

NEWSLETTER

REENTRY & RECOVERY:

Custom Supports
through Massachusetts'
Access to Recovery
Pilot Programs



Reentry and Recovery: Custom Support through Massachusetts' Access to Recovery Pilot Programs

For more than 10 years, the Massachusetts Access to Recovery (ATR) program has been helping people with substance use disorders (SUD) improve their lives through individualized recovery support services across the spectrum of needs, including housing, recovery coaching, and job training. While not exclusively for individuals involved with the justice system, more than 70 percent of ATR participants are reentering the community or have histories of criminal justice involvement.

Keep Reading

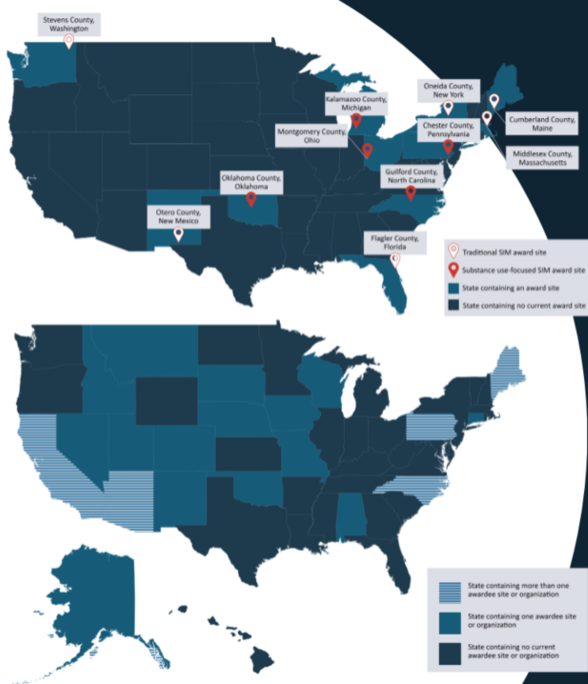
USING THE HOLISTIC DEFENSE MODEL

to Address Inequities Among Indigenous People in the Justice System

Using the Holistic Defense Model to Address Inequities Among Indigenous People in the Justice System

Incarceration rates among Native Americans, including American Indians and Alaska Natives (AI/AN), significantly exceed those of White populations. Research indicates that AI/AN individuals face a 38 percent higher incarceration rate compared to the national average, highlighting a critical disparity in the criminal justice system. The causes vary, including historical oppression of Native people, higher rates of factors known to contribute to justice involvement among Indigenous groups (e.g., intergenerational trauma, poverty, substance use disorders), and a complex criminal jurisdiction within Indian Country among the 574 federally recognized tribes. At least one strategy shows promising results in reducing inequities and improving outcomes for Indigenous people: the holistic defense model.

[Read More](#)



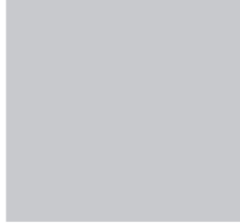
SAMHSA's GAINS Center 2024 Awards

for Sequential Intercept Model Mapping Workshop and the Trauma Informed Responses Train-the-Trainer Event

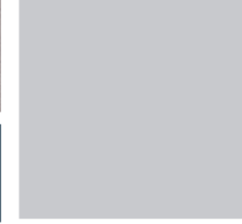
SAMHSA's GAINS Center 2024 Awards for Sequential Intercept Model Mapping Workshops and Trauma-Informed Responses Train-the-Trainer Events

Each fall, SAMHSA's GAINS Center solicits applications from communities to receive funded technical assistance. The GAINS Center is pleased to announce the 2024 award recipients of Sequential Intercept Model (SIM) mapping workshops and trauma-informed responses train-the-trainer (TTT) events. These selected counties and communities will benefit from comprehensive, cost-free training that includes extensive planning and logistics support, educational materials, and continued technical assistance after the workshops or events.

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SAMHSA'S GAINS CENTER'S



Criminal Justice Learning Collaboratives



Four Practice Areas Available!

Due Date Extended!
Apply by February 16, 2024



EXTENDED DUE DATE: Apply for SAMHSA's GAINS Center's Criminal Justice Learning Collaboratives

Extended due date: February 16, 2024

The GAINS Center has extended the application period for jurisdictions interested in collaborating with subject-matter experts through Criminal Justice Learning Collaboratives (LCs) focused on:

- **Creating and Enhancing Community-Level Partnerships Among First Responders and Certified Community Behavioral Health Clinics**
- **Diversion and Support for Transition-Age Youth**
- **Implementing Risk-Need-Responsivity Principles in Adult Drug Courts and Reentry Programs**
- **Trauma-Informed Treatment Courts**

About the Criminal Justice LCs

The LC model brings together local jurisdiction teams to create coordinated local strategic plans and implementation strategies for the topic of focus. Selected teams for each LC will work intensively to determine optimal ways to implement best practices and define success indicators. Each topic-specific LC will engage subject-matter experts to work with jurisdiction teams during the implementation process and to facilitate peer-to-peer sharing. Through a virtual platform, selected teams will work together to learn and complete their implementation work while, at the same time, having the opportunity to share with other jurisdictions and receive an array of technical assistance from subject-matter experts across the country.

The LCs are designed to achieve four key objectives:

- Enhance collective knowledge of key issues and familiarity with the topic.
- Understand promising and evidence-based practices to address related issues.
- Develop strategic plans that focus on addressing the issue, with a focus on the implementation of policies, procedures, and best practices to improve treatment, services, and supports.
- Increase knowledge about challenges and lessons learned in implementing strategies through peer-to-peer sharing.

Application and Selection Process

Applications for these solicitations are due by February 16, 2024.

General requirements:

- Narrative (up to five pages)
- Expectations/guidelines will differ by LC topic
- List of key partners who will participate on the team
- Letters of support or commitment from key partners

Selected jurisdictions will be notified the week of February 26, 2024.

[Learn More & Apply](#)

Partner Feature

- [Sobering Care Standards](#) | National Sobering Collaborative
- [Supporting Individuals With Acquired Brain Injury](#) | All Rise

Flashback on Crisis Response Models

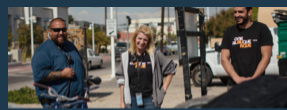


[Advancements in Crisis Response: Talk to, Respond, and a Place to Go](#) | May 2022



San Francisco Street Crisis Response Team Reduces Law Enforcement Involvement

[San Francisco Street Crisis Response Team Reduces Law Enforcement Involvement](#) | June 2023



THE RIGHT RESPONSE AT THE RIGHT TIME
The Albuquerque Community Safety Department Leads with Community

[The Right Response at the Right Time: The Albuquerque Community Safety Department Leads](#)



[Mobile Crisis Response to 988 Calls](#) | December 2023



SAMHSA's GAINS Center for Behavioral Health and Justice Transformation is funded by the Substance Abuse and Mental Health Services Administration.

SAMHSA

5600 Fishers Ln | Rockville, MD | 20857 US

Disclaimer: SAMHSA's GAINS Center for Behavioral Health and Justice Transformation develops and distributes this Newsletter with support from SAMHSA. Its contents are solely the responsibility of the authors and do not necessarily represent the official view of SAMHSA.

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