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**Evaluating the Effectiveness of Restorative Justice Rehabilitative Services Available in
Northeast Tennessee for Mothers Diagnosed with Substance Use Disorder**

By

Claire G. Roberson

**An Undergraduate Thesis Submitted in Partial Fulfillment
of the Requirements for the
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Key Terms

For the purposes of this essay, the key terms are defined as follows:

<i>Mother</i>	Any female who still has parental rights to the child(ren) she has given birth to.
<i>Neonatal Abstinence Syndrome (NAS)</i>	A withdrawal syndrome which develops as a result of a physiological dependence on substances, most often opioids, while an infant is in utero (Recovery Research Institute, 2022).
<i>Restorative Justice</i>	An approach to justice that aims to re-integrate individuals into society by providing them an opportunity to take accountability for any wrongdoing and heal and correct past behaviors (Government of Canada, 2021).
<i>Intersectionality</i>	An analytical social theory developed by Kimberlé Crenshaw stating that when people are faced with inequalities, socioeconomic categories such as race, gender, and class are “best understood as overlapped and mutually constitutive rather than isolated and distinct” (Merriam-Webster, 2022).
<i>Self-Efficacy Theory</i>	An individual’s belief in their ability to perform the behaviors necessary to produce

	<p>positive outcomes; is reflective of one’s self-confidence to control aspects such as motivation, behavior, and environment (American Psychological Association, 2022).</p>
<i>Cultural Competency</i>	<p>The awareness and integration of health-related and cultural thought systems with disease occurrence and frequency and treatment outcomes (Georgetown University, 2022).</p>
<i>Substance Use Disorder</i>	<p>A clinical term for a physiological dependence on substances which contribute to symptoms that cause significant distress and/or the inability to complete tasks of daily living (Recovery Research Institute, 2022).</p>
<i>Trauma-Informed Care</i>	<p>Services provided in which health care providers recognize and respond to the impact of traumatic stress on clients’ ability to participate and heal (Peterson, 2018).</p>
<i>Adverse Childhood Experiences (ACES)</i>	<p>Potentially traumatic events that occur in childhood (CDC, 2022).</p>
<i>Addiction</i>	<p>A neurobiological disease with genetic, psychosocial, and environmental factors</p>

	influencing its development and manifestation (Recovery Research Institute, 2022).
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Abstract

Substance Use Disorder (SUD) has plagued families of rural Appalachia for many years, perpetuating involvement in the criminal justice system as well as generational trauma for people diagnosed with SUD and their children. This points to the necessity of a trauma-informed, restorative-justice based framework for rehabilitative services to most effectively heal families, address trauma, and re-integrate people diagnosed with SUD into society. A restorative justice-based program would provide health care services for addiction and any comorbid mental health disorders as well as teach parents how to properly provide for themselves and their families, manage finances, obtain employment, and further education. Current rehabilitative program structures were evaluated in the literature, and it was found that typically, rehabilitative programs provide either strictly addiction services or mental health services, but not both. It was also found that the criminal justice system tends to sentence to 28-day inpatient rehabilitative services, which provides people diagnosed with SUD an opportunity to achieve sobriety and establish some stability; however, with little or no follow up, these people are significantly more likely to relapse. These findings were compared with the structure of Ballad Health STRONG Futures, an outpatient addiction services and behavioral health clinic located in Greeneville, TN; Red Legacy Recovery, a recovery initiative serving incarcerated women in Elizabethton, TN; and Families Free, a 501(c)3 organization providing outpatient services to Northeast Tennessee through the Tennessee Department of Mental Health and Substance Abuse Services. It was found that rehabilitative care structures that addresses trauma, addiction, and aspects of daily living

such as parenting, finances, education, and employment provide clients with the tools and stability needed to be successful in their respective recovery journeys. This work will provide significant insight for the creation and implementation of other substance use clinics and initiatives across the country and encourage them to address mental health and aspects of daily living to promote clients' success and break cycles of generational trauma.

Introduction

This essay aims to establish the effectiveness of a restorative-justice based rehabilitative care structure for mothers diagnosed with SUD by evaluating current programs in place and exploring opportunities for growth and development of these programs to improve outcomes and eventually decrease SUD diagnoses.

The prevalence of SUD in rural Appalachia has exponentially increased over the past twenty years (Agency for Healthcare Research and Quality, 2017). This disease has been caused by both prescription and nonprescription drugs, namely methamphetamine, marijuana, heroin, fentanyl, and opioids prescribed for pain management. Prescription medication misuse has only encouraged illicit drug misuse; when patients are unable to refill prescriptions due to them being controlled substances, they turn to illegal methods of obtaining similar drugs. In turn, this puts people at risk of developing comorbid medical conditions including, but not limited to, hepatitis C, Human Immunodeficiency Virus (HIV), and Acquired Immune Deficiency Syndrome (AIDS). Additionally, 85% of incarcerated individuals have an active SUD or were incarcerated for a drug-related charge (National Institute on Drug Abuse, 2022). SUD not only affects an individual, but can have lasting effects on the entire family; for example, approximately 8.7 million children under the age of 18 live in a household where at least one parent has been diagnosed with SUD (Lipari and Van Horn, 2017). Oftentimes, people diagnosed with SUD have

also been diagnosed with a mental health disorder, such as anxiety, depression, post-traumatic stress disorder, or bipolar disorder (*Mental health and substance use disorders*, 2022), and 57% of adults diagnosed with a mental health disorder did not receive treatment. 26% of pregnant women admitted to prisons and 14% admitted to jails have been diagnosed with SUD (Sufrin et al., 2020). Only approximately 12% of adults diagnosed with SUD actually perceive an issue and receive treatment (*Behavioral Health Equity Report 2021*, 2021). On average, approximately 50% of people in recovery experience relapse (Manwarren-Generes, 2022). Because of these socioeconomic factors, instances of poverty, unemployment, incarceration, and addiction are only perpetuated (Harp and Oser, 2018).

Additionally, the presence of mental health disorders and lack of access to medical care due to inability to locate resources, lack of reliable transportation, and fear of judicial involvement due to any potential drug use provide significant barriers to providing families with the healing and care they both need and deserve. These factors indicate the need for a different type of approach to rehabilitative services; a more holistic, intersectional approach to rehabilitative services can aid in providing stability, resources, and tools necessary to increase individuals' self-efficacy and stay in recovery. Rather than incarceration for drug-related charges, a restorative justice approach is a necessity to combat SUD and the perpetuation of generational traumas and barriers that contribute to any inequities these mothers or their children may face.

Unfortunately, this concept proves to be a major oversight when discussing addiction and addiction recovery services. When discussing restorative justice, conversations typically focus solely on sociopolitical aspects of social re-integration; it is important to note, however, that there is a lack of conversation surrounding substance misuse and pursuing recovery. Developing holistic skills equips people in recovery to be successful and re-integrate into society in a way

that promotes relapse prevention, parenting skills, and educational and employment opportunities. These aspects are an essential piece of the conversation when discussing a restorative justice framework and how that framework looks in rehabilitative services for SUD.

Background

This qualitative evaluation examines current holistic-based rehabilitative behavioral health services in Northeast Tennessee at three local organizations: Ballad Health STRONG Futures, Red Legacy Recovery, and Families Free. Current statistical information surrounding women diagnosed with SUD both with and without histories of incarceration were examined from the Substance Abuse and Mental Health Services Administration (SAMHSA), a branch of the United States Department of Health and Human Services, as well as the Centers for Disease Control and Prevention (CDC). Through this evaluation of current services in place and statistical need, it was determined that the most successful method of providing restorative-justice based rehabilitative services for mothers diagnosed with SUD is through an organization which provides mental health, intensive case management, food, transportation, housing, educational, and employment-based services. This also should include community outreach and involvement in support-based groups as well as faith-based ones, if so desired by the population served. The most effective, sustainable outreaches provides long-term stability and support for clients.

Discussion

Due to socioeconomic disparities and variance in access to care, a restorative justice-based approach to rehabilitative health care is essential to providing a long-term solution to a population-based, long-term issue. Behavioral health clinics oftentimes do not consider SUD and instead treat patients from a strictly clinical perspective only. A restorative justice approach,

rather, focuses on the importance of the overlap of these issues and any others potential clients may face. This matters due to the way it improves and sustains a person's entire quality of life for the long-term rather than a short-term, short-sighted solution to a much more complex issue.

A holistic, intersectional rehabilitative approach is innovative, as it greatly differs from already-established clinical approaches. Many health systems and clinics that provide care for people diagnosed with SUD do not focus on addiction *and* behavioral health services; rather, these places specialize in addiction *or* behavioral health services.

An integrated, holistic approach is significant in contributing to the future of combatting SUD because it trains health care professionals to provide trauma-informed care for their clients, which is proven to build self-efficacy in adults diagnosed with SUD (Berg-Poppe et al., 2021). Additionally, a holistic approach is significant and necessary to provide longevity and community healing because it promotes recovery rather than only sobriety. This, in turn, creates a solid foundation for programs to assist potential clients in achieving success.

When discussing the importance of creating a long-term solution to SUD, it is important to identify a significant at-risk population: mothers. Mothers diagnosed with SUD can include pregnant women, women who have recently given birth, and women with children of their own. Many times, mothers with drug-related charges also have involvement with the Department of Children's Services, oftentimes losing custody of their children due to a lack of resources to care for the children in addition to combating SUD with no plan for recovery and little to no support. These women, especially incarcerated women, oftentimes do not receive the advocacy and support systems necessary to satisfy court requirements to regain full custody of their children. Many times, these requirements include receiving necessary care, establishing a stable living environment, and applying for supplemental assistance, as necessary; however, women who have

had cyclical involvement in the criminal justice system for multiple years oftentimes do not have the means or knowledge necessary to achieve these successes on their own.

Unfortunately, for mothers diagnosed with SUD, health care and restorative justice often does not co-occur. Only 12% of incarcerated mothers with SUD receive any type of behavioral health care; 6% of adults under the federal poverty level are have experienced serious mental illness within the last year; and 6.3% have had serious suicidal thoughts (*Behavioral Health Equity Report 2021, 2021*). When holistic health care and SUD does intersect, however, it equips women with the skills necessary to make significant change and empowers them to pursue a more stable environment to preserve themselves and their sobriety as well as their children's lives.

A key piece of the proverbial restorative justice rehabilitative services puzzle are community navigators in recovery themselves. Mental health professionals and social workers are key members of this recovery structure; however, people in recovery themselves can form relationships and trust with people newly in recovery in a way that other people cannot. The State of Tennessee provides people in recovery with the opportunity to become Certified Peer Recovery Specialists (CPRS). CPRSs are able, regardless of criminal background or history, to obtain licensure through the state to work in a clinical rehabilitative setting and establish relationships with clients that clinical personnel with no lived personal experience might not be able to build.

Health care professionals who have no personal experience with SUD oftentimes have difficulty relating to and establishing trust with clients. This reiterates the significance of trauma-informed care training in addition to providing culturally competent health care. A provider with no personal experience with addiction can still relate to his or her clients by first expressing that

they do not have that experience, but it is not a hindrance; rather, professionals with little to no experience can emphasize their ability to aid in the recovery process. For example, a health care provider with no lived experience can show a client how to form healthy relationships, establish community, and even aid in finding and keeping a job and managing finances.

Holistic approaches to combatting SUD are relatively new in the world of addiction services but are actively gaining popularity due to the high rates of success in program completion (Gemme, 2016). Effectiveness can be measured by mid-point and post-completion evaluations. The key to growth and sustained program effectiveness is listening – simply asking clients what can be improved and taking it into consideration moving forward can significantly improve outcomes and increase individuals' self-efficacy. Actively listening to and acknowledging concerns can better an organization's structure for future clients and increase successes and longevity. Flexibility in delivery methods will more effectively meet the needs of people seeking recovery.

Success of these programs is determined by whether performance outcomes are met. Performance outcome criteria can vary depending on the type of program and its funding; for example, a grant-funded program might require more stringent criteria where a health care system would require performance outcomes to be reflective of ones in existence for other clinics within the system. Motivation is a key aspect for clients to achieve success in his or her recovery. Parents diagnosed with SUD are often motivated by their children (Falloon, 2003). When clients with SUD have high self-efficacy and a tangible motivator for pursuing recovery in a long-term, holistic-based program, they are more likely to sustain recovery (Falloon, 2003).

To increase self-efficacy and encourage a smooth reintegration into society for individuals in recovery, it is essential that people in recovery obtain the resources they need to be

successful in the professional world. Holistic rehabilitative programs should provide workforce development as well as job-seeking assistance and resume and cover letter workshops. These could also include interview skills and connections to professional development. Not only will this allow women in recovery to better provide for themselves and their children, but it will also empower them to continue to grow, develop, and succeed.

Mental health services are vital to a successful rehabilitative program. Almost every case of SUD is tied in some way to adverse childhood experiences (ACES) or adulthood trauma and the resulting post-traumatic stress disorder and toxic stress (SAMHSA's Center for the Application of Prevention Technologies, 2018). Ensuring that mental health services are trauma-informed is essential to reaching breakthroughs during therapy sessions to prevent re-traumatization and promote coping skills.

Physical wellness is also essential to overall health, and it is proven to significantly aid in managing mental health diagnoses (Stubbs and Rosenbaum, 2018). Physical health can include clinical health services, such as regularly going to doctor appointments and following expert advice; however, this can also include prioritizing self-care and taking the time to exercise. Exercise is proven to boost endorphins, thus accelerating one's mood while simultaneously taking care of one's body.

Stable, sober supports are a necessity to provide holistic health care. This provides stability and encouragement for someone in the recovery process and can include friends, family members, and others in long-term recovery. Accountability also encourages people to stay on the path to recovery. Similarly, a lack of these sober, stable supports can easily allow someone to fall back into active addiction. A sense of community and solidarity encourages healing and recovery – that is, healing happens in community. The opposite of addiction is relationships.

A restorative justice approach for rehabilitative recovery services for mothers diagnosed with SUD should follow the same system and guidelines, regardless of what substance is problematic or reason for incarceration, if applicable. A progressive phase system is effective at tracking progress and providing tangible milestone markers of success to graduate the rehabilitative program. Program tiers or phases can be determined based on the scope of practice and services provided; for example, if staff are not trained in teaching parenting skills, then a required parenting course would either need to be taught by outside professionals, staff would have to be trained, or this should not be offered. Clients may complete the program but can also be welcomed back if services are necessary in the future. The key to this type of program is the support both in the highs and lows that come with addiction and seeking recovery.

People working on recovery are ultimately responsible for their treatment services, once admitted as a patient or client into a facility, whether outpatient or inpatient. If someone is not motivated to complete treatment, the only thing health care workers and treatment teams can do is provide support and be willing to welcome clients with open arms when they are ready to resume their recovery journey. If an individual is not yet ready to fully pursue recovery, that is not a choice health care professionals can make for them. Even when the initial decision to pursue recovery is made, the client may still have setbacks. It is important to provide support regardless and assist clients in holding themselves accountable moving forward. This is especially necessary when discussing mothers diagnosed with SUD, as women diagnosed with SUD face different physiological barriers due to biological, social, and environmental factors (U.S. Department of Health and Human Services, 2022). It is essential for health care workers to continuously provide positive encouragement, as setbacks are typically inevitable (Manwarren-Generes, 2022).

When infants are born to mothers who are actively misusing substances, they are tested for Neonatal Abstinence Syndrome, a disorder in which infants are born with a physical dependency on substances (U.S. Department of Health and Human Services, 2022). Testing for Neonatal Abstinence Syndrome involves a weighted ranking of 1-5 per symptom depending on symptom severity; if these infants score an 8 or higher, hospital staff are required to report the incident to the Department of Children's Services (Jansson et al., 2009). This, in turn, has many repercussions, as any involvement with the Department of Children's Services elongates the time that children are separated from their parents. This separation period can significantly impact children's growth and development and further contribute to a higher ACES score, putting them at higher risk of other health issues and inequitable circumstances regarding education and employment.

The justice system's framework varies from county to county, especially in the Northeast Tennessee region. In Greene County, for example, the local judicial system is supportive of Ballad Health STRONG Futures outpatient substance use and behavioral health program and, if potential clients are eligible, will court-order individuals with nonviolent drug-related charges to complete the outpatient program. However, in other counties in STRONG Futures' service area where the judicial system is not as familiar with holistic recovery services, judges are less likely to sentence to STRONG Futures.

The most effective way to reframe this system would be to educate local counties' judges and criminal justice systems on the importance of holistic, restorative-justice based health care and inform them of services available as well as achieved successes by these programs. In the particular case of Northeast Tennessee, this would be educating stakeholders and implementing the STRONG Futures program into justice systems in the ten-county service area of Northeast

Tennessee; these consist of Carter, Cocke, Greene, Hamblen, Hancock, Hawkins, Johnson, Sullivan, Unicoi, and Washington counties. Judges need to know that this resource is available—and it works.

This, of course, cannot be complete without community support. As is the case with the STRONG Futures program, collaborative efforts with community stakeholders are essential to program success. This includes parenting classes, financial literacy, wellness recovery action planning, and health and wellness. Each of these are taught by different organizations in the community: community colleges, local universities, and family-resource oriented nonprofits. Community involvement aids mothers in recovery to heal, provide for themselves and their children, and relearn how to integrate into society in recovery. Additionally, support systems reduce stigma and empower recovering mothers to build their self-efficacy, thus promoting stronger recovery outcomes and reducing risk of relapse (*Recovery and recovery support*, 2022).

Many mothers in recovery from SUD face barriers from life circumstances outside of substance use; these situations point to inequitable determinants of health. This can include, but is not limited to, poverty, employability barriers, educational level, and domestic disputes. This may also reduce a mother diagnosed with SUD's ability to access the clinical and behavioral health care she needs. Underlying health issues make it much more difficult for mothers to pursue educational or employment opportunities, and lack of child care only worsens this for many mothers. These cycles of inequity only perpetuate one another, and this cylindrical involvement only continues once mothers become involved with the criminal justice system, whether this be for drug-related charges or Department of Children's Services involvement in custody or parental right removal.

When providing restorative-justice based health care for mothers diagnosed with SUD it is important to remember that each of these disparities directly affect one another. For example, if a mother does not have reliable transportation, she may not be able to work. If she is unable to work, she may not be able to pay for childcare for her children. If she cannot afford childcare, then she is not able to work since she must take care of her children. The cycle continues.

Now, imagine this particular mother was previously incarcerated due to a drug-related charge, and the Department of Children's Services becomes involved, removing the children from her custody. She does not have any visitation with her children, and she is court-ordered to attend a 28-day rehabilitative program. The program only provides her stability and sobriety, not sustained recovery. Upon completion of the program, she has nowhere safe and stable to go. She goes back to her abusive partner and falls victim to substance misuse. When the time comes to work toward regaining custody of her children, she is denied. Her relapse lands her more drug-related charges, and the cycle continues until her parental rights are terminated.

28-day programs are effective at providing these women the foundation of stability they need to begin their recovery journey; however, once the program is completed, if clients are no longer linked to services or a safe, stable place to live, they are significantly more likely to relapse (McQuaid et al., 2018). To truly aid people in the recovery process, rehabilitative programs must consider the fact that these women have perpetuating issues. A sustainable, stable place to live and supportive social networks are key to breaking the cycles of poverty, incarceration, and addiction. Intersectional, holistic approaches to addiction rehabilitative services identify these multilayered issues and how they affect one another; these measures are necessary to provide support, healing, and prevent future relapse.

Another vital aspect to make a restorative-justice framed approach successful is to understand the culture of the population served. For example, a mother from rural Appalachia diagnosed with SUD is going to have vastly different background experiences and trauma than a mother diagnosed with SUD in New York City. In rural regions, for example, poverty and low socioeconomic status look quite different, and familial dynamics and social systems can vastly differ as well. It is essential that health care workers understand all aspects of the population they are serving and how each aspect has affected their individual health and how they got to where they are.

Establishing trust is a major foundational piece of providing holistic health care services. This may be difficult for health care workers who do not have any personal firsthand experience with SUD. Instead of allowing that to create a barrier, health care workers in a holistic substance abuse clinic should be trained to use their inexperience with addiction personally as a tool to show clients that they can assist them in connecting with the necessary resources in their recovery. This not only shows that the staff cares about their clients, but it also shows that they are willing to acknowledge their lack of personal experience. This honesty and vulnerability will aid in establishing strong relationships with the population served.

Another way to establish relationships with the target population is to incorporate equitable language into addiction services. Utilizing equitable language is essential to breaking barriers and reducing stigma of SUD. It also empowers clients to not define themselves by their past, addiction, or diagnoses but rather a person greatly affected by their environmental circumstances, whether social, political, economic, physical, or any combination of these.

Diverse teams are the key to a successful restorative-justice based addiction services clinic. A staff with various backgrounds and experience can round out the team and bring new

perspectives to the table. It is also essential to hire people in long-term recovery themselves to establish those relationships; these people have been incarcerated, they have been addicted to drugs or alcohol, they have had custody battles, and they understand what it is like to make it to the other side. Strong case management can further assist mothers in recovery to access the necessary resources to continue education, obtain employment, and become financially independent. This may also assist women in enrolling in government assistance to aid them while they re-integrate into society as working individuals.

It is essential for successful rehabilitative services to offer various treatment paths and options for recovery services while simultaneously providing intersectional and holistic services. These services should empower clients in making decisions for their treatment plans and playing an active role in pursuing recovery. This boosts self-efficacy and is more likely to achieve success. It also provides health care providers and recovery specialists to support clients' autonomy and ability to make positive decisions for themselves; often, women diagnosed with SUD that have also been incarcerated do not have the ability and self-assurance to make decisions for themselves, as they have never had the opportunity to do so. Encouraging facilitated independence builds self-efficacy in women with SUD. This process also establishes trust between providers and clients and builds sober support systems for people pursuing recovery.

When discussing self-efficacy through the lens of restorative justice, it is essential to highlight providers' significant role in increasing clients' self-efficacy. Health care workers can aid in increasing clients' self-efficacy through unconditional support. Oftentimes, clients in holistic recovery services have never had sober supports that encourage autonomy and guidance for being successful in recovery. Particularly, peer navigators can most effectively achieve this;

people in long-term recovery with lived experience in the criminal justice system can show people newly pursuing recovery that not only is recovery possible, but it can also be sustained.

None of this is possible without a structure that promotes self-efficacy. Just because services are available does not mean people are ready to utilize them. This points to the need for a structure that is supportive of people where they are, regardless of any pending charges or past convictions, educational level, economic status, or personal matters. Any perceived barriers or judgement will only push potential clients away. Educating community stakeholders and collaborative partners on the importance of acceptance and support in relation to success in recovery will aid in eliminating barriers to achieving success in recovery.

Restorative Justice Program Comparisons

The Appalachian region, particularly Northeast Tennessee, provides excellent resources for women in recovery and their respective families, including their children, to pursue and achieve the necessary skills and support to achieve recovery. Three of these organizations include Ballard Health STRONG Futures, located in Greeneville, Tennessee; Red Legacy Recovery, located in Elizabethton, Tennessee; and Families Free, which has many in-person locations in the Northeast Tennessee region; however, for the purposes of this evaluation, the focus will be on the Johnson City, Tennessee location.

Ballad Health STRONG Futures is a Temporary Assistance for Needy Families (TANF) grant-funded substance use and behavioral health outpatient clinic in Greeneville, Tennessee that serves both mothers and fathers with children under the age of eighteen. This clinic serves ten surrounding Tennessee counties, and it opened its doors to parents with histories of substance use and any comorbid mental health disorders in May 2021. STRONG Futures provides both group and individual therapy services, case management services, and includes guidance from

CPRSs, people in recovery themselves who provide support services for clients. In addition to these services, STRONG Futures also has a Judicial Liaison who attends court sessions as well as visits potential and current clients if they are incarcerated. This is to provide advocacy and support for clients who are involved in the criminal justice system.

STRONG Futures provides parenting, financial literacy, and workforce development classes on top of group therapy and individual appointments. Each client is assigned a team, which consists of a case manager, therapist, and certified peer recovery specialist, upon admission into the program. Clients stay with their team from start to finish. There are four phases in the outpatient program, and each phase has its own requirements for completion before moving on to the next phase. STRONG Futures is an excellent example of how holistic health care services provide the necessary support for success in a person's recovery journey. This organization consists of an outpatient facility, where the abovementioned services are provided, as well as a residential living center. The living center provides eligible clients with a safe, secure place to live while completing treatment at the outpatient clinic. The living center is open only to mothers, and children under the age of nine are allowed to stay at the living center with their mothers.

Red Legacy Recovery is a recovery program serving women who are incarcerated in Carter County, Tennessee. This program provides in-jail and public workshops to teach women essential skills to be successful post-incarceration. These include self-worth, finances, employability, parenting, and goal-setting in addition to assisting women in creating and implementing recovery wellness plans and post-incarceration plans to re-integrate them into society. Programs are also available for the public workshops. Red Legacy also provides the women they serve with a monthly women's networking event, allowing women in recovery to

connect with mentoring opportunities as well as polishing the professional skills necessary to obtain and sustain employment. Red Legacy recognizes that lack of reliable transportation causes a major barrier for women in recovery, and so they offer transportation services in grant-eligible counties so that clients may attend appointments (Red legacy recovery, 2022).

Families Free is a nonprofit organization built on faith-based principles and focuses on families affected by incarceration, though the organization provides services for families with other types of vulnerabilities as well. Families Free provides mothers with restorative-based services, such as case management, parenting, and stable support for women in recovery. This organization also provides transitional housing for up to five women in the Families Free Storie House, named after Families Free board member Nancy Storie. Additionally, Families Free provides therapeutic services as well as connects clients to assistance regarding education, food security, transportation, housing, and legal assistance (Families Free, 2022).

Services Overview

Each of the aforementioned organizations aim to assist Northeast Tennessee families, particularly women, in their respective recovery journeys. Though services provided are similar at each organization, there are many notable differences in population and scope of services.

STRONG Futures staff are highly trained in cultural competency for rural Appalachia and have built, from the ground up, an outpatient program designed to address all aspects of daily life to provide a gradual, solid re-integration into society. STRONG Futures aims to wrap around clients where they are and provide clients with consistent support through the difficulties that accompany recovery. STRONG Futures addresses intersectionality of clients' issues by identifying and treating any mental health disorders in conjunction with SUD treatment. Additionally, treatment teams are designed to be with clients from start to finish to avoid re-

traumatization and allow clients to form meaningful relationships with their respective therapist, case manager, and CPRS. Each moving part is designed to assist clients with seeking mental health treatment as well as accessing any assistance or resources necessary to obtain employment, transportation, education, housing, childcare, and community involvement.

STRONG Futures is primarily an outpatient substance use clinic; however, the organization views substance abuse as a result of both biological and environmental aspects of a person's life and aims to provide clients with the tools necessary to improve those conditions. It is important to note that STRONG Futures serves both men and women, but began as women only.

Red Legacy Recovery provides women in Northeast Tennessee with holistic recovery services, although the scope is not as wide as Families Free or STRONG Futures. For example, their services are directed only toward women and have a strong emphasis on women with a history of incarceration. Red Legacy does, however, provide women networking and mentoring opportunities that neither STRONG Futures nor Families Free provides. Red Legacy also provides its own transportation service, and this organization has formed collaborative efforts with other recovery organizations to provide transportation services to other clients in the service area, including STRONG Futures. These services exemplify necessary components of a restorative-based program; though the initial population focus was narrow, the emphasis on reconnecting incarcerated individuals with SUD into society as well as professionally equips clients with the relationships and skills necessary to be successful.

Similar to STRONG Futures, Families Free provides family-oriented restorative-based services to both mothers and fathers. Families Free's involvement with children is not as intense as STRONG Futures, but they do place an emphasis on reunification of parents and children. Families Free is also faith-based in its principles and practices, unlike STRONG Futures and Red

Legacy, though STRONG Futures does provide chaplain services. Families Free is primarily funded by the Tennessee Department of Health, Tennessee Department of Children’s Services, Tennessee Department of Mental Health and Substance Abuse Services, and private donations (Families Free, 2022). Families Free also provides educational opportunities in the community – this organization also provides parenting classes to STRONG Futures clients. Families Free also embodies a restorative justice-based approach due to the way they work to reunify families once parents have received the resources and skills necessary to sustain long-term recovery.

The most effective framework for a restorative justice-based rehabilitative program would have a combination of all three programs – a diverse team with varying backgrounds and lived experience; an opportunity for stable, sober living with the opportunity to house clients’ children as well; conjunctive substance use treatment and mental health services; transportation; advocacy for incarcerated individuals; and the opportunity to provide clients with faith-based resources as desired. Additionally, education on parenting and general life skills as well as assisting people with identifying and utilizing the resources necessary to further pursue educational and employment opportunities is essential to a successful program and provides clients the opportunity to form the relationships necessary to sustain long-term recovery.

Observational Experience

I had the honor and privilege to complete my undergraduate practicum field experience at Ballad Health STRONG Futures under the guidance of Senior Director of STRONG Futures and Addiction Services Dr. Michael Bermes. Clients in the STRONG Futures program are never fully discharged upon program completion; instead, they are welcome to attend classes and re-engage in services at any time post-graduation. This is unique from other substance use programs

in the way it builds, maintains, and sustains community. STRONG Futures clients also never pay a penny for services due to being TANF grant funded through the State of Tennessee.

STRONG Futures clients are resilient people and are appreciative of the ability to wake up every day and have unconditional support in their respective recovery journeys from staff, even when faced with setbacks. Experiencing a holistic rehabilitative program for people with SUD and any comorbid mental health diagnoses revealed the similarities amongst these issues and barriers that accompany them. People with extensive criminal records oftentimes are caught up in a system that is designed for people with resources and navigational knowledge of said resources to get out and stay out of legal involvement. When these are unavailable or under-used, people find themselves in difficult situations that, without support, are nearly impossible to overcome. The holistic services provided at Ballad Health STRONG Futures has established firm foundational support to further pursue and model rehabilitative services designed to serve people with SUD.

Conclusion

The prevalence of drug-related deaths in Tennessee has exponentially increased over the past ten years, pointing to increased illicit drug use as well as an increased risk of developing infectious diseases, decreasing self-efficacy, and perpetuating the cycle of SUD. This points to a need for an innovative approach to combatting SUD and the comorbid socioeconomic disparities that accompany it as well as addressing any underlying trauma. A restorative justice-based program is essential to provide families with the resources necessary to heal from and manage past trauma as well as form the essential connections and support to successfully pursue recovery.

Particularly in Northeast Tennessee, holistic recovery programs are aimed at healing families – specifically mothers with some inclusion and expansion of services to include fathers. Ballard Health STRONG Futures, Red Legacy Recovery, and Families Free offer holistic recovery services and promote healing through treatment and providing access to resources that these individuals might not have had the knowledge or means to access individually. Evaluating the effectiveness of these programs provides the framework necessary for current process improvement and any future potential expansion or recreation in other areas of the United States also strongly affected by socioeconomic factors such as poverty and drug misuse as well as lack of available resources for health care, food, education, and employment. Many programs exist to only assist people in recovery with one particular aspect when, in reality, the most effective way to re-integrate individuals diagnosed with SUD into society as well as prepare them to be successful parents and independent individuals, is to include all aspects affected in one particular program with a variety of specialties, diverse backgrounds, and the resources necessary to invest in the population served. Restorative justice-based programs provide the time and resources necessary to form a secure foundation for success in recovery.

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