Friendship House Highlights

A total of 37 IHS clients (21 male, 15 female, 1 transgender MTF) received alcohol and substance abuse treatment services at the Friendship House during this third quarter. This includes 17 clients (10 male and 7 female) who were admitted throughout this reporting period. Cumulatively for FY 2016-2017, a total of 63 have received alcohol and substance abuse treatment services. Of these 63 clients, 13 clients rolled over from the previous fiscal year and 50 new clients have been admitted.

A total of the 18 clients were discharged this quarter. Of those clients:

- Six clients completed Primary Residential Treatment (PRT), Level 2, and transitioned to Extended Residential Treatment (ERT), Level 1.
- Three clients graduated from PRT, Level 2, and transitioned out to a Sobel Living Environment or returned to their homes.
- Seven clients walked-out of the program (two clients in PRT, Level 1, and 5 clients in PRT, Level 2)
- Two clients in PRT, Level 1, were terminated due to non-compliance of the program’s policy.
Friendship House provided and facilitated the following groups during this quarter: Red Road in Recovery, Early Recovery, Relapse Prevention, Caseload, Cultural Education, Process Groups, Family Dynamics, Men’s and Women’s Wellness, Arts and Crafts, Women’s and Men’s Sweats, Daily Living: Stable Housing, Active Daily Living, Step Study, Big Book Study, Talking Circle, Anger Management, AA/NA meetings, Team Building Exercise, Monthly Client Outings, and Graduation Ceremony (bi-monthly).

Additional activities and events in which the clients participated during this 3rd quarter:

- Health Education Groups
  The nursing students from Samuel Merritt University (SMU) in Oakland and San Francisco State University (SFSU) facilitated various groups sessions on the following topics: liver health, cardiovascular health and medications, exercise and physical health, hygiene, high blood pressure, breathing disorders, mindfulness/meditation, and more.

- Educational Services with Five Keys Charter School
  Clients attend these classes twice a week in order to attain their GED or High School Diploma.

- Monthly Ceremonies with Traditional Counselors
  Traditional Counselors, Steve Darden and Richard Moves Camp, alternate months to facilitate a two-day ceremony for the clients, staff and community members. During this quarter, Mr. Moves Camp facilitated the ceremonies in February and April, and Mr. Darden facilitated the ceremony in March.

- Inner Child: Calling Back the Spirit
  This four day ceremony was facilitated by Myra Smith from February 20, 2017 to February 23, 2017. This ceremony is for those clients who have childhood abandonment issues, clients who may have lost a mother or father while in their youth, or clients who were raised in a home where drugs and alcohol were present. The goal of this ceremony is to bring healing to that child (the inner child), bring closure around core issues, and become whole again.

- Running is my High
  On March 25, 2017, clients participated in the Native American Health Center’s 17th annual Running is My High event. This 5K/10K run/walk was an opportunity to celebrate sobriety and wellness in the Native American community.

Additional activities and events in which only the FH Lodge clients and children participated during this 3rd quarter:

- Parenting Class at Family Paths
  This organization provides a series of ten parenting classes, and clients receive a certificate upon completion.

- Parenting Class at NAHC Sage Center
  Clients also attend this native positive parenting class on a weekly basis.

- Events at Intertribal Friendship House
  Clients attended Native Storytelling on February 18, Family Movie Night on February 21, and Red Road Gathering on April 1.
Staff Development

- Two of our counselors attended a Conflict Transformation Training on April 11, 2017.
- Two of our counselors attended a Suicide Preventions Training on April 12, 2017.
- Staff had One-on-One sessions with Richard Moves Camp, Traditional Counselor, on April 11, 2017.

Committed partners

Friendship House Partners include:

- Native American Health Center Medical, Dental and Community Wellness Department of San Francisco and Oakland – the NAHC partners with Friendship House through ongoing health and wellness education, in addition to providing medical, dental, HIV/AIDS and mental health services and outreach.
- Westside Community Services – this is a crisis center that provides trauma-informed mental health services in San Francisco. The following services are provided to Friendship House clients: individual therapy, group therapy, and crisis intervention and support.
- Five Keys Charter Schools and Programs of San Francisco – the Five Keys Charter Schools and Programs partners with Friendship House in order to provide the following educational services to Friendship House clients: high school credit classes, GED classes, and independent study towards a high school diploma or GED.
- Local AA/NA Support Groups and Meetings, San Francisco and Oakland, CA – peer mentors work with clients in identifying and attending ongoing support meetings. Peers mentors assist in making meaningful connections with support groups, encourage attendance and are available to attend with clients. This is an important ongoing connection with the larger community and assists in aftercare and ongoing support services.
- Samuel Merritt University in Oakland and San Francisco State University partner with Friendship House through an ongoing internship program in which approximately 27 nursing interns (19 at San Francisco and 8 at the Oakland Lodge) provide health education groups, health screenings and individual health assessment for those clients with chronic illnesses.

Agency Background

Friendship House Association of American Indians, Inc., of San Francisco (Friendship House) was established in 1963 to serve the American Indian community relocated from their reservations to the San Francisco Bay Area through the federal government’s Indian Relocation. The mission of Friendship House (FH) is to promote healing and wellness in the American Indian community by providing a continuum of substance abuse prevention, treatment, and recovery services that integrate traditional American Indian healing practices and evidence-based substance abuse treatment methods.

Spanning more than five decades of service, Friendship House has served more than 4,800 residential clients, hundreds of youth consumers, and provided community-focused events to countless numbers of American Indians throughout the San Francisco Bay Area and beyond. Friendship House has
assisted thousands of American Indian people from across the nation by providing health, wellness and education services in parallel to providing residential substance abuse treatment, recovery and transition services for adults, including mothers and their young children.

Friendship House services assist AI/ANs in achieving and sustaining their recovery through a peer recovery support model. The model Friendship House uses is an AI/AN culturally based model built through the expertise of individuals with similar lived experience. All aspects of the evidence-based practice, *Friendship House American Indian Traditional Treatment & Recovery Healing Model* are guided by the following American Indian traditional healing concepts:

- Prayer, song, and drum sessions are complementary to the spiritual/cultural norms and values of the individual, and are an important element of the client's program plan.
- Participation in sweat lodge ceremonies is suggested to enhance detoxification of unhealthy chemicals in the body and to purify the body, mind, and soul of mind-altering chemicals.
- Access to Native American Traditional Healers through individual and group sessions is an important part of the individual's program plan. This is especially important in helping the individual to understand and/or reclaim his or her cultural and spiritual identity.
- Acknowledgment of tribal traditions and traditional ways (and distinguishing these ways from acculturation to western culture) is an important part of the individual's recovery.


*The Friendship House American Indian Traditional Treatment & Recovery Healing Model and Core Practices Client Workbook* is an 86-page companion to the implementation manual. It contains much of the same information but in a client-centered format. Each chapter also contains client worksheets for reflection and other handouts. The workbook assists clients in beginning to reclaim their traditions and is a resource throughout their healing journey (Lebron, Waukazoo, et.al.2012).

**Friendship House Program Design**

The Friendship House Program design is distinguished by Primary Residential Treatment (Levels 1-2) and Extended Residential treatment (Levels 3-4):

- **Primary Residential Treatment (RT), Level 1:** (Beginners Stage of Residential Treatment 0-2 months): This is the beginning phase of treatment where, upon admission, clients are placed on 30-45 day restriction. During “restriction” clients have no contact with anyone outside the treatment program so they can begin to adjust to their new surroundings, become familiar with the program expectations, and reflect on why they are in treatment. A comprehensive orientation is given, during which each client completes a variety of forms
and is informed of confidentiality, client rights, and HIPAA. Case management, assessments, medical/dental referrals, financial needs, development of individual treatment plans, and an introduction to the following groups occur during this phase: process groups, Red Road to Recovery, relapse prevention groups, 12-Step groups, education groups, Talking Circle, HIV/AIDS prevention, Sweat Lodge, Cultural Identity, and American Indian Values.

- **Primary Residential Treatment (RT), Level 2:** (Intermediate Stage of Residential Treatment 3-6 months): In Level 2 clients are off restriction and attend groups that are more interactive and in-depth than the introductory groups. The individual treatment plan helps guide each client toward the group(s) that better support and maintain his or her recovery, because specific groups are tailored to each individual’s strengths, needs, abilities, and preferences. The clinical team monitors client progression, abilities, and all part of this phase. Clients are introduced to peer-to-peer recovery support and aftercare during this phase.

- **Extended Residential Treatment (ERT), Level 3:** (Aftercare I – Advanced Stage 6-9 months): This is the beginning phase of the aftercare component where peer-led educational groups, job readiness, and life skills training continue on a more advanced level. Participation in cultural events and facilitation of 12-step support groups is encouraged for social support, enhanced communication, and to establish a community within the program.

- **Extended Residential Treatment (ERT), Level 4:** (Aftercare II – Senior Stage 9-12 months): The aftercare component is designed to continue improvement of skills learned in previous phases while offering on-site transitional housing. Clients are expected to pursue their educational and/or employment goals during this time. Evening and weekend support groups are offered to accommodate client schedules. Continued participation in peer-to-peer programs, cultural events and facilitation of 12-Step support groups is encouraged for social support, enhanced communication, and to further develop a community within the program. Clients are encouraged to become members of the “Sober Spirits” Alumni Association during this phase and consider becoming peer mentors as a way of building a supportive community that remains with them as they exit the program.

**Recovery and Wellness Support Services**

Friendship House’s philosophy is that recovery is based on culturally-based efforts that address trauma, is person-driven, holistic, and is supported by peers, allies and recovery networks. Individuals have a personal responsibility for their own self-care and journey of recovery. Self-determination and self-direction are the foundations for recovery as individuals define their own life goals and participation in AI/AN culture. Relating to other AI/AN people who are walking the Red Road inspires hope and a sense of belonging.

Each client receives expanded alcohol and substance abuse primary residential treatment and extended residential/transition services, along with a comprehensive continuum of care. Social support, linkages to and coordination with service providers, and a full range of human services are included within recovery support services. Peer-to-peer services, mentoring, coaching, leadership groups and self-help (such as AA, NA, etc.) are essential recovery support services, and are often provided by those who are in recovery themselves. Recovery support services include case management, mental health services, wrap-around services, medical care, employment services and
job training, education placement, education assistance, life skills, peer-to-peer services, assistance with food stamps and entitlements, self-help groups, and referrals.

At the core of Friendship House, program principles are based on “lived experience” and peer support, as many staff of the Friendship House are graduates of our program themselves and function as peers for residents struggling to let go of old behavior patterns and develop positive relationships and emotions. We believe that the individuals facing crisis and recovery find strength in community, in relating to those that have traveled similar roads and finding purpose in reconnecting with culture as a source of identity and mental, emotional and physical health. Peer-to-peer activities include:

- Developing and Implementing a Plan for Training/Mentoring Peer Leaders
- Peer-to-Peer Recovery Coaching/Mentoring
- Peer Social Support Groups
- Educational/Employment Referrals and Placement
- Individualized Transition Plans
- Drug-Free Socialization Activities
- Outreach and Family Engagement Strategies
- Family Reunification Plans

These services aim to address the broad spectrum of race, ethnicity, religion, gender, age, geography, language, literacy, sexual identity, and disability. Friendship House sponsors Traditional Healers and consultants from a diversity of cultural backgrounds and traditions to work with clients in creating a safe and supportive environment that fosters deep respect for individuals of all backgrounds. American Indian cultural healing activities include prayer, singing, drumming, sweat lodges, smudging, herbs, and ceremonies. The Clinical Director oversees the residential/extended residential treatment programs. The Health Educator and Extended Residential Treatment Coordinator are both certified substance abuse counselors and provide recovery support for transitional clients and support for alumni, (the initial point of outreach/recruitment for peer-to-peer leadership development and recovery support). Friendship House continues to use various methods and approaches to reach the population of the AI/AN adult substance abusers who are not currently enrolled in a formal substance abuse treatment program. Friendship House’s reputation is disseminated through word of mouth originating from client graduates of the program, through tribal networking, and collaborations with referral organizations.

Friendship House receives client referrals from the Native American Health Centers in Oakland, San Francisco, and Sacramento. Additionally, referrals come from Native American health clinics in Sonoma, Mendocino, Humboldt and San Diego counties; and from tribes located throughout California (such as Lytton Rancheria, Jackson Rancheria, Graton Rancheria and Karuk Tribe). Clients are referred through other substance abuse treatment centers, detox centers, homeless shelters, the Department of Public Health, the San Francisco Clinic Consortium, various Indian Health Service facilities, local health clinics, and other community based organizations. In addition, Friendship House has out-of-state referral relationships through Navajo Nations in Arizona and has established networks with other tribal groups across the country, for instance, Ute Tribe in Utah and Eastern Shoshone Recovery Center in Wyoming.

The *Friendship House American Indian Traditional Treatment & Recovery Healing Model* is designed to address AI/AN cultural needs, so that all services provided by the implementation of the
evidence based program are inclusive of intertribal traditions/rituals, as well as understanding
gender-specific roles. Many urban AI/ANs have a background comprising of different tribes and/or
races. Friendship House has a wealth of experience in providing services to the diverse ethnic,
linguistic, sexual, and cultural differences of the populations we serve under our programs and
requires an environment that is sensitive to many cultures for those we serve.

For determining progress and success, a quality assurance process, including a committee that meets
quarterly, is in place. Continuous quality improvement interests include status updates regarding
compliance or exceeding compliance with grantor goals, objectives, and activities; recruiting, and
sustaining peer-to-peer participation; and comprehensive evaluation of services, outcomes and
program, in general.

Community events, such as the Families in Recovery (coming up in June 2017), Friendship House
Graduations (held quarterly), the Gathering of the Lodges, and other clean and sober events highlight
the importance of building peer support networks, thus facilitating retention in treatment and a clean
and sober lifestyle. Cultural activities and large community dinners sponsored by Friendship House
at Thanksgiving and Christmas attract a large AI/AN population in the Bay Area. At these events,
those who have not yet entered treatment, those who have been lost to follow-up, or those who only
occasionally access care, are treated with dignity and respect, and asked if they would like to engage
in program activities, or if they have relapsed, to seek help and return to the residential treatment
program.

Client Outcomes

The proven track record and success of the Friendship House model is evident in the thousands of
women and men and their children that have come through our doors and have embraced sobriety
and have passed on their culture and sobriety to the next generations. The legacy of the effectiveness
has grown vastly though out the Bay Area and in the states of California, Arizona, Utah, New
Mexico, Montana, and Wyoming. Many Friendship House graduates have become staff members,
counselors, program directors and community and tribal leaders. The community has benefited from
the graduates of the program who have continued their sobriety and become productive role models
in their communities.

Evidence of effectiveness includes reduction in substance use, reduction in criminal justice
involvement, increases in employment and educational attainment, and reductions in health,
behavioral, and social consequences. Results are based on Friendship House GPRA data, collected
over a 13-year period, and include the following:

- **Decrease in Substance Use:** Substance use data was collected at intake and after six months
  of program participation for 1,084 clients. At intake, 42.1% of clients reported that they had
  been abstinent for the past 30 days from drug and alcohol use. After six months of program
  participation, this had increased to 90.9%.

- **Reduction in Crime and Criminal Justice Involvement:** Crime and criminal justice
  involvement data was collected at intake and after six months of program participation for
  1,082 clients. At intake, 91.5% of clients reported no past 30-day criminal justice
  involvement. After six months of program participation, this had increased to 98.3%.
• **Increase in Employment/Educational Attainment:** Education, employment, and income data was collected at intake and after six months of program participation for 1,084 clients. At intake, 23.2% of clients reported being currently employed and/or attending school. After six months of program participation, this had increased to 43.1%.

• **Improved Health, Behavioral, and Social Consequences:** Mental and physical health problem data was collected at intake and after six months of program participation for 1,065 clients. At intake, 59.5% of clients reported no health, behavioral, or social consequences related to alcohol or illegal drug use. After six months of program participation, 89.9% of clients were experienced no alcohol or illegal drug-related health, behavioral, or social consequences.

In 2012 and 2014, two-sample t-test between proportions were performed to determine whether there was a significant difference between Friendship House waitlisted individuals and Friendship House clients who had received 6 months’ residential program intervention (based on a 12-year study of client baseline/follow-ups of Government Performance and Results Act – GPRA. The t-statistics were significant at the .01 critical alpha level (p<.01) across five measures: Abstinence, Crime and Criminal Justice, Health/Behavioral/Social Consequences, Employment/Education, and Mental Health.

**Engagements in Assessing, Planning and Project Implementation by Individuals in Recovery**

At Friendship House, those in recovery have input in assessing, planning and implementation of the project. A total quality management structure allows staff to receive feedback from clients, client graduates, alumni and program/community peers on the types of recovery support that would be most valuable and meaningful in the integration of peer support services throughout the program. Efforts are based on the cultural value of giving everyone the opportunity to belong, and program staff serves as a model of compassion, acceptance and community. Many clinical staff of Friendship House are graduates of the residential treatment program and serve as role models for clients to stay in treatment, “work the program”, progress from Level 1 to Level 4, mentor and lead peers, and transition to independent, drug-free contributors of their respective communities.

The project planning and implementation process is responsive to client/consumer and community needs. The project performance assessment includes input from satisfaction surveys, needs assessments and focus groups. Satisfaction surveys are conducted at regular intervals to garner feedback and specific suggestions for changes to the way services are delivered. Collected information is used to review the implementation of the core values of the organization, improve the quality of services, and to facilitate decision-making. This decision-making process addresses organizational needs as well as client and peer feedback; and includes strategic plans, client satisfaction surveys, focus groups, community interests and needs surveys, assessment tools, outcome measures and evaluation reporting.

**Data Collection, Performance Measurement and Reporting**

Oversight of program deliverables’ measurement is provided by the Friendship House Research, Evaluation and Compliance Division to ensure that program objectives were: 1) Specific – clearly
stated who/where/what; 2) Measurable – quantifiable outcomes; 3) Achievable – realistic and feasible; 4) Relevant/Results Oriented – relevant/meaningful results to the community being served; and 5) Time-bound – clearly indicated when results were to be completed (S.M.A.R.T. Criteria).

Friendship House uses a “benchmark” assessment process for determining progress related to service delivery and program achievements. The baseline performance of Friendship House services was determined through process, quality monitoring and outcomes evaluation efforts. This served as reference points for subsequent years to draw comparisons – examining similar units of analyses including data trends, client counts, demographics and outcomes. Outcome evaluation consists of GPRA indicators, which include changes in a positive direction or stability over time, and post discharge data collected through the Friendship House Alumni and Community Survey (handed out for completion at various Friendship House community celebrations). Process Evaluation is designed to track client demographics and services from their initial admission intake interview through program discharge. Data collection is based on monthly spreadsheets, indicating the number of groups and events, number of participants, and demographic data. For Quality Assurance (or Formative Evaluation), Friendship House Evaluation uses a continuous quality improvement feedback model for performance assessment purposes. Continuous Quality Improvement responsibilities include management of standard data collections, adherence to program evaluation plans, “real time” data reporting, production of reports and publications to disseminate information, and when applicable, the facilitation of action steps that contribute to program improvement based on evaluation findings.

Friendship House implements Continuous Quality Improvement (CQI) activities as part of its Total Quality Management (TQM) goals. These TQM goals are outlined in the Friendship House Performance Assessment Plan, and were developed to identify the strategies that complement and support culturally relevant programs and services in an urban, residential and substance abuse treatment setting for the target population of American Indian adults, primarily. The Friendship House Quality Assurance Committee is staffed by administrative and management employees who review the performance of all services and programs on a quarterly basis and determine the means for follow up and monitoring of corrective actions, timelines and responsibilities. Staffed by administrative/management employees, the Quality Assurance Committee has the following scope: Identify and monitor objectives for each grant and contract, monitor performance, identify new or change existing performance measures as needed, document quarterly meetings with minutes, and articulate an action plan if performance improvement is needed. Recommendations are based on reports and documents that assist in the facilitation of fact-based decision-making (annual programs evaluation report, strategic plans, funder/compliance-generated site review reports, client satisfaction surveys, and community interests and needs surveys). Quality Assurance Committee recommendations are submitted to the Friendship House CEO.

The Indian Health Services Certified Electronic Health Records (Certified EHR) and in-house Bay Area Red Road web-based databases facilitate coordination of care, intake, data collection, GPRA measures, and performance assessment. Data systems are used to track project goals, objectives, and activities. Upon intake, consent procedures are presented to participants and principles of confidentiality, privacy laws, and professional ethics are explained.