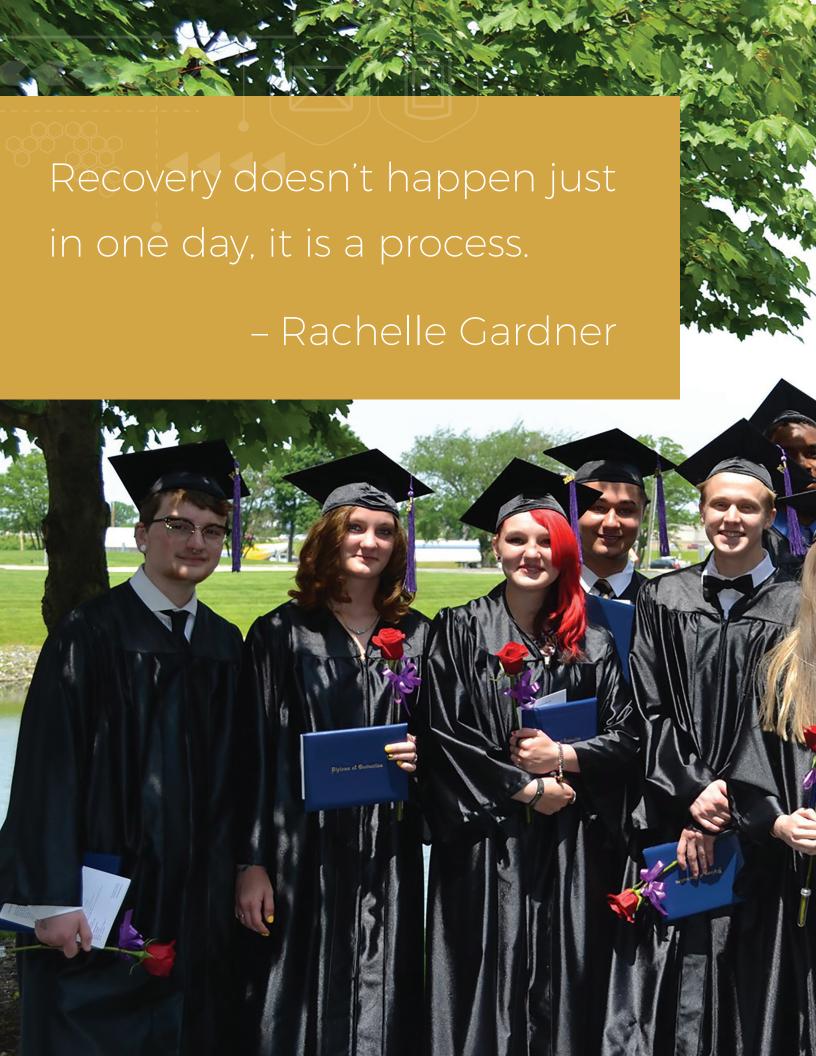
treatment centers all across the country, but nothing seemed to work.

This cycle continued for years and Jane's addiction got worse. Her family lost hope and began looking for a new solution, one that might actually help this time. Desperate to help their daughter, Jane's family moved from Savannah, Georgia, to Indianapolis when they found Hope Academy.

Like regular high schools, Hope Academy offers a curriculum focused on achieving a high-school diploma. Unlike regular high schools, Hope Academy also offers recovery classes for those with a substance use disorder, while integrating support into the typical high school classes. The school is designed for students with a dual desire to continue their academic education while growing in recovery.

"Instead of throwing them headfirst into both recovery and school, we are slowly moving them into that so they better understand it," says Rachelle Gardner, Chief Operating Officer of Hope Academy. Some students attend Hope Academy after undergoing treatment. For others, Hope Academy is their first step on their road to recovery. These students begin with the Supportive, Therapeutic, Action-focused Recovery Room (STARR) Program, teaching them how to simultaneously ease their way into recovery and schooling.

Each student creates a recovery plan and works with a recovery coach, recovery alternative peer groups and a peer specialist who guides them through the process. Gardner explains that Hope Academy is a substance-free campus, where they conduct drug tests. "Recovery doesn't happen just in one day, it is a process," continues Gardner. Understanding that addiction is a chronic, relapsing brain disease, the school handles relapse by involving parents and "unpacking" where it fell apart and how to create a new, stronger plan.







While students work on their recovery, they also grow academically. Having teachers on their side, and peers who are substance-free, students can take the standard high school classes and participate in after school activities in a recovery-supportive environment. Hope Academy strongly encourages the after-school program as it's a time to interact with peers, build life skills, participate in fun activities, and stay out of potential trouble. The bonus is surrounding yourself with others in recovery and building those positive relationships.

Now, back to Jane. She attended Hope Academy for 2.5 years, celebrated 18 months of recovery, obtained her diploma and graduated as valedictorian. Jane was accepted into a prominent art school where she will continue to grow in recovery and in her passion for art. Jane has been willing to share her story with other high school students, families and professionals about her experience. After all, she found hope at Hope Academy and her story inspires many high school students struggling with an addiction.

NUMBERS:

- Over 700 kids have entered the program.
- 200 graduated from Hope Academy.
- 300 graduated from a traditional high school.
- 93% are accepted into some type of college.

SUMMARY:

- Hope Academy is a recovery high school for students in the 9th-12th grade.
- Students create a recovery plan and work with a recovery coach, recovery alternative peer groups and a peer specialist, and make a stronger plan if the student relapses.
- Hope Academy offers after-school programs to interact with a peer group, build life skills and participate in fun activities.







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