



Kentucky Alliance of Recovery Residences (KYARR)

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Kentucky Alliance of Recovery Residences (KYARR)

- Kentucky State Affiliate of the National Alliance for Recovery Residences (NARR)
- Certification Program for Recovery Residences



Legislation

- House Bill 248 passed in 2023
 - Defined recovery housing
 - Mandated certification
- Amended in 2024 with House Bill 462
 - Closed loopholes by redefining recovery housing
 - Expanded and defined powers of local government
 - Defined scenarios where recovery residences could provide on-site medical or clinical services



What Will Happen to Recovery Residences Who Do Not Get Certified?

Consequences for Failure to Achieve Certification:

- 1) KRS 222.504 gives the State and Local Governments standing to impose fines and/or initiate legal action to compel a recovery residence to cease operating
- 2) Certain public and private agencies are prohibited from referring to uncertified housing
 - KRS 222.508 mandates that the following entities to only refer individuals to Oxford House, Recovery Kentucky centers, or certified recovery housing after June 30th, 2024
 - State Agencies
 - State-Contracted Vendors
 - Political Subdivisions of the State
 - Health Care Providers who are licensed in the Commonwealth
 - Behavioral Health Providers who are licensed in the Commonwealth
- 3) Uncertified housing, and housing that seeks the religious exemption are not eligible for state funding and, where applicable, federal funding

Enforcement of the Certification Mandate

- Local Municipalities are generally responsible for enforcing the certification requirement through the enactment of local ordinances
- Compliance with:
 - The Fair Housing Act
 - The Americans with Disabilities Act

The Fair Housing Act

- Prohibits discrimination in housing on the basis of disability
- Makes it unlawful to use land use policies to treat groups of persons with disabilities less favorably than groups of non-disabled persons
- Defines “disability” as a physical or mental impairment that substantially limits one or more major life activities, and defines “physical or mental impairment” to include alcoholism and drug addiction (other than addiction caused by current, illegal uses of controlled substances)
- Prohibits discrimination by a local government against qualified individuals with disabilities
- Federal Law prohibits land use regulations from prohibiting or significantly regulating recovery residences in a manner that would:
 - Deny equal housing opportunities on the basis on disability
 - Treat groups of person with disabilities less favorably than groups of non-disabled persons

Oxford House Inc. v. City of Edmonds

- Addressed whether the Fair Housing Act preempted local zoning ordinances that restrict the number of unrelated individuals who can live together in a single-family home
- Supreme Court Ruling:
 - The city's zoning ordinance was not exempt from the FHA and that it discriminated against people with disabilities
- Impact on Recovery Housing:
 - Affirmed that recovery residences are protected under the Fair Housing Act and local government cannot use zoning codes to exclude sober living homes based on disability-related occupancy
 - Many municipalities utilize NARR certification as a divining rod to determine if a residence is in fact a “real” recovery residence such that it is protected under the Fair Housing Act

Standard for Certification

1) NARR Standard

- 1) Administrative Operations
- 2) Physical Environment
- 3) Recovery Support
- 4) Good Neighbor

2) ASAM Recognition



Recovery Housing Certification



Application

- Application form
- Attestations document
- KYARR Code of Ethics
- KYARR Grievance Policy
- Property Owner Permission

Policy and Procedure review


- 32 Individual Policies

Site visit

- Space/bathroom requirements met
- Safe environment
- In good repair

Interview

- Confirmation of practices

		RECOVERY RESIDENCE LEVELS OF SUPPORT			
		LEVEL I Peer-Run	LEVEL II Monitored	LEVEL III Supervised	LEVEL IV Service Provider
STANDARDS CRITERIA	ADMINISTRATION	<ul style="list-style-type: none"> • Democratically run • Manual or P&P 	<ul style="list-style-type: none"> • House manager or senior resident • Policy and Procedures 	<ul style="list-style-type: none"> • Organizational hierarchy • Administrative oversight for service providers • Policy and Procedures • Licensing varies from state to state 	<ul style="list-style-type: none"> • Overseen organizational hierarchy • Clinical and administrative supervision • Policy and Procedures • Licensing varies from state to state
	SERVICES	<ul style="list-style-type: none"> • Drug Screening • House meetings • Self help meetings encouraged 	<ul style="list-style-type: none"> • House rules provide structure • Peer run groups • Drug Screening • House meetings • Involvement in self help and/or treatment services 	<ul style="list-style-type: none"> • Life skill development emphasis • Clinical services utilized in outside community • Service hours provided in house 	<ul style="list-style-type: none"> • Clinical services and programming are provided in house • Life skill development
	RESIDENCE	<ul style="list-style-type: none"> • Generally single family residences 	<ul style="list-style-type: none"> • Primarily single family residences • Possibly apartments or other dwelling types 	<ul style="list-style-type: none"> • Varies – all types of residential settings 	<ul style="list-style-type: none"> • All types – often a step down phase within care continuum of a treatment center • May be a more institutional in environment
	STAFF	<ul style="list-style-type: none"> • No paid positions within the residence • Perhaps an overseeing officer 	<ul style="list-style-type: none"> • At least 1 compensated position 	<ul style="list-style-type: none"> • Facility manager • Certified staff or case managers 	<ul style="list-style-type: none"> • Credentialed staff

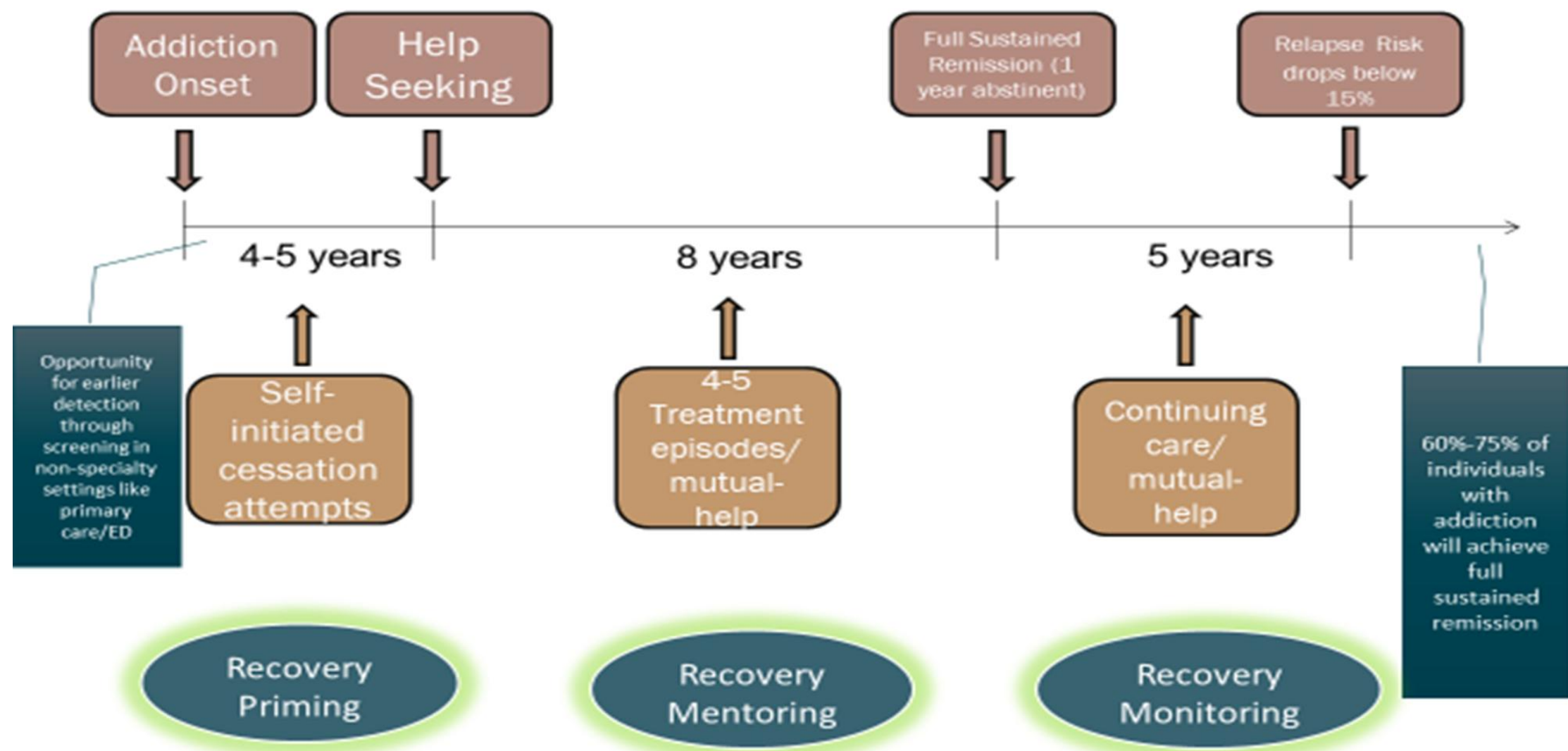
Recovery Housing vs Residential Treatment

(Social Model vs. Medical Model)

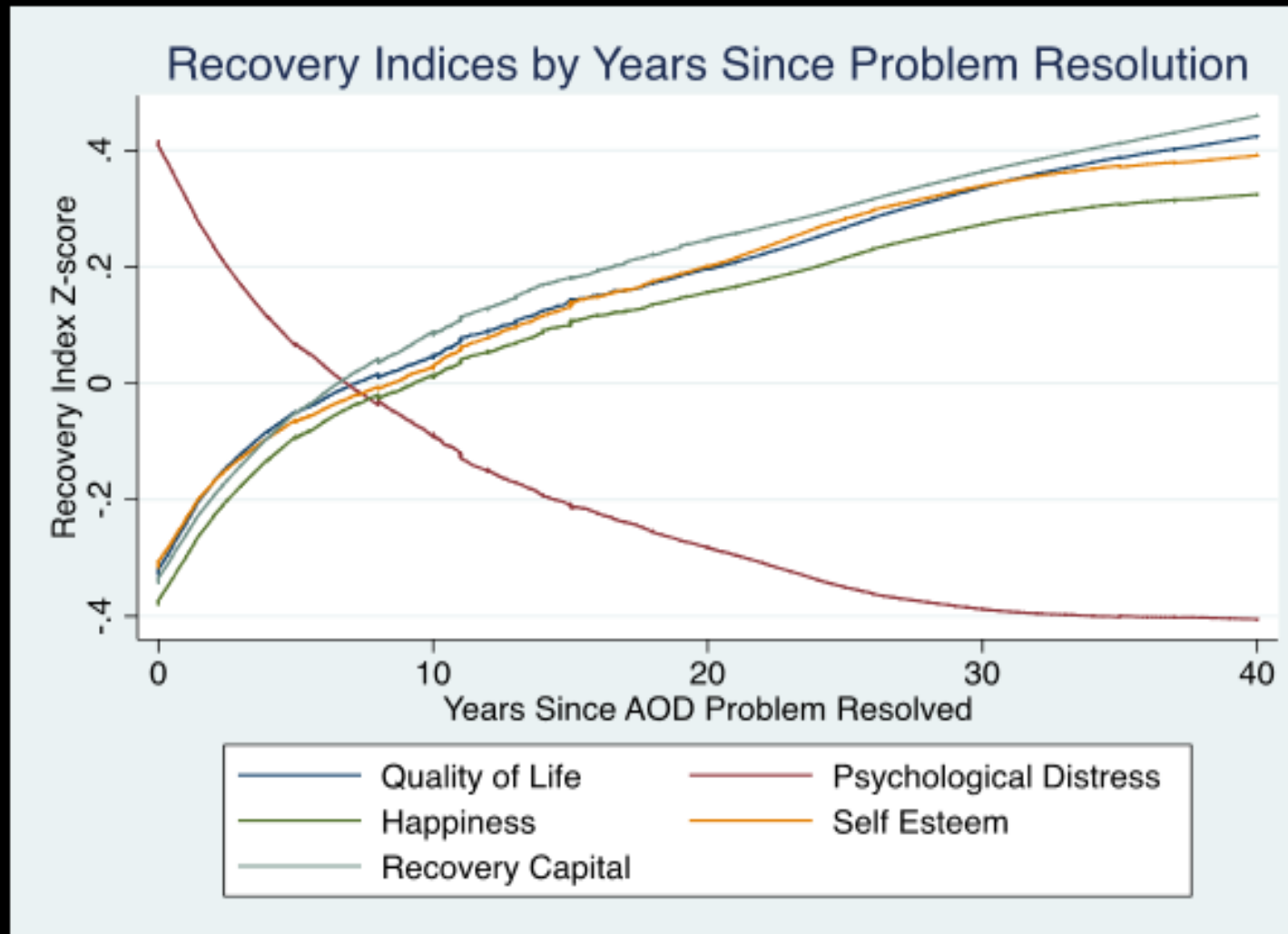
	Recovery Housing	Residential Treatment
Primary Focus	Long-term, peer-supported sober living	Structured, clinical treatment for substance use disorder (SUD)
Length of Stay	months to years (varies by level)	Short term, varies by level of care
Treatment Services	Non-clinical, but may support access to outpatient services	Intensive clinical services (therapy, MAT, medical care)
Environment	Home-like setting with peer accountability	Highly structured, medical or clinical setting
Funding Sources	Self-pay, grants, rental assistance, state funds	Insurance, Medicaid, state/federal programs
Key Support	Peer-driven, life skills, employment support	Licensed professionals, therapy, detoxification
Goal	<u>Long-term recovery, reintegration, independence</u>	<u>Stabilization, early recovery intervention</u>

The Importance of Quality Recovery Housing

- Quality recovery housing will support an individual increasing their Recovery Capital
- Recovery Capital refers to the total resources available to an individual to support and sustain their recovery
 - Personal
 - Social
 - Community
- Social Identify Model of Recovery (SIMOR)
 - Recovery from substance use is significantly influenced by the individual's social identify and how it changes during the recovery process
 - A shift from an identity associated with addiction to one aligned with recovery through the building of recovery capital



40-Year Temporal Horizon of Recovery Trajectories

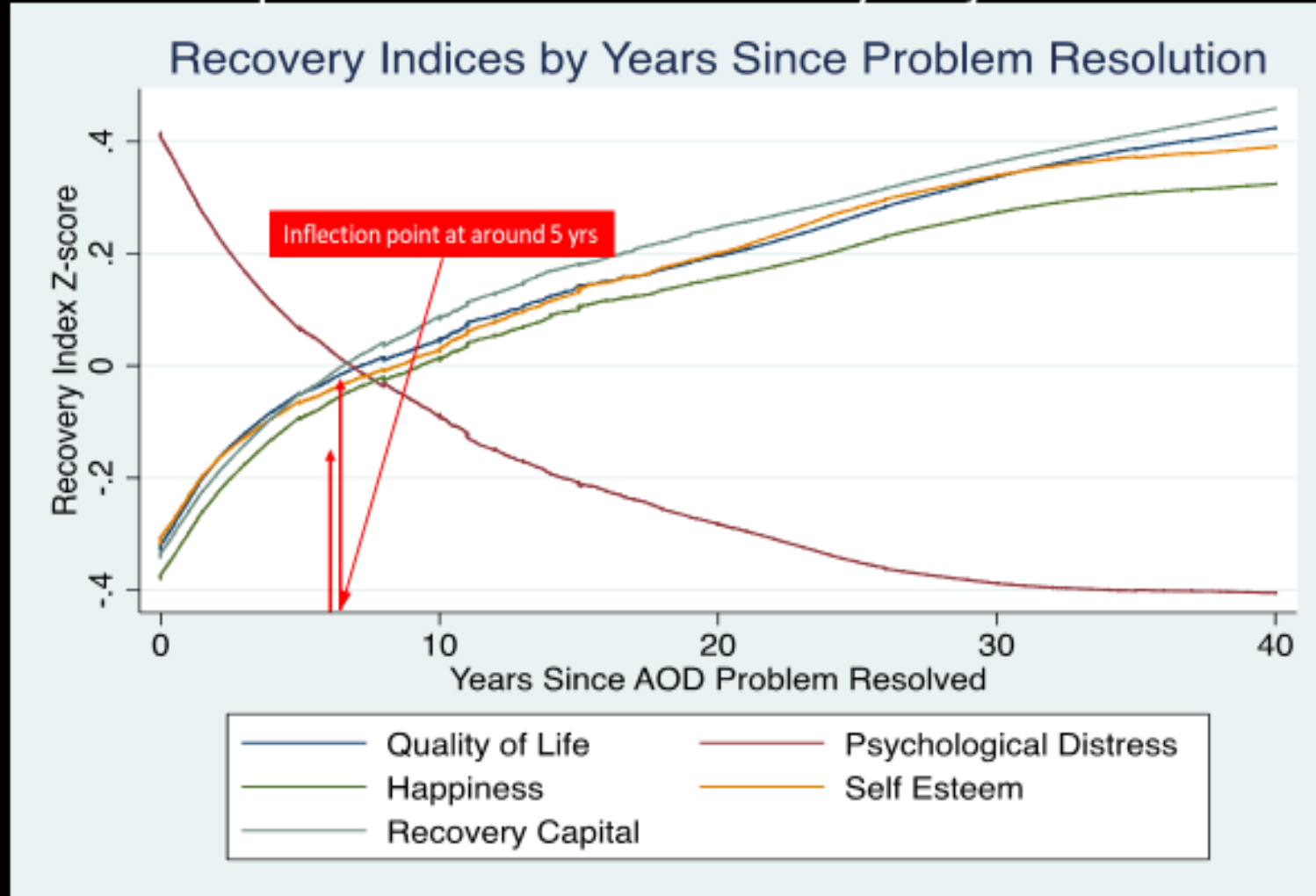


National
Recovery Study
(NRS)
N=2,002

Understanding Recovery Capital

- The breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery
- Domains:
 - Personal:
 - health, housing
 - Social:
 - peer/family support
 - Community:
 - services, legal systems
 - Cultural:
 - values, traditions
- Greater levels of recovery capital and social support are related to significant modest improvements in psychological distress, self-esteem, and quality of life which in turn were related to longer recovery duration.

40-Year Temporal Horizon of Recovery Trajectories



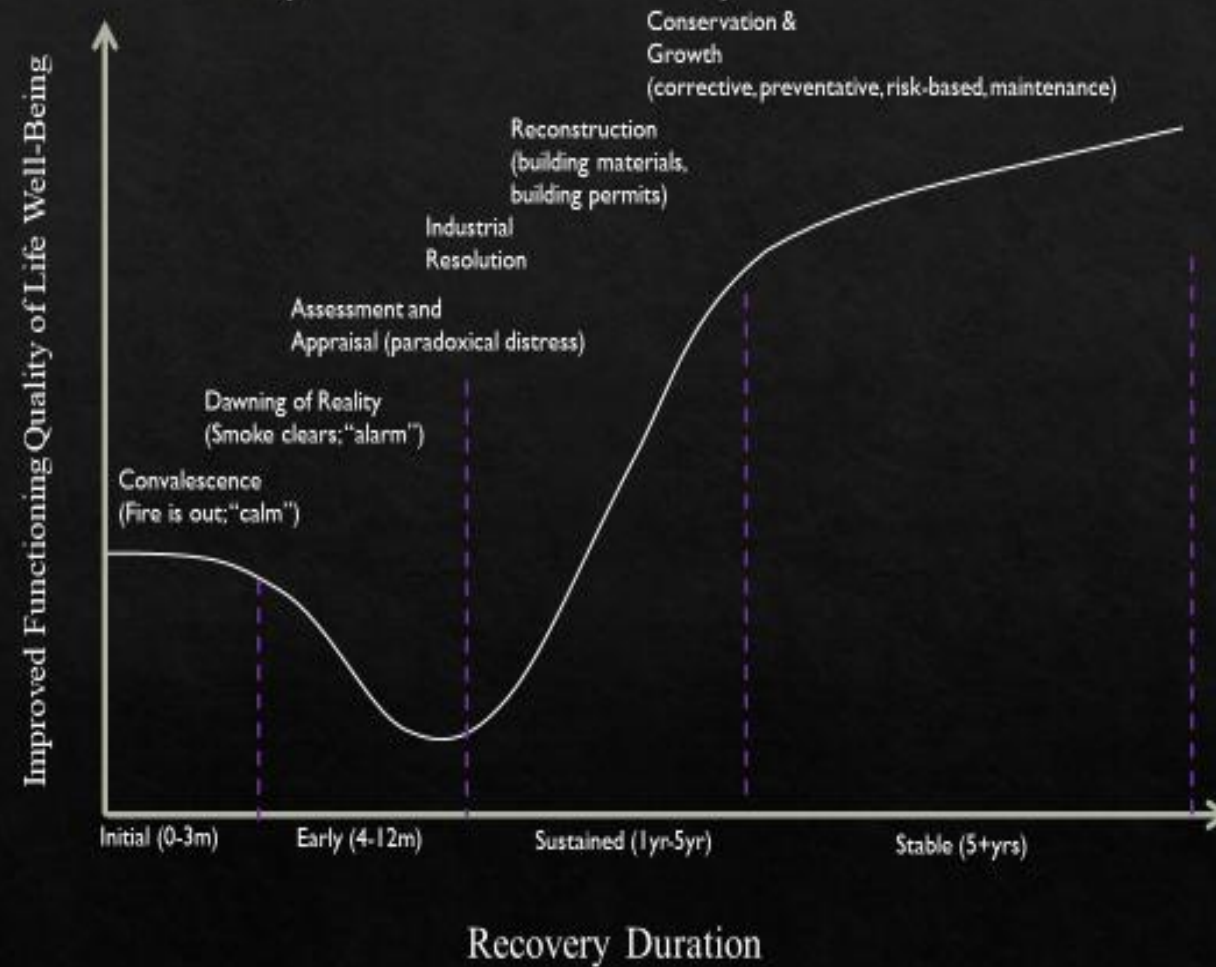
Why Recovery Programs????

- It takes 15 years of sustained recovery to achieve same QOL as the general public.
- According to Recovery Research Institute (J. Kelly @ Harvard) for someone regularly engaged in recovery housing and recovery support services, the same QOL is achieved in 5 years!!!
- Return to normalcy happens 3 times faster!



Recovery Curve

Preliminary Data-Based Recovery Milestones and Tasks...



Based on Kelly et al, 2018; *Beyond Abstinence; Alcoholism: Clinical Experimental Research*

What Is a Recovery-Oriented System of Care?

- SAMHSA: A coordinated network of community-based services and supports that is person-centered and builds on the strengths and resiliencies of individuals, families, and communities to achieve improved health, wellness, and quality of life for those with or at risk for mental health and substance use problems.

ROSC in Practice: The Recovery Ecosystem

Ecosystem = Interconnected services

Components:

- **Clinical Care**
- **Peer Supports**
- **Recovery Centers**
- **Housing**
- **Employment/Education Assistance**
- **Family and Childcare Support**

Continuum: Acute care → Community-based support

SERVICES PROVIDED

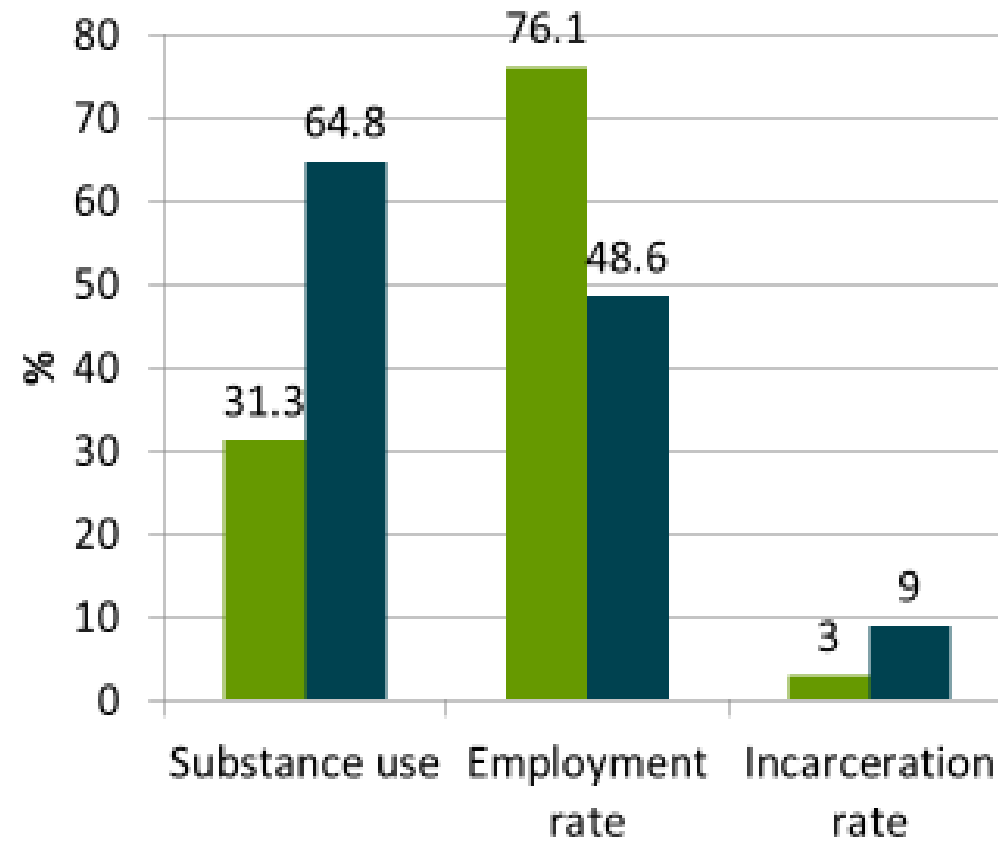




Oxford House vs. Usual Care

Recovery Residences had –

- half as many using substances across 2 yrs
- 50% more employed
- 1/3 re-incarceration rate



■ Oxford House
■ Usual Care

Where are we now?

- Total Operators: 96
- Total Residencies: 323 (4538 Beds)
- 39 Counties
- 48 Cities

How to Find Recovery Housing

- www.kyarr.org
- www.FindHelpNow.org
- Local Recovery Community Centers
 - Will have a directory of local recovery residences and can assist with referral
- Cabinet for Health and Family Services website
 - KYARR will update the list of certified residences on their website at least quarterly

Contact info:

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