



# A MATTER OF SUBSTANCE: AT-A-GLANCE

MARCH 2012

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DIVISION OF BEHAVIORAL HEALTH

## DIVISION QUICK FACTS

**Director's Corner:** So where are we on the *Addictions Services System Transition*? We said our goal is to assure an addictions (substance use disorders/problem gambling) safety-net infrastructure for Iowans who are low income, lack health insurance, or have minimal benefit coverage. The infrastructure should be based in **ROSC (resiliency- and recovery-oriented system of care)** principles and encompass community partners, prevention organizations, the recovery community and families, treatment providers, and other stakeholders, as well as IDPH.

Toward that goal, we've supported training around the state, provided multiple opportunities for input, organized our own activities and priorities around ROSC principles, and listened -- a lot!

- One of the people we've listened to is **David Runyon**, Executive Director of Helping Services in Decorah and a member of the SPF Advisory Council. See page 2 of this newsletter for David's commentary on prevention.
- Another listening opportunity: the broad range of stakeholders participating in DHS's **Mental Health and Disabilities Services Redesign**. To see the current legislative bills that grew out of months of work group meetings and public forums and hundreds of written comments, go to [HSB 623](#), [HSB 630](#), [SSB 3137](#), and [SSB 3152](#).
- And one more way for us to listen and learn: read the [Addictions Services System draft strategic plan](#) and send us your comments and questions.

Thanks, Kathy Stone

## UPCOMING EVENTS

### Substance Abuse Prevention Specialist Training

March 6-7 and April 11-12. Johnston - Midwest Counterdrug Training Center. For more information, go to [www.counterdrugtraining.com](http://www.counterdrugtraining.com).

### Living in the New Normal...Helping Military Children Thrive in Good and Challenging Times

March 21-22. Johnston - Iowa Gold Star Museum on Camp Dodge. For more information, contact Jeremy Van Wyk at 515-252-4040.

### Iowa Drug Endangered Children Conference

March 26. Altoona - Meadows Events and Conference Center. For more information, contact Becky Swift at 515-725-0301.

### Trends and Treatment in Chronic Pain and Prescription Drug Abuse

March 30. Sioux City - Peter Waitt Education Center. For more information, contact Christy Stinger at [CStinger@jacksonrecovery.com](mailto:CStinger@jacksonrecovery.com).

### Governor's Conference on Substance Abuse

**Pre-Conference Sessions** April 2. Des Moines - Community Choice Credit Union Convention Center at Veteran's Memorial.

- Ethical Decision Making
- Stimulant Addiction
- Opioid Addiction

For more information, go to [www.trainingresources.org](http://www.trainingresources.org).

### Governor's Conference on Substance Abuse

April 3-4. Des Moines - Community Choice Credit Union Convention Center at Veteran's Memorial. For more information, go to [www.trainingresources.org](http://www.trainingresources.org).

### Governor's Conference on Public Health

April 17-18. Ames - Scheman Conference Center. For more information, go to [www.iowapha.org](http://www.iowapha.org).

### Protecting Families Spring Conference

April 20. Sioux City Convention Center. For more information, contact the Mercy Medical Center's Education Department at 712-279-2507.

### Many Faces of Metal Illness

May 10. Sioux City Convention Center. For more information, contact Kim Fischer-Culver at 712-202-0173.

### Problem Gambling Webinar: Designing a Successful Problem Gambling Prevention Program

May 21. The webinar will be from 12:00pm -1:30pm Central Time. For more information, go to [www.trainingresources.org](http://www.trainingresources.org).

### SAVE THE DATE - 2012 Mental Health Conference

October 9-10. Ames - Scheman Conference Center. Watch for more details at [www.trainingresources.org](http://www.trainingresources.org).

**Training Without Travel** Check out the new online training courses available at [www.trainingresources.org](http://www.trainingresources.org).

For more information about the Division of Behavioral Health, visit [www.idph.state.ia.us/bh](http://www.idph.state.ia.us/bh)

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# GREAT OPPORTUNITIES FOR PREVENTION IN ROSC AND HEALTH CARE REFORM

BY DAVID RUNYON

David Runyon is Executive Director of Helping Services for Northeast Iowa

Two powerful streams of thought and practice are set to merge that will change how we think about and do substance abuse prevention in Iowa and across the nation. The target date for this merger is July 1, 2014. This is when we will see the main roll out of the Affordable Care Act, known popularly as health care reform, and when the Iowa Department of Public Health expects behavioral health contractors to be working within Recovery Oriented Systems of Care, or ROSC.

ROSC is a way of thinking, a philosophy, while health care reform creates structures for integrated and coordinated care. It is more hands on and practical than philosophical. Both streams challenge prevention professionals to shift their thinking and their practice. It is not as scary as it sounds though.

The ROSC philosophy is pretty simple and is consistent with emergent service philosophies in physical health care, and behavioral health care. What follows is my understanding of how ROSC fits with prevention services.

**“Recovery Oriented”** is, quite simply, an orientation toward health. It is an orientation that is consistent with strength based approaches to the individual, and the individual’s familial and community/cultural context. It is an affirmation of the belief that health is possible, that a person can define what health means to them, and that they will seek it if given the right supports and encouragement. This is a strength based approach and Prevention Specialists have extensive knowledge and experience with it through their work in individual, family, and community asset building.

**“Systems”** within the ROSC philosophy are simply that. Systems are those structures that define the context in which a person seeks to be healthy. These systems are well known and common to most people: family, friends, neighborhoods, schools, faith communities, medical, mental health, addiction, social services, employment, recreation and leisure, and government systems, etc. Working with these systems so that they, too, are oriented toward the health goals of individuals and families will comprise the “systems” work of the prevention specialist. This work will include advocating within all systems for policies that promote and support health, educating individuals one-on-one and in groups, and supporting individuals and families as they navigate through the systems of care. Systems work will rely heavily upon, and in fact will only be possible with the support of activist oriented coalitions of professionals and community folks. Coalition work will target environmental factors that create barriers to health or which promote unhealthy choices. Prevention Specialists along with coalitions will also work to reduce stigma associated with behavioral health recovery.

**“Care”** is where services are delivered in ROSC. It is here that a philosophy that promotes health and wellness meets the needs of individuals, families, and communities. Prevention Specialists will have significant roles in providing services. There will be opportunities for Universal, whole population, strategies that address local barriers to health. Health care systems will be required to promote healthier communities through promotions such as recent Blue Communities initiative in Iowa. These efforts are a primary strategy for reducing health care costs. There will be consultation opportunities with businesses, schools, faith communities, and more.

The Prevention Specialist will also be part of a team within traditional behavioral health services, within primary health settings, within insurance agencies, and within businesses. Under services supported by Affordable Care Act these roles might include individual screening, case management, group and family education, and wellness coaching. We will also see a continuation of grant opportunities that support community efforts that focus on specific areas of concern such as underage drinking, although I expect this to be a smaller piece of the funding for prevention services.

In order to negotiate this new work environment, prevention professionals will need to evaluate their current credentialing. New ways of funding prevention may add additional certification requirements such as found in the Community Health Educator certification, and educational expectations may shift to professional degrees such as Registered Nursing or Masters in Social Work.

The future under ROSC and health care reform offers great opportunity. It is ours to claim.