Recovery Roundtable

TAADAS held the first of what we hope to be a series of meetings bringing together the legal treatment and recovery support systems to discuss quality recovery program standards in Tennessee. The TAADAS Recovery Support Committee, chaired by Daryl Murray of Welcome Home Ministries, planned this event. TDMHSAS Assistant Commissioner, Rod Bragg and four department staff also helped with the planning and presented at the meeting. National Association of Recovery Residences President, Beth Uselton made the trip from Atlanta to attend the Roundtable to review their organization’s standards for recovery residences.

Sixty participants attended from programs and drug courts all over the state. The Roundtable was intended to help recovery service providers understand the mission and standards for drug courts and for drug courts to understand the purpose and standards for various recovery services. Participants learned about the new Peer Recovery Specialist training and were invited by TDMHSAS to provide feedback on A&D program outcome measures. The participants wanted to continue meeting to discuss common issues. The next Roundtable will be planned and announced shortly.
Recovery Roundtable Participants

ABOVE: The Roundtable included a panel addressing systemic issues and “Working Together” moderated by Ellen Abbott, Director of Criminal Justice Services for TDMHSAS (not pictured). The panel was asked to address systemic issues with quality Recovery Supports. Panel members left to right: Gerry Ivy of Davidson Co. Sheriff’s Office (DCSO), Judge Melvin Norman, Judge Casey Moreland, Laura Berlind of Renewal House, Angela Smith of Mending Hearts, Carmen Turks of DCSO, and Joyce Cole of the Dyer County Drug Court.

BELOW: Lisa Ragan, TDMHSAS Director of Consumer Affairs and Peer Recovery Services, described the new certification for Peer Recovery Specialists and their scope of duties.
RIGHT:
Beth Uselton, National Association of Recovery Residences President, described the NARR standards for recovery residences and the process NARR used to develop them.

LEFT:
Keith Richardson, Nashville Field Office Director for HUD presented information on how HUD uses Recovery Supports services in the HUD continuum.

BELOW:
Rod Bragg, Assistant Commissioner for Substance Abuse Services and Linda McCorkle, Director of Licensure for TDMHSAS described the types of services that need to be licensed and how recovery services are regulated for the Roundtable participants.
A New Year for Recovery Courts

The Drug Court program has been with the Tennessee Department of Mental Health and Substance Abuse Services (TDMHSAS) for a year! It has been an exciting year as we have worked with the drug courts. I am impressed by the dedication and work that each drug court team is doing in their communities.

Fiscal Year 2014, which began on July 1, 2013, is going to be a stellar year. The drug courts are becoming “Recovery Courts!” Now what does this mean? Recovery Courts will not only serve individuals with substance abuse issues, but will also serve as mental health and veteran’s courts. Governor Haslam submitted his budget, and the Tennessee General Assembly approved $1.56 million additional dollars to begin nine new recovery courts and add additional money to the existing certified courts. This moves Tennessee to a cutting-edge state in that we are serving more than those addicted to drugs and alcohol. Not only will the nine new recovery courts follow this model, but the existing drug courts will begin moving in that direction as well. Matter-in-fact, many of the current drug courts already serve individuals with mental illness and veterans. This is a smart move for Tennessee.

Additionally, through a collaboration with TDMHSAS and the Tennessee Department of Correction, the first in the nation “Statewide Residential Recovery Court” opened July 1, 2013 in Morgan County. Housed in an annex of the Morgan County Correctional Complex, this court will house up to 100 men who, if it were not for this court, the individual would be incarcerated under state custody. This court will serve individuals with a non-violent felony, whose crime is primarily based on substance abuse, mental health issues, and/or veterans issues with substance abuse and/or mental health issues. The Morgan County Statewide Residential Recovery Court is a true diversion court. TDMHSAS’ collaboration with the Department of Correction has been a great experience. Both departments are committed to providing the most effective and appropriate service for individuals with substance abuse issues. The cost per person will be $35/day compared to $65/day if incarcerated. A Ribbon Cutting and Celebration will be held at the Morgan County Statewide Residential Recovery Court on July 30, 2013, 10:30 am eastern time, at 541 Wayne Cotton Morgan Drive in Wartburg, Tennessee. I hope that many of you can join Governor Haslam, other elected officials and several Commissioners for this celebration.

As always, TDMHSAS is committed to providing the most effective and efficient service to the citizens of Tennessee. The Recovery Courts are one avenue to meet this goal.
Cycle of Treatment: Intake to Recovery Conference

TAADAS sponsored a conference to highlight advancements and best practices in the addictions treatment field on May 16 and 17. Conference Keynote presenters included such notable clinicians as Terry Gorski, Delbert Boone, Clifton Mitchell, and Glen Farr.

Additionally, the conference included sessions on ethics, clinical supervision and cognitive restructuring. Will Beyer presented information on ADHD, alcoholism and addiction. We were very proud and happy to be able to bring this incredible group together for two days of informative fun. The conference was sold out several weeks in advance and due to the positive feedback we’ve received, TAADAS is hoping to host a similar conference in the Spring of 2014.

Thanks to the great team at TAADAS for working so hard to make this conference a success!!
Each September, the Substance Abuse and Mental Health Services Administration (SAMHSA), within the U.S. Department of Health and Human Services (HHS), sponsors Recovery Month. This nationwide celebration is now in its 24th year. This year’s theme, “Join the Voices for Recovery: Together on Pathways to Wellness” emphasizes that while the road to recovery may be difficult, the benefits of preventing and overcoming mental health and/or substance use disorders are significant and valuable to individuals, families, and communities. People in recovery achieve healthy lifestyles, both physically and emotionally, and contribute in positive ways to their communities.

This year, The Tennessee Association of Alcohol, Drug and other Addiction Services will host a dinner on September 19, 2013 to promote awareness and recognize the progress of our providers of alcohol and drug treatment in Tennessee. We are planning to recognize and honor the individuals who worked to restore Adolescent A&D Residential Treatment funding to the FY 2014 budget. We are planning a festive night of entertainment and recognition that will include many of our partners in the recovery field.

Mark your calendar now and plan to join us Thursday, September 19th.

Don’t miss Nathan Lee!!
The Recovery Month Dinner and Awards will be highlighted with music by Nathan Lee. Nathan is a Nashville based performer in recovery who is a “SINGER WHO SINGS SONGS ABOUT DESPERATION FOR THOSE IN DESPAIR, WHO NO LONGER WISH TO BE DESPERATE. A SONGWRITER WHO WRITES SONGS ABOUT BROKENNESS FOR THE BROKENHEARTED, WHO NO LONGER WISH TO BE BROKEN.”
The Prevention Alliance of Tennessee is pleased to announce that Ms. Leah Festa has accepted the position of P.A.T. Coordinator. The PAT Board Hiring Committee unanimously supported this candidate. This young lady has an incredible background and education. She received her Masters Degree in Public Administration from the University of Tennessee. Her most recent position at the Center for Patient and Professional Advocacy at Vanderbilt University Medical Center includes implementing environmental strategies to affect the public health rates at the hospital. Ms. Festa is adept at strategic planning and logic modeling. We found her to be very personable and that she has a great capacity to lead with the vision to go with it. Her expected start date is July 15, 2013. She will attend the P.A.T. strategic planning session in Cookeville that day. Ms. Festa is also planning to attend the CADCA Mid-Year Conference the following week. The Prevention Alliance looks forward to growing our impact facilitated by Ms. Festa. The PAT office is located at 1321 Murfreesboro Pike, Suite 140, Nashville, TN 37217. Ms. Festa can be reached by calling 615-780-5901, ext. 19.

Statewide meeting of the Prevention Alliance of Tennessee

Friday July 15th, 9:00am - 4:00pm; Upper Cumberland Regional Health Office
1100 England Drive, Cookeville, TN 38501

This meeting will be a strategic planning session designed to give direction to PAT, it’s board and new coordinator. The meeting will be held in two 3 hour sessions both morning and afternoon, with a break for lunch.

Thank you,
Katie Brown, PAT Board Chair

PAT Board Members:

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<td>John Rust</td>
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<td>Katie Brown</td>
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“Live as if you would die tomorrow, Learn as if you would live forever. “ ~ Gandhi.

The General Assembly completed its work for this year on April 19, 2013, which is early as any adjournment since 1990. In enacting the only bill that must be passed, the appropriations act, the General Assembly has balanced recurring revenues with recurring expenditures and set aside $100 million for the State’s reserve fund. This significant achievement was done while lowering the sales tax on grocery food items from 5.25% to 5.0%; raising the income tax exemption levels for those over age 65; and capping the former 17% wholesale beer tax at $35.60 per barrel which will limit future increases in the tax. These tax cuts reflect well the hardwired attitude of Governor Haslam and the Republican dominated 108th General Assembly to make government smaller by cutting revenues.

Couple that state attitude with a federal legislative process that may best be described as dysfunctional where seemingly the Senate and the House cannot agree on what time it is. For the substance abuse treatment community, the sequestration is here to stay. You may recall, the premise of the proposed across the board federal budget cuts (aka sequestration) was the cuts were meant to be so draconian to defense and social programs alike that the Administration and the Congress would arrive at some “Grand Bargain” to avert the cuts and put the country on a sustainable fiscal plan more closely aligning revenues and expenditures. The Grand Bargain collapsed as House Speaker John Boehner could not count enough votes in the House to pass any tax increase. As a practical matter, Congress is not expected to enact a budget for the new fiscal year beginning on October 1, and federal programs will continue to operate with the cuts baked into the budget under a series of continuing resolutions.

Brighter Note. May revenue collection information released in June for Tennessee showed significant increases over budgeted projections. While the details are mind numbing, suffice it to say, that sales tax revenues and our business tax revenues are both good, and both are expected to exceed budgeted expectations for the fiscal year that ends Sunday. This bodes well for the upcoming 2013-14 fiscal year. Our state unemployment rate of 8.3%, which is above the national rate of 7.6%, continues, however, to be a drag on our state’s economy.

Define Politics. “In politics there are no right answers, only a continuing series of compromises between groups resulting in a changing, cloudy and ambiguous series of public decisions, where appetite and ambition compete openly with knowledge and wisdom. That's politics.” Alan Simpson (R), US Senator from Wyoming (1979-2007).
**News From Capitol Hill Continued …**

Please keep on your summer to do list reaching out to the membership of the 108th General Assembly. Congratulate them on surviving the first year of service in the State Capitol and promise to be a resource for any substance abuse treatment issue that may develop. Remind the members about your facility with data such as the number of employees and the number of clients treated to drive the conversation to the importance of your agency to your community. As our Recovery Month materials remind us: Prevention Works, Treatment is Effective, and People Recover. No one is going to feel sorry for you because times are tough. You have to give good information to policymakers that lead to knowledge and wisdom, so that funding resources for substance abuse treatment are a part of the conversations and compromises in the series of public decisions that become public policy in Tennessee.

Links of Note: The Department of Mental Health and Substance Abuse Services does an annual summary of 2013 state legislative activity affecting the field. The lengthy report casts a broad net and is a helpful resource. Here’s a link to the report: http://www.state.tn.us/mental/policy/pdfs/2013%20Legislative%20Summary%200513.pdf.

The American Civil Liberties Union has released a report entitled “The War on Marijuana in Black and White.” Notable findings include over 8 million marijuana arrests made in the United States between 2001 and 2010. 88% of those arrests were for simple possession. Those marijuana possession arrests account for 52% of all drug arrests in the United States. The report also finds that a black person is 3.73 times more likely than a white person to be arrested for marijuana possession even though usage rates are similar. Here’s a link to the report: http://www.aclu.org/files/assets/061413-mj-report-rfs-rel4.pdf.

Calendar Notes: State offices will be closed Thursday, July 4, 2013, in observation of the Independence Day Holiday and Monday, September 2, 2013, in observation of the Labor Day Holiday.

Nathan Ridley is an attorney with the Nashville firm, Bradley Arant Boult Cummings LLP. You may contact him by e-mail at nridley@babc.com.

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**Legislation of Note for 2013**

- SB 48/HB 12—Revises definition of analogue controlled substances
- SB 442 / HB 880 – Public Chapter 32 – Immunity to health care providers in certain situations
- SB 449 / HB 277 – Public Chapter 398 – Safe Harbor Act of 2013; Establishes procedures for pregnant women referred to drug addiction treatment that receives public funding to be a priority user. Prohibits certain treatment centers from refusing treatment solely because the person is pregnant.
- SB 676/HB 1264—Establishes that the board of pharmacy and the appropriate professional licensing board shall create certain rules relating to controlled substances
- SB 676/HB 1264—Public Chapter 300 – Reporting of a patient who makes an actual threat of bodily harm
- SB 424 / HB 355 – Public Chapter 190 – Updates functions performed by Alcohol & Drug Abuse Counselors
Teens and positive energy make a powerful combination. And the campus of Tennessee Tech University was bursting with both as nearly 400 youths and advisors from across the state converged for the annual Tennessee Teen Institute, a five-day peer-led conference designed to empower them in the prevention of substance abuse and destructive behaviors in their communities.

It’s the most positive and energetic place I’ve been to in my life, said Power of Putnam assistant director Justin Sweatman-Weaver, who, for the third time served as an advisor at TTI, along with Cookeville High School Traffic Education Saves Teen (TEST) Club advisor Cindy Winchester.

On the first day, you’re just bombarded with so much energy and positivity you don’t know how to react, Sweatman-Weaver said. But by the second day, no one is a stranger. Everyone is your best friend.

The purpose of TTI, which is sponsored by the State of TN, Community Coalitions, local law enforcement, and treatment providers statewide, is to promote the development of a healthy, safe and drug-free lifestyle by impacting the attitudes and behaviors of youths toward alcohol, tobacco, drug abuse and violence.

It’s a youth leadership camp with a focus in prevention, Sweatman-Weaver said. They deal with issues pertinent to teenagers such as bullying and violence, teen pregnancy, positive self-image, nutrition and health. And while students are there, they make strategic plans they can take back to their schools and implement in the next school year.

Our thanks to the Editor of the Herald Citizen for allowing TAADAS to reprint these excerpts. Read more in the Herald Citizen - Youths gain skills to combat substance abuse during TTI at:

TENNESSEE CO-OCCURRING DISORDERS COLLABORATIVE
STRENGTHENING INDIVIDUALS, FAMILIES, AND COMMUNITIES THROUGH EDUCATION & AWARENESS

CO-OCCURRING DISORDERS: Moving Tennessee Toward Integration

How many people are affected?
It is estimated that over 10 million people across the United States are struggling with co-occurring disorders. Many of these people do not access treatment services, and when they do, the treatment is often not “integrated” or delivered in a way that best meets their needs. Based on national prevalence data it is estimated that in Tennessee approximately 196,000 individuals suffer from co-occurring disorders.

What is the impact of co-occurring disorders?
We actually know a lot about the impact of co-occurring disorders on individuals, families and our community.
- Impact on our healthcare system . . . People who suffer with this usually have more episodes of relapse and more emergency room visits. They have to go to inpatient hospitals to address symptoms of mental illness and addiction more often than people who are dealing with one disease. We also know that people with co-occurring disorders have higher rates of chronic diseases such as HIV, diabetes, hepatitis and high blood pressure.
- Impact on the Criminal Justice System . . . In the local jail systems, 76% of inmates with mental health issues reported substance use. Untreated mental illness, or mental illness and a co-occurring substance abuse disorder, is a strong predictor of recidivism.
- Impact on our families . . . It is estimated that approximately 60% of families of children involved in the child welfare system have substance use problems with at least one-half of those being diagnosed with a co-occurring mental illness. In 2010, Tennessee had approximately 8,000 children and adolescents in state custody. Of the families involved in the state’s foster care system, prevalence data tells us that approximately 2,000 to 4,000 families are impacted by substance use and a co-occurring mental illness which have a negative impact on health, relationships, safety, employment and education and poses greater challenges in maintaining recovery or resiliency than those with a single diagnosis.
- Impact on our communities . . .
  Homelessness - At least 50% of people who are homeless have co-occurring disorders. Left untreated, they have little chance at obtaining jobs and permanent housing.
  Workforce - Mental illness and substance abuse drains over $100 billion from American businesses. More workers are absent due to stress and anxiety than physical illness or accident.

What can we do to influence change?
- Create and support a “no wrong door” community-based integrated treatment approach, so that mental health centers and addictions treatment providers are equipped to help, no matter who comes through their door for assistance. The presence of co-occurring disorders is the expectation rather than the exception.
- Increase treatment opportunities. Last year in Tennessee, approximately 12,000 people received treatment for addictive disorders. Due to limited resources, less than 3% of those with co-occurring disorders received treatment through our addictions treatment systems.
- Advocate for a continuum of treatment options, including inpatient and outpatient care, supportive housing, and peer-to-peer support provides the best possible opportunity for recovery.
- Provide Tennesseans with the resources to manage these diseases and the support to maintain life-long recovery. Treatment works and recovery is possible.
- Provide co-occurring disorder training. Workforce development is critical. Tennesseans has a wealth of experienced, dedicated clinicians who want to help. Providing them with the most up-to-date information and training on evidence-based practices will ensure our place as leaders in the field of co-occurring disorders treatment.

STEERING COMMITTEE CHAIRMAN
Randy Jucker, Ph.D., Senior Vice President Specialty Services, Frontier Health, Gray

NAMI TENNESSEE
CO-FOUNDING ORGANIZATION OF THE TENNESSEE CO-OCCURRING DISORDERS COLLABORATIVE
Roger Stewart, Executive Director, NAMI Tennessee, Nashville
Dick Baxter, Ph.D., President, NAMI Tennessee
Robin Nolden, Executive Director, NAMI Davidson County, Nashville

TENNESSEE ASSOCIATION OF MENTAL HEALTH ORGANIZATIONS (TAMHO)
CO-FOUNDING ORGANIZATION OF THE TENNESSEE CO-OCCURRING DISORDERS COLLABORATIVE
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Jim Jones, Clinical Manager/Case Manager, Pathways, Jackson
Vickie Harden, Senior Vice President for Clinical Services, Volunteer Behavioral Health Care System, Murfreesboro
Vicki Griffey, Coordinator A&D Caregiver Counseling Center, Paris
Teresa Fusay, Director of Member Services, TAMHO, Nashville
Elynn Wilbur, Executive Director, TAMHO, Nashville

TENNESSEE DEPARTMENT OF MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES (TOMHSA)
Rod Bragg, Assistant Commissioner, Division of Substance Abuse Services, Nashville
Segil West, Assistant Commissioner, Division of Mental Health Services, Nashville
Ken Horvath, Co-Occurring Disorders Specialist, Division of Substance Abuse Services, Nashville
Angela McKinney Jones, Director of Prevention Services, Division of Substance Abuse Services, Nashville

GRANT ADMINISTRATOR
Teresa Fusay, Director of Member Services, TAMHO, Nashville

TENNESSEE ASSOCIATION OF ALCOHOL, DRUG & OTHER ADDICTION SERVICES (TAADAS)
Debra Hillin, President, TAADAS, Nashville
Charlotte Hoppers, Executive Director Grace House, Memphis
Mary Linden Salter, Executive Director, TAADAS

TENNESSEE VOICES FOR CHILDREN (TVC)
Charlotte Bryson, Executive Director, Nashville

TENNESSEE COALITION FOR MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES
Robert J. Benning, Chairman (CEO), Reddickway, Oak Ridge

TENNESSEE ASSOCIATION OF ALCOHOL AND DRUG ABUSE COUNSELORS (TAADAC)
Toby Abraham, President, Nashville
Charlie Hart, River City Counseling, Chattanooga

MENTAL HEALTH AMERICA OF MIDDLE TENNESSEE
(Formerly Mental Health Association of Middle TN)
Tom Sterling, Ed.D., President/CEO, Nashville
TAADAS will be closed for the following holidays:

Independence Day - July 4th

Labor Day - September 2

TAADAS meets in Suite 140 at 1321 Murfreesboro Pike at 10 am on the second Thursday of each month and will meet this quarter on:
July 11
August 8
September 19th - 5:30 pm Annual Meeting & Banquet

Please contact the TAADAS Executive Director for meeting information, directions or other membership information:
Mary Linden Salter
615-780-5901, x-18
marylinden@taadas.org

Prevention 1st Conference

July 29-30, 2013

$75.00

Embassy Suites—Murfreesboro

KEYNOTE SPEAKERS:

Sandra Del Sesto
Julie Stevens
Tommy Farmer

TN Certification
Board Approved
SAVE THE DATE
Journey Together Conference 2013

Plenary Speakers
Rokelle Lerner
Chip Dodd
Frances Patterson - Ethics, 3 hours

Sponsors and Exhibitors
Still Available!

Workshop Proposals
Closed

Conference Brochure and Registration Forms
Available Summer 2013

September 2013

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September 22, 23, 24, 25
Sheraton Music City Hotel
777 McGavock Pike
Nashville, TN 37214
Hotel Reservations: 888.627.7060
Hotel Phone: 615.885.2200

23 Credits Available
NAADAC, LCSW, LADAC APPROVED CEU’S

PLEASE VISIT OUR SITE @ www.mtaadac.org
FOR REGISTRATION INFORMATION
Help Influence Federal Guidelines for Opioid Treatment

You can now comment on the Federal Guidelines for Opioid Treatment. This preliminary set of guidelines provides detailed information to opioid treatment programs (OTPs) and accreditation organizations about what they need to comply with new requirements under the Code of Federal Regulations (42 CFR Part 8).

View the Opioid Treatment Guidelines [PDF - 982 KB]

Representatives from OTPs, accreditation organizations, patient groups, the medical community, and interested members of the public are asked to review & comment on these preliminary guidelines. All comments submitted by the deadline, July 16, 2013, will be carefully considered.

Email Your Comments [dpt@samhsa.hhs.gov]

Written comments should be mailed to the following address. Please allow sufficient time for mailed comments to be received before the close of the comment period.

Substance Abuse and Mental Health Services Administration
Attention: DPT Federal Register Representative
Division of Pharmacologic Therapies
1 Choke Cherry Road, Room 7-1044
Rockville, MD 20857
TAADAS Programs

TAADAS Statewide Clearinghouse
The Clearinghouses’ mission is to provide a comprehensive information dissemination service for all Tennesseans. The Clearinghouse is home to a large and varied collection of resources that are continually updated and expanded. The extensive resource center for alcohol, drug and other addiction information offers free materials including pamphlets, fact sheets, booklets, and posters, etc. Topics range from general addiction knowledge to current research and trends. In addition to the free materials, there are also materials that may be checked out such as videos and curricula, as well as a research area. This project is funded under an agreement with Tennessee Department of Mental Health & Substance Abuse Services.

Tennessee REDLINE
The TENNESSEE REDLINE serves as the statewide referral source for any person who calls seeking assistance and/or resources on substance abuse and addiction disorders—including Co-Occurring A&D disorders that arise along with Mental Health disorders. Callers are given listings for resources in their area. The REDLINE has been in existence since 1994 and is funded under an agreement with the Tennessee Department of Mental Health & Substance Abuse Services. You can reach the REDLINE by dialing 800.889.9789 24 hours a day, 7 days a week.

Recovery Books & Things is the TAADAS Bookstore. There are hundreds of self help book titles in stock - and more that can be special ordered! Recovery Books & Things stocks a unique collection of quality gifts designed to sustain, inspire, and celebrate the recovery journey. Shop online from the comfort of your own home, or visit our store in person. Recovery Books & Things is located in the TAADAS offices in Nashville. Store hours are Monday through Friday from 8 am - 5 pm CST. Phone the store toll free at 877.863.6914.

Regional Training
TAADAS provides training statewide to assist professionals in obtaining continuing education contact hours and to enhance the efforts of Community Coalitions, Recovery Support providers and treatment agencies. This project is funded under an agreement with Tennessee Department of Mental Health and Substance Abuse Services.
There is Help for Problem Gamblers in Tennessee

What is Problem Gambling

As defined by the National Council of Problem Gambling, problem gambling is gambling behavior which causes disruptions in any major area of life: psychological, physical, social or vocational. The term “Problem Gambling” includes, but is not limited to, the condition known as “Pathological,” or “Compulsive” Gambling, a progressive addiction characterized by increasing preoccupation with gambling, a need to bet more money more frequently, restlessness or irritability when attempting to stop, “chasing” losses, and loss of control manifested by continuation of the gambling behavior in spite of mounting, serious, negative consequences.

Is there Problem Gambling in Tennessee?

Based on a report published by the University of Memphis, it has been estimated that there are over 200,000 persons in Tennessee with gambling problems. (Satish Kedia, Ph.D., The SAT Report, University of Memphis, Vol. 1, No. 3, 2004)

Are You a Compulsive or Problem Gambler?

Only you can decide. In short, problem gamblers are those whose gambling has caused continuous problems in any facet of their lives. The following 10 questions may help you to decide if you are a compulsive or problem gambler.

Have you …
- often gambled longer than you had planned?
- often gambled until your last dollar was gone?
- had thoughts of gambling that caused you to lose sleep?
- used your income or savings to gamble while letting bills go unpaid?
- made repeated, unsuccessful attempts to stop gambling?
- broken the law or considered breaking the law to finance your gambling?
- borrowed money to finance your gambling?
- felt depressed or suicidal because of your gambling losses?
- felt remorseful after gambling?
- gambled to get money to meet your financial obligations?

If you or someone you know answers “Yes” to any of these questions, consider seeking assistance from a professional.

For confidential assistance, call the 24 hour, 7 days a week toll-free Tennessee REDLINE for help with gambling problems.
1-800-889-9789

The Tennessee Department of Mental Health & Developmental Disabilities, Division of Alcohol & Drug Abuse Services, offers services for problem gamblers and their loved ones.

If you or someone you know is concerned about gambling, please contact the following agency:

The Gambling Clinic at the University of Memphis
901-678-STOP (7867)
www.thegamblingclinic.memphis.edu
E-mail: gambling@memphis.edu
Organizational Members

Agape, Knoxville
Aspell Recovery Ctr., Jackson
Buffalo Valley, Hohenwald
CADAS, Chattanooga
CADCOR, Murfreesboro
Clay County Anti-Drug Coalition, Celina
Cocaine & Alcohol Awareness Program, Memphis
Community Prevention Coalition of Jackson Co., Gainsboro
Comprehensive Community Services, Johnson City
E.M. Jellinek Center, Knoxville
Families Free, Johnson City
First Step Recovery Center, Memphis
Franklin Co. Prevention Coalition, Winchester
Friend of Bill’s Recovery Houses, Lebanon
Generations, McMinnville
GRAAB Coalition of Bradley Co. Grace House, Memphis
Harbor House of Memphis, Memphis
Healing Arts Research Training Ctr., Memphis
HealthConnect America, Nashville
Henry Co. Prevention Coalition
Here’s Hope, Counseling Ctr., Dyersburg
Hope of East Tennessee, Oak Ridge
Innovative Counseling, Memphis
Jack Gan Shelter, Savannah
JACOA, Jackson
Madison Treatment Center, Madison
Memphis Recovery Center, Memphis
Mending Hearts, Nashville
Metro Health Department, Nashville
PAL (Prevention Alliance of Lauderdale) Park Center, Nashville
Place of Hope, Columbia
Renewal House, Nashville
Samaritan Recovery Community, Inc., Nashville
Serenity Recovery Center, Memphis
STARS Nashville
Synergy Treatment Ctr., Memphis
The Next Door, Nashville
The Shipley House, Nashville
Turning Point Recovery Residences, Nashville
Welcome Home Ministries, Nashville
YANA, Nashville

Affiliate and Individual Members

DigiPoint Solutions
Employee Benefit Specialists, Inc.
Hamblin County Recovery Court, Morristown
Knox County Drug Court

Susan Binns
David Guenther, CPA
Cody Harris
Leland Lusk
John McAndrew

Wayne McElhiney
Tina Mitchell
Judge Seth Norman
Butch Odom
Nathan Ridley

George Snodgrass
Jeri H. Thomas
What is TAADAS?
The Tennessee Association of Alcohol, Drug and other Addiction Services (TAADAS) began March 26, 1976 when a group of concerned Tennesseans joined together in Chattanooga for the purpose of “creating and fostering a statewide association to promote common interest in prevention, control, and eradication of alcoholism and other drug dependency.” The TAADAS mission is to educate the public and influence state/national policy decisions in order to improve services to those who are affected by alcoholism, drug dependency and other addictions. TAADAS programs are funded in part by grants from the Tennessee Department of Mental Health and Substance Abuse Services, Division of Alcohol and Drug Abuse Services.

TAADAS’s purpose is to:

- promote the common interest in the prevention, control and eradication of alcoholism, drug dependency and other addictions;
- work in close cooperation with agencies concerned with alcohol and drug abuse, and other addiction issues;
- facilitate cooperation with all agencies interested in the health and welfare of the community;
- impact legislation regarding alcohol and drug abuse and other addiction issues;
- educate the community regarding alcohol and drug abuse and other addiction issues;
- encourage and support the development of alcohol and drug abuse and other addiction services in areas that are underserved;
- enhance the quality of services provided by Association members;
- to serve as a resource for Association members; and
- to further fellowship among those members.

As a statewide association made up of prevention programs, treatment agencies, recovery services and private citizens, TAADAS strives to be the Voice for Recovery in Tennessee through its membership and many programs.

It’s up to US to help others understand!
Alcohol and other drug dependence is a primary, chronic, progressive and potentially fatal disease. Its effects are systemic, predictable and unique. Without intervention and treatment, the disease runs an inexorable course marked by progressive crippling of mental, physical, and spiritual functioning with a devastating impact on all sectors of life — social, physiological, family, financial, vocational, educational, moral/spiritual, and legal. We must join together to focus attention in support of addiction treatment, prevention, and recovery. The public needs to understand that addiction is a treatable illness and that millions of people achieve recovery.

TAADAS Membership
TAADAS is a statewide association made up of alcohol and drug abuse treatment, prevention and recovery service professionals, and others who are interested in addiction issues. TAADAS keeps alcoholism, drug abuse and other addiction issues in the forefront when public policy decisions are made and through the collective voice of its members, TAADAS directly impacts the important issues facing the addiction services field today.

- Expand Knowledge – Take advantage of the TAADAS Statewide Clearinghouse’s extensive resource center.
- Impact Public Policy – TAADAS has long been the voice for alcohol and drug abuse issues in Tennessee. TAADAS provides advocacy for alcohol, drug and other addiction issues, and first generation information on policy issues, as well as a strong voice for parity issues.
- Networking – TAADAS offers networking opportunities with professionals and other concerned individuals across the state in the alcohol, drug and other addiction services community

- TAADAS Times Newsletter
- Discounts at Recovery Books & Things
- Discounted Hotel Rates
- Credit Union Membership
APPLICATION FOR MEMBERSHIP IN TAADAS

Membership shall be open to individuals or entities with an interest in addiction, co-occuring, prevention, or recovery support services and subject to payment of membership dues. **Organizational Member** - Any non profit or governmental organization or entity that provides addiction, co-occurring, prevention or recovery support services is eligible to become an Organizational Member of TAADAS.

**Affiliate Member**—Any organization or business that is affiliated with or wishes to support the efforts of the AD& provider and recovery community.

**Individual Member** - Individual membership is open to any individual with an interest in addiction, co-occurring or recovery support services in Tennessee.

**Student or Retiree Member**—Individual membership open to anyone with an interest in addiction, co-occurring or recovery support services in Tennessee. who is retired, unemployed or enrolled in a higher education program or is working towards a LADAC.

### Annual Dues*

<table>
<thead>
<tr>
<th>Category</th>
<th>Annual Revenue Range</th>
<th>Dues</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organizational/Affiliate Member</td>
<td>with Annual Revenue &lt; $100,000</td>
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<td>$500,000 - $1,000,000</td>
<td>$1000</td>
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<tr>
<td>Organizational/Affiliate Member</td>
<td>$1,000,000 - $2,000,000</td>
<td>$1500</td>
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<tr>
<td>Organizational/Affiliate Member</td>
<td>&gt; $2,000,000</td>
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<td>Individual Member</td>
<td></td>
<td>$100</td>
</tr>
<tr>
<td>Retiree or Student Member</td>
<td></td>
<td>$50</td>
</tr>
</tbody>
</table>

*Minimum suggested leadership pledge ... you may pledge more

Date: ___________ *  Referring Member: (If Applicable) ________________________________

Name: __________________________________________

Agency: ________________________________________

Address: ______________________________________

City: __________________________ State: _______ Zip Code: __________________

Phone: ___________________________ Toll Free: ____________________________

Fax: _______________________________ Email: _________________________

Agency Website: ____________________________

Agency Representative: ____________________________

Representative Email: ____________________________

Please send your completed application to TAADAS at 615-780-5905 (fax) or taadas@taadas.org
Team TAADAS walked and worked the TAADAS Booth at the NAMI walk for 2013!!

ABOVE: TAADAS staff, Ivory Saulsbury, Michelle Webster, Mary Linden Salt- er and TAADAS supporter, Beth Stringfellow

RIGHT: Ivory points out TAADAS Clearing- house materials for a NAMI Walk participant