

ARE YOU IN
RECOVERY FROM
ALCOHOL OR
DRUG PROBLEMS?

Know *your* Rights



Manual for Sponsors & Trainers

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment
www.samhsa.gov

Acknowledgements

This manual was prepared under a subcontract with Abt Associates Incorporated with funding from the Substance Abuse and Mental Health Services Administration (SAMHSA) *Partners for Recovery* (PFR) Initiative. Ms. Donna M. Cotter, SAMHSA PFR Coordinator, provided leadership in its development.

Based on the expertise and experience of the Legal Action Center (LAC) in developing and facilitating *Know Your Rights* sessions under the SAMHSA PFR Initiative, this manual is intended to serve as a useful guide in planning, promoting and presenting a *Know Your Rights* training session. Much of the content of the *Know Your Rights* training session outline is drawn from the pamphlet *Are You in Recovery from Alcohol or Drug Problems? Know Your Rights*, which was also developed by LAC with support from the SAMHSA PFR Initiative.

Judy Whiting, LAC Senior Attorney, served as lead author of the manual. Sally Friedman, Legal Director, supervises *Know Your Rights* activities for LAC. Melanie Whitter, Abt Associates PFR Project Director, and Peter Gaumont, Abt Associates PFR Project Manager, edited the document with support from Suzanne Erfurth.

Table of Contents

Acknowledgements	i
Table of Contents	ii
Introduction.....	1
Overview	2
The Value of Sponsoring <i>Know Your Rights</i> Trainings.....	2
<i>Know Your Rights</i> Training Goals	3
Inform Participants About Federal and State Anti-discrimination Laws and How They Apply.....	3
Develop and Strengthen Connections in the Community.....	3
Disseminate Information.....	3
Highlight and Mainstream the Issues Faced by Persons in Treatment or Recovery	4
How to Plan a <i>Know Your Rights</i> Training.....	4
Involve Key Stakeholders in the Planning Process.....	5
Form a Planning Committee	5
Plan Your Training	6
Decide Whom to Invite and How to Reach Them.....	7
Market Your Session.....	8
How to Conduct a <i>Know Your Rights</i> Training.....	9
Think About the Audience.....	10
Select the Lead Trainer and Any Additional Speakers.....	11
Draft the Agenda.....	11
Select and Compile Handouts	12
Visit Your Venue Well in Advance of the Training.....	13
Planning for After the Session	14
Conclusion	15
Appendix A – Sample Press Release	16
Appendix B – Sample Agenda	18
Appendix C – Detailed Course Outline	22
Appendix D – Scenarios	31
Appendix E – Single State Authority (SSA) Contact List.....	34
Appendix F – Treatment Provider Association Contact List.....	41
Appendix G – Contact Information and Other Resources	46

Introduction

Knowledge is a very potent tool against discrimination. Getting the word out about the legal rights and responsibilities of people in treatment and recovery from alcohol and drug problems can be enormously helpful. It can also be helpful to potential employers, government agencies and others: Knowing the law helps people act *within* the law.

This manual is intended to serve both as a guide to planning and marketing a *Know Your Rights* training session and as a trainer's resource book. Sessions can be planned and marketed by legal aid organizations and attorneys, State and local government officials and addictions treatment providers and recovery organizations. Given the level of knowledge required to interpret Federal, State and local regulations, attorneys should facilitate *Know Your Rights* training sessions.

The United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (HHS/SAMHSA) has funded the Legal Action Center under the *Partners for Recovery* initiative to present eight regional *Know Your Rights* trainings across the country in 2006, and to provide technical assistance to invited stakeholders who wish to sponsor or facilitate sessions. This manual was developed to support the series and to serve as a resource for interested parties who were not able to attend a regional session.

Each training session covers Federal laws relevant to the rights and responsibilities of persons in treatment or recovery and applicable laws of the State hosting the session. Individuals in treatment or recovery and their families, friends and allies will be invited from the State where the regional session is being held. In addition, three key stakeholders—the addictions treatment Single State Authority (SSA), an attorney and an addictions treatment provider association representative—will be invited from each State in the region. In some instances, a recovery organization representative will be invited instead of a provider organization.

Know Your Rights training sessions cover a wide range of issues, including access to housing, employment, health care and educational opportunity. The sessions outline applicable Federal and State statutes and rules and include a review of the rights and responsibilities of persons in treatment or recovery. Vignettes are used to illustrate rights, restrictions and the application of law. Trainers allow ample time for questions and dialogue.

The primary goal of this regional series is to develop a cadre of committed individuals nationally to provide *Know Your Rights* training sessions and thereby reach some of the many individuals and groups who could not take part in the initial series, but would benefit from access to this information. Post-session technical assistance on how to design, publicize and hold a *Know Your Rights* training session will be offered to designated key stakeholders who seek to make sessions available in their States.

By sponsoring or facilitating a *Know Your Rights* training, you are taking meaningful steps to address discrimination.

Overview

This manual consists of a brief overview of the purpose of *Know Your Rights* training sessions and a step-by-step review of the planning and implementation of training sessions. It also includes post-session recommendations. It is intended for a broad audience, including Single State Authorities for substance abuse services, treatment providers, recovery organization representatives and attorneys. The appendices provide practical tools for those who would sponsor or facilitate a *Know Your Rights* training. Appendix A provides a sample press release. Appendix B provides a sample agenda, while Appendix C provides a detailed course outline for the trainer. Appendix D provides vignettes that illustrate the application of relevant laws. Appendices E and F

Who can sponsor a *Know Your Rights* training session?

- Attorneys
- State and local officials
- Treatment and recovery support provider organizations
- Associations of recovering persons
- Associations of treatment providers
- Others

Who can facilitate a *Know Your Rights* training session?

- An attorney
- Other experts in concert with an attorney

provide contact lists for SSAs and for addictions treatment provider associations. Appendix G provides contact information for the Legal Action Center and other useful resources.

The Value of Sponsoring *Know Your Rights* Trainings

Discrimination against people in treatment or in recovery from alcohol and drug problems is not just wrong, but *illegal*. Persons in treatment and recovery and their allies have both the right and the power to overcome discrimination and other legal barriers. When individuals in treatment and recovery know their legal rights and how to exercise them, they can take major steps in preventing and ending discrimination, not only for themselves, but for others as well. This knowledge can help them gain greater access to employment, housing, education, health care and government programs. Knowing the limits of those rights, too, can help people understand what is and is not permitted by law.

SAMHSA has launched *Know Your Rights* activities to foster dialogue and awareness that people with past or current alcohol or drug problems have legal rights and responsibilities. The *Know Your Rights* regional training program is a key part of this initiative.

Know Your Rights training sessions provide an effective mechanism for sharing essential knowledge about Federal and State laws that protect persons in treatment and recovery. The training has the potential not only to empower people and organizations, but also to effect change by reducing the stigma that surrounds treatment and recovery and by emphasizing that ending illegal discrimination is everyone's concern.

***Know Your Rights* Training Goals**

Inform Participants About Federal and State Anti-discrimination Laws and How They Apply

Federal and State laws protect persons in drug or alcohol treatment and recovery from discrimination. The *Know Your Rights* training highlights Federal and State human rights laws, with emphasis on the similarities and differences between these laws. Trainers also highlight Federal and State laws that protect people in specific areas of daily life, including housing, employment, access to health care and access to public benefits. Participants learn how to decide which law applies and receive practical information on how to use these laws and understand their limitations. Participants will also receive information on how to register complaints, file claims with administrative agencies and bring cases in State or Federal court.

Whom should you invite?

- **Recovering persons and their families, friends and other allies**
- **The addictions treatment Single State Authority (SSA)**
- **The addictions treatment provider association**
- **Recovery organizations**
- **Attorneys and legal aid organizations**
- **Other State and local officials**
- **State legislators**

Develop and Strengthen Connections in the Community

Planning and hosting a *Know Your Rights* training helps interested parties strengthen existing connections among the local recovery community, treatment providers and government officials, and within these individual groups. It also provides an opportunity to forge new ties. Because *Know Your Rights* sessions involve the recovery community, legal services advocates, State and local government agencies and service providers in the planning process, they engender broad-based acknowledgement that illegal discrimination against persons in alcohol or drug treatment or recovery is a serious issue. The sessions also make it clear that this discrimination can be addressed

not only by attorneys, but also by advocates, allies and persons in treatment and recovery themselves. Prospective *Know Your Rights* trainers and sponsors should develop a master list of individuals and organizations that can work together in the future. As sessions are held and new stakeholders are identified, contact lists should be expanded.

Disseminate Information

The *Know Your Rights* series of trainings is foremost an information-sharing initiative. This manual, the handouts and a video recording of a *Know Your Rights* training session will be posted on the *Partners for Recovery* and Legal Action Center websites. As sponsors and trainers begin to hold their own *Know Your Rights* sessions, they should consider in their planning how to disseminate the resources provided to them through the *Know Your Rights* training to support their individual State and community goals for reducing discrimination.

Highlight and Mainstream the Issues Faced by Persons in Treatment or Recovery

Bringing people together to discuss the illegal discrimination faced by individuals in treatment or recovery has a number of benefits. Those who have experienced discrimination first-hand will have a forum in which they can share their experiences and seek recommendations on how to proceed. These individuals will also encounter others facing similar challenges and learn that they are far from alone in their experience. Those who have not experienced such discrimination will be given tangible evidence of its effects and of the need to respond to it. All those in attendance will learn how to identify

What do you need?

- **A planning group**
- **A trainer (or trainers) conversant in the relevant Federal, State and local laws and regulations, at least one of whom is an attorney**
- **A venue suitable for hosting the session**
- **A process for inviting and registering a targeted audience**
- **Materials on relevant Federal, State and local laws and regulations**
- **A post-session strategy for working with interested stakeholders to host additional sessions**

and effectively fight discrimination. Marketing and publicizing the training session broadly and effectively will bring attention to the fact that discrimination still exists.

Publicizing and hosting a *Know Your Rights* training can help de-stigmatize treatment and recovery from alcohol and drug problems in the larger community by increasing awareness of discrimination and highlighting legal protections against it. In addition, members of the larger community who attend will have the opportunity to interact with persons in treatment and recovery and their allies.

The more that *Know Your Rights* trainings are presented, the more that people in treatment and recovery, and their friends, family and allies, will understand and overcome illegal barriers to programs, benefits and services. For this reason sponsors and trainers offering a *Know Your Rights* session may want to consider mirroring the process of the regional sessions by identifying and inviting individuals and groups who may want to provide

trainings. Sponsors and trainers should share training materials and insights and, to the extent feasible, offer technical assistance. See below for a more detailed description of recommendations and resources.

How to Plan a *Know Your Rights* Training

Planning a *Know Your Rights* training is not difficult. As noted above, it is also a good way to establish new connections and reinvigorate existing ones. Below are some practical tips on planning a successful training.

Involve Key Stakeholders in the Planning Process

Engaging the recovery community, addictions treatment provider association, SSA for addictions services and other State or local government agencies in the planning process allows for broad-based support for the training. Additionally, it provides the trainers with input from diverse perspectives and facilitates marketing of the session. While a diverse planning group is beneficial, the size of the group should remain manageable.

How does one choose the groups to work with? The key is to begin with the recovery community. Since the primary audience and constituency for the training is the recovery community, their support is essential to the success of the training. Recovery support organizations can be especially helpful in planning a successful event. It is also important to involve the SSA and the provider association in planning. They can serve as co-sponsors and can assist in planning, identifying key stakeholders, securing the site for the session, publicizing the session and all other aspects of organizing, publicizing and carrying out the training. Contact information for addictions prevention and treatment SSAs and addictions treatment provider associations and can be found in Appendices E and F.

If one is not already part of your team, you will also want to identify an attorney or legal assistance organization in your area. An attorney or organization that works with civil rights and discrimination matters would be ideal. If you do not know of such an individual or organization, contact your local or State bar association, the SSA or the provider association. They will know attorneys who practice in this area of law who might be interested in facilitating a session.

Form a Planning Committee

After identifying the people and organizations that you would like to engage in the planning of your event, contact them to see whether they will serve on the committee. Provide them with adequate information to understand the purpose of the *Know Your Rights* session (or sessions) that you intend to sponsor. You may want to compose a brief document identifying the target audience and the lead trainer (if already identified) and outlining the planning process, the content of the session, the training approach and the anticipated outcomes. Such a document could be helpful to prospective committee members as they decide whether or not to make this commitment.

See the next section, “Plan Your Training,” for a summary of the steps involved in offering a session. Your planning committee’s goals will be to provide additional content on applicable State and local statutes and rules and to tailor the training to meet the needs of your target audience. More on these topics will be covered below.

Plan Your Training

The planning group will need to make the following decisions:

- a. **WHO:** Sponsors and trainers should decide on a target audience size and identify individuals and groups to invite. While small group trainings have advantages, the planning group should consider the likely demand for the training and the number of sessions that it can realistically provide. Is this the only session that the group plans to provide this year or will it be able to offer more than one? Experience indicates that an audience of 90 to 120 people is usually optimal. However, the size and characteristics of the venue or the community where you are holding the session may require targeting a smaller group. Demand for a well-publicized session often exceeds what can be accommodated in a single session.

In addition to recovering individuals, their families and friends, recovery and treatment organizations and public officials charged with the funding and regulation of addictions treatment, other current or potential allies may express interest in a session or be persuaded to attend. These include other State and local government officials (e.g., law enforcement, corrections, child welfare), State legislators, attorneys and legal aid organizations. Representatives of these groups can serve as valuable champions of the rights of persons in treatment and recovery.

- b. **WHEN:** Choose a few possible dates for your training. Ideally, you will want to allow at least 60 days of lead time to invite individuals and plan the session. However, avoid publicizing dates that are *too* far in the future.
- c. **WHERE:** Think about where you would like to hold your training. Here are some things to consider:
 - Is the venue centrally located?
 - Is it accessible to persons with disabilities?
 - Is it available free of charge or, if not, do you have funds to cover the cost?
 - How are the acoustics?
 - How many people will the venue comfortably hold?
 - If you have an overflow crowd, is there a way to transmit a live video to another room?
 - Are you expected to bring your own audio-visual equipment, or will the equipment be available on-site?

TIP: Holding *Know Your Rights* trainings in centrally located government buildings works well. Use of the buildings is generally free and the facilities are often well equipped for trainings.

Decide Whom to Invite and How to Reach Them

A key goal of hosting *Know Your Rights* trainings is increasing awareness of legal rights and responsibilities among persons in treatment and recovery, their families, allies and advocates and the recovery community as a whole. To do this, sponsors will need to decide whom to invite and how to ensure that they get the invitation.

- a. **WHOM to invite:** When trying to decide how large an audience to expect, sponsors should return to the list of recovery community members and groups that they developed. They will want to make sure that all parts of the community are represented:
 - persons in treatment and recovery and their families, allies and advocates;
 - treatment providers;
 - attorneys; and
 - State and local government agencies that work on treatment and recovery issues.

If you are unsure that you have all the right people and groups, here are some national organizations that may be able to help you identify key stakeholders to invite: Faces and Voices of Recovery (FAVOR) (www.facesandvoicesofrecovery.org); the National Council on Alcoholism and Drug Dependence (NCADD) (www.ncadd.org); the Johnson Institute (<http://johnsoninstitute.org>); and the SAMHSA Center for Substance Abuse Treatment Recovery Community Services Program (<http://rcsp.samhsa.gov>). This is only a partial list of national resources. You will also, of course, find many local resources. In Appendices E and F, below, you will find a listing of the SSAs nationally and of provider associations. The local bar association may be helpful in locating attorneys and legal aid organizations. The bar association may also be willing to publicize the session among its members.

- b. **HOW to invite them:** There are a number of ways to handle invitations. You may elect to adopt more than one approach. However, it is advisable to register or otherwise confirm attendance. An overview of the process appears below:
 - i. **Create an invitation:** Ideally, your *Know Your Rights* training invitation will create excitement about the event while providing useful information. Save time by creating a master announcement document. It can be sent by e-mail to individuals and groups with Internet access and mailed or faxed to individuals or groups that do not have computer access.
 - ii. **Send the invitation:** It is important to make sure word gets out to your target audience—both people and groups you know and those you have not met yet. Ideally, you will want to give at least four weeks' notice

about your upcoming training, so make sure to send out invitations in a timely manner.

By e-mail: E-mailing *Know Your Rights* training invitations can save you postage. It makes sense to call groups on your list to see whether they have e-mail access and would like an electronic invitation. When you send the invitation by e-mail, ask that the recipient in turn distribute the invitation to any electronic member lists he or she may have, and to send it to anyone else the person believes might be interested.

By fax and mail: It is essential, though potentially costly, to mail copies of your *Know Your Rights* invitation to individuals, groups and organizations in your State and local recovery community, especially those without access to a computer. To save on postage, you can mail *batches* of the *Know Your Rights* invitations to individuals, groups and organizations in your local recovery community and ask them to distribute them to friends, families, allies and colleagues. If groups and organizations have fax machines, you can also simply fax a copy of your invitation and ask the group to copy and distribute. You may want to send a fax to any person or group to whom you send an e-mail, too, so that the person will have an invitation on hand.

iii. **RSVPs:** Since you want to know how many people are coming to your training, it helps to have people respond to your invitation. For this reason you should include a section for a response on your invitation, with instructions on how to get the response to you. Decide what type of response works best for your organization: Is it best to get e-mails? Faxes? Phone calls? Mail? Regardless of what you decide, it is best if you can give people a number to call if they have questions or difficulty with your instructions.

Market Your Session

Marketing your *Know Your Rights* training is an extra step to consider if you have time and energy. Marketing can be initiated before or after sending out invitations. By “marketing” we simply mean publicizing the training through the media: newspapers, radio, even television. Marketing can get the word out to people in your local recovery community who might not otherwise hear about it. Marketing your training is helpful, but *not* necessary.

- a. **Newspapers:** If you have time to do it, draft a press release to send to local newspapers a day or so before your training. A sample press release appears in Appendix A. Keep your release short and punchy, and include a quotation from a trainer or some notable person from your group. Send by e-mail or fax to local newspapers and ask that they use it to run a story about your *Know Your Rights* training.
- b. **Radio and television:** Again, if you have time, you can draft a *public service announcement* to send to local radio and television stations to be read over the air. The announcement should be simple, something that an announcer can read in 15 to 30 seconds. Here is a suggested format:

“Do you know that discrimination against people in addictions treatment or in recovery from drug or alcohol problems is not just wrong, it’s illegal? Come to a *Know Your Rights* training to learn about the legal rights and responsibilities of people in treatment and recovery. This free training is sponsored by [your group and any stakeholders], and will be held on [date/time] at [location]. Call [your group’s number] to sign up and learn more.”

How to Conduct a *Know Your Rights* Training

Once planning has been completed, individuals and groups invited and any marketing activities initiated, the focus should shift to the planning, review and testing of the session content and approach. The trainer or trainers should lead this process. It is best to begin planning the session in earnest at least three weeks before the session.

Here are the things that sponsors and trainers need to think about and do. Each will be discussed in detail:

- Think about the audience. Identify the key groups to target, their needs, and how the session can respond to them. Decide on rules for questions. Think of ways to engage the audience and make the training run smoothly.
- Select the lead trainer and any additional speakers.
- Draft the agenda, remembering time limits and factoring in time for questions.
- Select and compile handouts.
- Visit the venue well in advance of the training.

Think About the Audience

Targeting content and approach to the audience is essential. The audience will no doubt be a diverse group with different backgrounds and interests. In addition to recovering persons, it could include attorneys and appointed and elected public officials. The responsibility of the trainer is to provide as much useful information about rights and responsibilities of persons in treatment and recovery as possible within three hours, while keeping the diverse audience engaged and allowing ample time for questions and discussion. This can be challenging, particularly given that most audience members may not find the actual statutes and rules that define discrimination for legal purposes interesting. Here are some tips:

- a. **Keep the substance of the presentation *short*.** This will allow adequate time for questions from the audience. Also, it is important to stick to the basics. There is a limit to the amount of information one can present in three hours. People who want to learn more about the topics covered during the session will be able to refer to the handouts, to follow up with the trainer or to contact the individuals or organizations that you suggest.
- b. **Use *clear and simple sentences*.** Individuals learn better when they do not have to make an effort to understand the presenter. No one—not even attorneys—likes to hear legalese.
- c. **Think about *asking the audience questions throughout or at predetermined points in the presentation*.** Asking questions of audience members helps to maintain engagement throughout the session. It also helps the speaker assess the level of understanding in the audience and adjust the presentation as necessary. This kind of dialogue has proven very useful to audience members and trainers in the past. As each topic is covered, the presenter should consider asking audience members to relate instances where they have experienced the kind of discrimination currently under discussion, or where a family member or friend has encountered it.
- d. **Think about when to take *questions from the audience*.** In the opening of the session, the trainer should outline not only the session content, but also the ground rules for taking questions from the audience. Generally speaking, it is best for the trainer to take questions during most of the session, provided he or she set ground rules at the beginning of the session. The audience should know that each time the trainer begins a new section, he or she will provide basic information before taking questions, but that this will not take long. They should know that questions and discussion can occur immediately thereafter. Some questions, of course, are best deferred until a break or until after the session. These would include questions that are off-topic or whose answers would apply only to the questioner. The trainer may also need to defer questions in the interest of time and may want to communicate this

during the opening. The trainer should encourage participants to ask questions even if they are not sure whether he or she can answer them.

- e. **Engage the audience.** Ensure that the training runs smoothly. Trainers should think about ways to work with the audience to make the training run smoothly. Here are some suggestions:
 - i. Develop a brief and simple script to introduce the sponsors and trainers. Avoid creating a wall between the presenter and the audience by spending a lot of time highlighting credentials.
 - ii. Plan to identify the groups represented in the audience, thanking any co-sponsors. This will let participants know who is at the session and will give credit to those who have assisted.
 - iii. Cover venue logistics. Tell the audience how to find the restrooms and how to let the trainer know if they cannot hear or find the room too hot or too cold. Also cover rules regarding cell phones and pagers. (It is usually best that the trainer ask the audience to turn them off until breaks.)
 - iv. Announce the break schedule and inform participants about whether coffee or food will be served and, if it will not, the location of vending machines, if any.
 - v. Review the process for taking questions. Again, the trainer will probably want to allow questions at most points in the session. However, he or she should clearly communicate the ground rules before beginning so that those in attendance will understand if a question is deferred.

Select the Lead Trainer and Any Additional Speakers

Sponsors who are not attorneys will want to identify an attorney to prepare and conduct the *Know Your Rights* training. It may make sense for more than one person to give the training. Both presenters do not necessarily have to be attorneys. However, at least one should be an attorney. If more than one trainer is used, the training may run more smoothly if trainers change at the breaks rather than in the middle of the session.

Draft the Agenda

It is not necessary to create an original agenda for your *Know Your Rights* training session. A sample agenda can be found in Appendix B, below. It covers the issues that audiences have most frequently wanted to address. However, it is not set in stone. A specific target audience, for example, may wish to place greater emphasis on specific types of rights or specific forms of discrimination.

Select and Compile Handouts

This manual includes some of the handouts necessary for a session. An attorney facilitating a session will want to review the applicable Federal and State statutes, regulations and case law, and may also want to examine relevant local ordinances. He or she will also need to create brief written summaries of applicable State and local laws. Additional helpful materials are available to download at no charge from the Legal Action Center's website, www.lac.org. These include:

- *Are You . . .*, a booklet describing steps that people in treatment and recovery and people with criminal records can take to avoid job discrimination. It can be found at <http://www.lac.org/pubs/gratis/Are-you-brochure.pdf>.
- *Employment Discrimination and What to Do About It* (five separate publications covering the laws in California, Illinois, New York, Pennsylvania and Virginia). Manuals can be found at <http://www.lac.org/pubs/gratis.html>.
- *After Prison: Roadblocks to Reentry*, a 50-State guide to legal barriers facing ex-offenders. It can be found at <http://www.lac.org/lac/index.php>.

Also, Legal Action Center's National H.I.R.E Network website includes an interactive 50-State guide to employment resources for persons with criminal records. See: <http://hirenetwork.org/resource.html>.

In addition to these materials and the handouts, the trainer will prepare the following materials:

1. A brief biography for each speaker, generally not more than two short paragraphs per person.
2. A description of each sponsoring group's work. It should include information on what each organization does and whether (and how) it provides assistance or representation.
3. A list of civil rights and other pertinent laws for the State where the session will take place. The trainer should compile this list.
4. A copy of the agenda, with estimated times for breaks.
5. A list of local organizations to contact for further help. The planning committee can be very helpful in identifying the resources and providing handouts to those attending the training.
6. Copies of "real life scenarios" for use in the training along with information about the rights, laws and protections that they demonstrate. A set of scenarios demonstrating relevant Federal law can be found in Appendix D.

7. Contact information for the State Human Rights agency and a handout from that agency, if available.
8. Information about local and State recovery community connections: who, what, where, how to join.

Some further tips on handouts:

- Ensure that there are enough copies of handouts for the anticipated audience. Always make extra copies.
- Organize handouts in packets that audience members can pick up as they enter the venue.
- Consider posting the materials to a website. This is not critical, but it is another way to get word out about materials covered in the training.

Visit Your Venue Well in Advance of the Training

It is very important to visit the venue well in advance of the day of the session to learn its characteristics and quirks. Here are some questions to answer through such a visit:

- a. **Capacity:** Will the venue hold the expected audience?

If the venue is just large enough to accommodate the anticipated audience, is there a mechanism for handling an “overflow crowd”? Is there, for example, a removable partition?
- b. **Accessibility:** Does anything need to be done to make the room accessible to people with disabilities? Will a sign language interpreter be required? Whom should one contact regarding this?
- c. **Sound:** How are the acoustics? Is there anything the session sponsors or building personnel can do to make them better?
- d. **AV Equipment:** What audio-visual equipment is on hand, and what equipment will the trainer need to bring?
- e. **Security:** How will the audience access the venue? Will a security guard require a list of people who have registered for the session? If so, what can be done for people who have not registered but show up anyway?
- f. **Facilities:** Where are the restrooms? Is there a smoking area? Are there vending machines?

Identifying and resolving problems in advance, of course, is far preferable to discovering and attempting to resolve them the day of the session.

Planning for After the Session

A successful, well-planned training will create new ties (and strengthen old ties) in the local and State treatment and recovery communities. Organizations and individuals will want to work together to fight discrimination against people in treatment or in recovery from alcohol and drug addiction. How can sponsors and trainers help them do that? How can they keep the momentum going?

To develop a strong network of concerned allies, and to keep the group focused, it helps to plan in advance. Here are some steps that can be taken *before* the training that will reap benefits *after* it is over.

First, establish a mechanism for compiling accurate contact information for organizations and people who want to continue to stay in touch. One can do this by asking those who are interested in staying in contact to fill out a contact information sheet at a break or after the training. The contact form should ask if the individual provides professional services that would benefit persons in treatment or recovery. It should ask for a description of such services and how one can access them.

Second, decide in advance who among your stakeholders is willing to field questions after the training is over. Include that information in your handouts, and have your trainers mention it during the training. You do not have to be able to answer every question, but you should be able to make referrals to people and organizations that may be able to help.

After you have hosted your *Know Your Rights* training, consider these suggestions for keeping the momentum going:

Meetings: Consider organizing a meeting of people who have signed the “stay in touch” list. If possible, it helps to have a telephone conference call line available for people who cannot make it in person. Decide on a topic for the meeting. Some ideas:

1. Create a speakers’ series, with individuals drawn from members of the recovery community. Speakers can discuss anything the group thinks is important, for example, lessons learned from trying to assist someone who has been the victim of illegal discrimination, or tips for dealing with the State agency that handles discrimination claims.
2. Share information about employers that are open to hiring persons in recovery and employers that have been less willing to do so. If sponsors and trainers see a pattern of illegal discrimination by certain employers, they may want to consider working with other advocates to approach those employers, to explain the law and ask them to stop the discriminatory practices.

3. Learn about proposed State legislation that affects people in treatment and recovery, and learn what can be done to support or change it. State and local service provider associations, civil rights advocacy organizations, and other groups may have suggestions about how to accomplish this. Recovery groups and others can invite these people to address them about what can be done.

Events: Consider planning an event or conference for *National Alcohol and Drug Addiction Recovery Month*, which takes place each September. Go to www.recoverymonth.gov, or call 1-800-662-HELP for more information. You can be one of the “Voices for Recovery.”

Trainings: Plan a meeting of people and groups interested in sponsoring one or more additional *Know Your Rights* training sessions. This will permit sponsors to reach additional interested parties. It might also be helpful to think about offering special versions of the training for particular groups, for example, persons receiving treatment at a residential program. Such a session would reach individuals who will soon be looking for jobs, housing, health care and other services.

Conclusion

This manual is designed to assist a variety of stakeholders in planning, publicizing and facilitating a *Know Your Rights* training session. It should be useful for SSAs, provider associations, recovery and legal aid organizations and attorneys. The manual provides suggested rather than necessary approaches. Sponsors and trainers may wish to adjust the content or approach depending on the audience and the desired outcomes for the session. Sponsors or trainers with questions can contact the Legal Action Center. See Appendix G, below, for contact information.

Appendix A – Sample Press Release

Know Your Rights: Sample Press Release

Here is a sample press release that can be modified. The release can be sent to local newspapers before the event. Sponsors should consider calling the newspaper to see if there is interest in writing a story or news item about the training.

It is best to use simple, direct language in a press release. Sponsors who are not accustomed to issuing press releases may want to follow the standard format furnished below.

[On Organization Letterhead]

For Immediate Release

Contact: **Name** (of person who can answer questions from the press)
 Phone number

[host organization] to Host *Know Your Rights* Training:
Educating People in Recovery from Alcohol and Drug Dependence About
Their Legal Rights and Responsibilities

[host city, State, date] – Discrimination against people in treatment or in recovery from alcohol and drug dependence can be a serious barrier to getting and keeping a job, a place to live and health care benefits. On [date], [your organization] will host a comprehensive *Know Your Rights* training for people in treatment and recovery, their families, friends and allies, attorneys, government agencies and others interested in learning about this vital topic. The training will take place at [location] on [date].

“It’s illegal to discriminate against people in treatment and recovery,” said [full name and title of key person from hosting organization]. “We are hosting this training so that people in treatment and recovery can learn about their legal rights and responsibilities, and also so that word gets out to others that this kind of discrimination exists, and must stop.”

Expert trainers from [list organization(s)] will discuss Federal and State anti-discrimination laws and other applicable laws, and show how they can be used to overcome illegal barriers to housing, employment, health care, and government benefits and services.

[Host organization]’s *Know Your Rights* training is free, but registration is required. Interested individuals and organizations should contact [name] at [phone number] if they have not already registered.

The *Know Your Rights* training was made possible by the United States Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), under the *Partners for Recovery* initiative.

###

Appendix B – Sample Agenda

Know Your Rights: Sample Agenda

Here is a sample agenda for your training. Adapt it to your training and include it in your handouts.

AGENDA

Introduction (30 minutes)

- Thank sponsors and any other persons/organizations that made the training possible
- Introduce speakers
- Briefly introduce audience (names of some of the organizations in the room)
- Review agenda
- Outline ground rules and training method, including plan for taking questions
- Review goals of session
- Provide overview of topics
 - Stigma associated with treatment and recovery
 - Rights of people in treatment and recovery
 - Limits of rights
 - Responsibilities of people in treatment and recovery
 - Practical advice

Review of Laws (30 minutes)

- Overview of rights, limits of those rights and responsibilities
 - Employment
 - Housing
 - Government services and programs
 - Health care and other “public accommodations”
 - Education
- Basic anti-discrimination laws
 - Americans with Disabilities Act (ADA)
 - What it covers
 - Who it covers and does not cover

- What it does
 - Rights under the Act
 - Responsibilities under the Act
 - How to enforce the Act
- State Human Rights law or equivalent
 - What it covers
 - Who it covers and does not cover
 - What it does
 - Rights under the law
 - Responsibilities under the law
 - How the State law is different from the ADA
 - How to enforce the State law
- Rehabilitation Act of 1973 (Rehab Act)
 - What it covers
 - Who it covers and does not cover
 - What it does
 - Rights under the Act
 - Responsibilities under the Act
 - How to enforce the Act
- State equivalent, if any
 - What it covers
 - Who it covers and does not cover
 - What it does
 - Rights under the law
 - Responsibilities under the law
 - How the State law is different from the Rehab Act
 - How to enforce the State law
- Fair Housing Act (FHA)
 - What it covers
 - Who it covers and does not cover
 - What it does
 - Rights under the Act

- Responsibilities under the Act
- How to enforce the Act
- State equivalent, if any
 - What it covers
 - Who it covers and does not cover
 - What it does
 - Rights under the law
 - Responsibilities under the law
 - How the State law is different from the FHA
 - How to enforce the State law

BREAK (15 minutes)

Employment Law (20 minutes)

- General principles
- Exceptions
- Practical tips
- Medical inquiries and examinations
- Drug testing
- Medical leave
- Job training

Housing Law (20 minutes)

- Private Housing
 - Federal Fair Housing Act
 - State law
- Public Housing
 - United States Housing Act of 1937 as amended by the Quality Housing and Work Responsibility Act, Public Law 105-276
 - State law

Government Services and Programs (10 minutes)

- Overview
- Public assistance and welfare
- Student loans

- Drivers licenses

Public Accommodations (10 minutes)

Remedies (15 minutes)

- File administrative complaint
- File a lawsuit
- File with Equal Employment Opportunity Commission (EEOC)

Questions (20 minutes)

Where Do We Go From Here? Audience discussion (10 minutes)

Conclusion of training

Appendix C – Detailed Course Outline

A. Introduction (30 minutes)	
I. Basics	<ul style="list-style-type: none"> a. Thank the sponsors and individuals/organizations who made the training possible. b. Introduce the trainers and the organizations for which they work. Use the biographies you have developed and placed in the handouts. c. Briefly describe the composition of the audience, noting that participants have different backgrounds and represent different stakeholder groups (e.g., recovery community, treatment providers, government officials, legal services providers including advocates and attorneys). Note that this training is intended to provide basic, useful information and access to resources for further work. d. Quickly review the agenda, including the timing, breaks, whether food/coffee will be provided, where the restrooms are located, whether/where smoking is allowed and where vending machines, if any, can be found. Ask audience to turn off cell phones and pagers, and agree to use them only at breaks (no running out to make or answer calls during training). e. Outline training method using review of applicable laws and regulations followed by presentation and discussion of a scenario that demonstrates their application. Suggestion: Time permitting, invite participants to describe actual or potential scenarios for discussion. f. Describe plan for fielding questions. Suggestion: questions permitted throughout the training, but trainer may have to defer question in interests of time, if question is off-topic, or if answering question will not benefit the group. g. Note that packets should include an agenda for the session as well as a listing of contents. Materials should be arranged in the order that they are covered in the session, and should include copies of any PowerPoint presentations. While some materials will be referenced during the training, most should be included as references for further study.
II. Goals of Training	<p>Outline Goals of Session - Suggestion: The goals of this session are as follows.</p> <ul style="list-style-type: none"> a. Increase awareness of illegal discrimination faced by persons in treatment and recovery from alcohol and drug addiction. b. Highlight the Federal and State laws enacted to forbid this discrimination. c. Outline the rights and responsibilities of persons in treatment and recovery under these laws. d. Discuss how laws interact on a practical level and the limits of each. e. Identify ways to address illegal discrimination against persons who are in treatment for or in recovery from drug and alcohol problems.

<p>III. Overview of Topics</p>	<p>a. <i>Stigma</i> attached to people in treatment and recovery from alcohol and drug addiction and how that stigma affects a person's ability to get and in some cases keep:</p> <ul style="list-style-type: none"> i) Jobs ii) Housing iii) Government services and access to programs iv) Health care v) Educational opportunities (including student loans) <p>b. <i>Rights</i> of persons in treatment and recovery to access these essentials, and the limits of those rights—the applicable laws.</p> <p>c. <i>Responsibilities</i> that persons in treatment and recovery must accept in order to take advantage of these laws.</p> <p>d. <i>Practical advice</i> for persons in treatment and recovery and their advocates regarding the exercise of those rights—how to use the applicable laws.</p> <p>Given limited time, training will focus on explaining rights and providing advice on how to exercise them.</p>
---------------------------------------	---

B. Review of Laws (30 minutes, plus 15-minute break)	
I. Anti-discrimination Laws	<p>a. Basics about Federal and State Law</p> <ul style="list-style-type: none"> i) Which laws generally cover the field? ii) What does each cover? iii) How do they overlap if at all? iv) What are the limitations of each? v) How may they be enforced? <p>b. Federal Laws</p> <ul style="list-style-type: none"> i) Americans with Disabilities Act (ADA), 42 U.S.C. §12101 et seq. ii) Fair Housing Act (FHA), 42 U.S.C. 3601 et seq. iii) Rehabilitation Act of 1973 (Rehab Act), 29 U.S.C. §701-794. iv) Workforce Investment Act (WIA), 20 U.S.C. § 9201. v) Family and Medical Leave Act (FMLA), 29 U.S.C. § 2601 et seq. <p>c. State Laws</p> <ul style="list-style-type: none"> i) General State Laws: List State anti-discrimination/equal rights laws and constitutional provisions of general applicability. ii) Specific State Laws: List employment laws; housing laws applicable to private as well as government-assisted or government-funded housing; and health laws, including those related to access to health care facilities, Medicaid and other State health benefits and programs. <p><i>Note: Training will focus on the general laws, with reference to the specific laws where appropriate.</i></p>
II. Who Is Protected By Law?	<p>a. Federal (source—ADA):</p> <p>Individuals with a “disability,” i.e., a current physical or mental impairment that substantially limits one or more major life activities.</p> <p style="text-align: center;">OR</p> <p>Persons with a history of such an impairment.</p> <p style="text-align: center;">OR</p> <p>Persons regarded as having such an impairment.</p> <p>b. State (provide source under your State law):</p> <p>Explain State-law definition, if any, and ways that it differs from Federal definition, above.</p>

	<p>c. Both Federal and State Laws:</p> <p>Require individualized, case-by-case determination. Persons with past history of substance use problems are generally considered “disabled,” but there are no guarantees.</p>
<p>III. Who Is NOT Protected by Law?</p>	<p>a. Federal (source—ADA and decisions interpreting it):</p> <ul style="list-style-type: none"> i) Persons <i>currently</i> engaging in illegal use of drugs. ii) Persons whose use of alcohol or drugs poses a direct threat to the health or safety of others. iii) Persons whose use of alcohol or drugs does not impair a major life activity. <p>b. State (provide sources under your State law):</p> <p>Describe the categories of people who are not protected by your State laws. These may be written in the law itself, or found in court decisions interpreting the laws.</p>
<p>IV. What Is Discrimination Under Law?</p>	<p>Status vs. Conduct = general differentiating factor</p> <p>a. Discrimination is . . . treating someone differently or unfavorably because he or she is disabled, e.g.:</p> <ul style="list-style-type: none"> i) Firing someone because the person had a drug problem in the past. ii) Making someone who is in treatment or recovery submit to regular drug tests when no one else on the job has to take a drug test. iii) Refusing to rent an apartment to a person because he or she is in treatment or recovery. <p>b. Discrimination is <i>not</i> . . . acting against a person for reasons other than his or her disability, e.g.:</p> <ul style="list-style-type: none"> i) Person is not qualified/does not have the skills for a particular job. ii) Person poses a threat to the health or safety of others. iii) Person violates rules or commits a crime. . . status vs. conduct.

C. Employment Law (20 minutes)	
I. In General . . .	<p>a. Cannot deny someone a job or fire a person simply because he or she is in treatment or recovery.</p> <p>b. Must provide “reasonable accommodation.”</p> <p>c. Must keep medical information confidential.</p>
II. Which Employers Are Covered?	<p>a. Federal (ADA): Company has 15 or more employees</p> <p>b. State (applicable law): _____</p>
III. Limits	<p>a. Federal (ADA): Person must meet basic job requirements and be able to perform job duties. 42 U.S.C. 12111 (8) defines “qualified individual with a disability” as “an individual with a disability who, with or without reasonable accommodation, can perform the essential functions of the employment position that such individual holds or desires.”</p> <p>b. State (cite law): _____</p>
IV. Reasonable Accommodation	<p>a. Federal (ADA): Employer must provide when necessary to enable a person to perform job duties; cannot cause employer undue hardship—i.e., cause it to incur significant expense or change fundamental way it operates.</p> <p>b. State (cite law): _____</p> <p>Review Paula scenario here.</p>
V. Medical Inquiries and Examinations	<p>a. Federal (ADA):</p> <p><u>Before job offer . . .</u></p> <p>i) No questions about disability (current or past).</p> <p>ii) No medical examinations.</p> <p>iii) No questions about addiction or treatment (past or present).</p> <p>iv) May inquire whether applicant currently uses drugs illegally.</p> <p>v) May inquire whether applicant drinks alcohol.</p> <p>vi) May inquire whether applicant can perform job duties.</p> <p><u>After job offer . . .</u></p> <p>i) May make all of the above inquiries.</p> <p>ii) May require individual to undergo medical examination, as long as this requirement applies to every person offered a job with the company.</p> <p>iii) May condition employment on satisfactory results.</p> <p>b. State (cite law): _____</p> <p><u>Before job offer . . .</u></p> <p><u>After job offer . . .</u></p>

<p>VI. Drug Testing</p>	<p>a. Federal (ADA):</p> <ul style="list-style-type: none"> i) <i>May</i> test applicants and employees for illegal drugs. ii) <i>May</i> (but is not required to) refuse to hire if test is positive. iii) <i>May not</i> refuse to hire if test reveals presence of legal medication (e.g., methadone). iv) <i>Must</i> keep information about legal medications confidential. v) <i>May not</i> test for alcohol before job offer. <p>b. State (if different): _____</p> <p>Review Raul scenario here.</p>
<p>VII. Medical Leave</p>	<p>a. Federal (FMLA) (applies when employer has more than 50 employees and person has been employed more than 12 months)</p> <p>Up to 12 weeks unpaid leave to receive medical treatment, including for substance abuse.</p> <p>b. State (if different): _____</p>
<p>VIII. Job Training</p>	<p>a. Federal (WIA)</p> <ul style="list-style-type: none"> i) Prohibits Federally-funded job training and placement programs from discriminating against individuals with disabilities, including past or current addiction. ii) Applicant must meet eligibility requirements and not be currently using drugs illegally. <p>b. State (if any): _____</p>

D. Housing Law (20 minutes)	
I. Private Housing	<p>a. Federal (FHA) re: housing with 2 or more units (5 or more if owner-occupied)</p> <ul style="list-style-type: none"> i) Prohibits discrimination against people with disabilities in rental or sales. ii) Protects persons with current or past alcohol addiction, and past drug addiction. iii) No protection for persons who currently use drugs illegally. iv) No protection if person causes nuisance or disturbance, or interferes with others . . . <i>status vs. conduct.</i> <p>b. State (applicable law) _____</p> <p>Review Yvonne and Robert scenario here.</p>
II. Public Housing	<p>a. Federal (United States Housing Act of 1937, codified at 42 U.S.C. 1437 <i>et seq.</i> as amended by the Quality Housing and Work Responsibility Act, Pub. L. No. 105-276, 112 Stat. 1643 (1998))</p> <p><i>Requires</i> public housing authorities to exclude (for purposes of authority-operated housing or Section 8 voucher program), any:</p> <ul style="list-style-type: none"> i) Individual evicted from public housing because of drug-related criminal activity for period of 3 years following eviction. (Can lift or shorten this requirement if individual demonstrates rehabilitation.) ii) Household with member who is abusing alcohol or drugs in a way that interferes with health, safety or peaceful enjoyment of the premises by others. (Exception if the individual can demonstrate that he/she is not currently abusing, and has completed a treatment program.) <p><i>Permits</i> public housing authorities to deny applications if any member of household has been engaged in drug-related criminal activity within a “reasonable time” of the application.</p> <p>b. State (cite)</p> <ul style="list-style-type: none"> i) Exclusion from the premises? ii) Application denial? <p>Review Tommy scenario here.</p>

E. Government Services and Programs (10 minutes)	
I. Basic Rule	<p>Federal, State and local government agencies <i>cannot</i> discriminate in any of their services, programs or activities.</p> <p>These agencies <i>can</i> require participation in a treatment program as a condition for accessing their services.</p>
II. Public Assistance and Food Stamps	<p>a. Federal (Personal Responsibility and Work Opportunity Reconciliation Act of 1996, 21 U.S.C. § 862a)</p> <p>Establishes <i>lifetime ban</i> on cash assistance and food stamps for anyone convicted of a drug-related felony.</p> <p>b. State</p> <p>States <i>may opt</i> out of or modify this ban. (What did your State decide to do?)</p> <p>Review Rachel scenario here.</p>
III. Student Loans	<p>a. Federal law (the Higher Education Act of 1998, 20 U.S.C. 1091(r)(1)) requires that a student who is receiving Federal financial assistance becomes ineligible for more assistance if convicted of a drug-related offense <i>while enrolled in school</i>.</p> <p>i) Covers student loans, grants or work assistance (like work/study).</p> <p>ii) Period of ineligibility begins on date of conviction, and length varies based on the nature of the offense (generally, possession vs. sale) and number of prior such offenses (with indefinite ineligibility for persons convicted of a second drug sale offense, or a third drug possession offense).</p> <p>iii) Note that this law was amended in 2006. Previously, students were ineligible for assistance even if their drug-related convictions took place before they were enrolled in school and receiving Federal assistance.</p> <p>iv) Suspended students can shorten the ineligibility periods in certain circumstances, including successful completion of a drug rehabilitation program.</p> <p>b. States cannot opt out.</p> <p>(List any State-specific laws/rules here.)</p>
IV. Drivers' Licenses	<p>a. Federal (Federal Department of Transportation Appropriation Amendment) program offers money to States that agree to revoke or suspend the driver's license of anyone convicted of a drug offense.</p> <p>b. States can opt out but most do not.</p> <p>(Has your State opted out? Give status.)</p>

F. Public Accommodations (10 minutes)	
I. General Rules	<p>a. Federal (ADA)</p> <ul style="list-style-type: none"> i) Prohibits “public accommodations” from discriminating against persons with disabilities. ii) “Public accommodations” is defined to include private educational, health care and social service agencies and other places that offer goods and services of any kind. iii) Persons with disabilities <i>must</i> receive an equal opportunity to participate in or benefit from goods or services offered or provided by these public accommodations. iv) Persons with disabilities <i>must</i> receive these goods and services in the most integrated setting possible. <p>b. State (if any) _____</p> <p>Review Maria scenario here.</p>
G. Remedies (15 minutes)	
I. File an administrative complaint	<p>a. Federal: 180-day statute of limitations</p> <p>b. State: (provide statute of limitations for host State)</p>
II. File a lawsuit	<p>a. Federal: 3-year statute of limitations</p> <p>b. State (provide statute of limitations for host State)</p>
III. File with EEOC	Describe special requirements for filing with the Equal Employment Opportunity Commission.
H. Questions (20 minutes)	
I. Where Do We Go From Here? (10 minutes)	

Appendix D – Scenarios

Paula, who has been in recovery for three years, is a cashier at a 24-hour parking garage in the city. She attends a group counseling session for people who want support to stay in recovery. The group meets from 4:00 to 6:00 p.m. once a week. Before January 1st, the garage changed her to the afternoon shift, so she would have to work from noon to 7:00 p.m. Paula has been with this group for over a year. She is comfortable with the participants and would like to continue attending the weekly session.

- Q1:** Can Paula continue to attend her weekly group session?
- Q2:** What questions do we need to answer in order to determine whether she can?
- Q3:** Will the answer to Q1 be the same or different under Federal and State law?
- Q4:** What are Paula’s responsibilities here, and what should she do next?

Raul has been in recovery for just over a year. He is applying to work with a construction firm and the position requires him to operate heavy machinery. The job application asks, “Have you ever had a drug or alcohol problem?”

- Q1:** How should Raul answer this question?
- Q2:** The application also asks, “Do you currently use illegal drugs or drink alcohol?” Does Raul have to answer this question?
- Q3:** Raul is offered the job, but the company tells him he must pass a medical examination and a drug test before being able to start work. Is the company allowed to impose this requirement?
- Q4:** If Raul believes he has been discriminated against in violation of the law, what should he do next? What are his responsibilities?

Yvonne and Robert were recently married and are looking for an apartment in the City. Both are in recovery and attend weekly AA meetings at a local community college. They find an apartment that they love. It is affordable and close to the college where they attend their weekly meetings. They apply for the apartment and are told by the landlord that as long as their credit report checks out, the apartment is theirs. The next night, the landlord, who is taking a karate class at the community college, sees Yvonne and Robert entering the AA meeting. Two days later, the landlord calls Robert and says he has rented the apartment to someone else.

- Q1:** Can the landlord deny Yvonne and Robert the apartment?
- Q2:** What questions do we need to know answers to in order to determine whether the landlord can deny them the apartment?
- Q3:** What if instead of seeing Yvonne and Robert at the AA meeting, the landlord sees them hanging out on the corner, drinking from a brown paper bag, staggering and shouting rude things at people walking by. Could the landlord legally deny Yvonne and Robert the apartment in those circumstances?
- Q4:** If Yvonne and Robert believe they have been victims of illegal discrimination, what should they do next? What are their responsibilities in this situation?

Tommy, who is 21, is in treatment for cocaine addiction. Two years earlier, when he was 19, he was convicted for criminal drug possession and served 18 months in prison. Now that he has been released, he is trying to find affordable housing for himself, his fiancée and their two young children. He applied to the city housing authority for an apartment and was turned down because of his drug conviction.

- Q1:** Is the City's Housing Authority allowed to deny Tommy and his family an apartment?
- Q2:** What can Tommy do to try to improve his chances of getting an apartment?

Rachel has been in methadone maintenance treatment for six years. She recently lost her job and applied for public assistance to support herself and her three children while she looks for a new job. During the application process, the worker asks her if she has a drug or alcohol problem. Rachel explains that she used to, but now she is taking methadone.

- Q1:** Can the public assistance office deny Rachel's application because of her past drug problem?

- Q2:** Can it deny her application because she's taking methadone?
- Q3:** Can it deny her application if she has a felony conviction for a drug offense?
- Q4:** If Rachel relapses and begins using illegal drugs again, can the public assistance office cut off her benefits if she refuses to get treatment?
- Q5:** If Rachel believes she has been the victim of illegal discrimination, what should she do next? What are her responsibilities in this situation?

Maria is applying to a local college for training to become a nurse's aide. A few years ago, Maria had a drug problem and was arrested and convicted for selling drugs. Maria applies for financial aid to help pay her tuition and is told that she is not eligible because of her conviction.

- Q1:** Can the college deny Maria financial aid because of her conviction?
- Q2:** Can the college deny Maria admission because of her past drug problem?
- Q3:** If Maria believes she has been victim of illegal discrimination, what next steps may she take? What are her responsibilities in this situation?

Appendix E – Single State Authority (SSA) Contact List

List of Addiction Prevention & Treatment Single State Authorities

ALABAMA

J. Kent Hunt, Associate Commissioner
Substance Abuse Services
AL Department of Mental Health and Mental
Retardation
100 N. Union Street
Montgomery, AL 36130-1410
Tel: (334) 242-3961
Fax: (334) 242-0759
E-mail: kent.hunt@mh.alabama.gov

ALASKA

Cristy Willer, Director
Division of Behavioral Health
3601 C Street, Suite 378
Anchorage, AK 99503
Tel: (907) 269-3410
Fax: (907) 269-3786
E-mail: cristy_willer@health.state.ak.us

ARIZONA

Christina A. Dye, Chief
Arizona Department of Health Services/
Division of Behavioral Health Services
Bureau of Substance Abuse Treatment &
Prevention
150 North 18th Avenue, Suite 220
Phoenix, AZ 85007
Tel: (602) 364-4652
Fax: (602) 364-4763
E-mail: dyec@azdhs.gov
cc: pazl@azdhs.gov

ARKANSAS

Joe M. Hill, Director
Office of Alcohol and Drug Abuse Prevention
Division of Behavioral Health
Department of Human Services
4313 W Markham Street, 3rd Floor Admin
Little Rock, AR 72205-4023
Tel: (501) 686-9871
Fax: (501) 686-9035
E-mail: Joe.Hill@arkansas.gov
cc: denise.luckett@arkansas.gov

CALIFORNIA

Kathryn Jett, Director
Department of Alcohol & Drug Programs
1700 K Street, 5th Floor
Sacramento, CA 95814-4037
Tel: (916) 445-1943
Fax: (916) 323-5873
E-mail: kjett@adp.state.ca.us

COLORADO

Janet Wood, Director
Alcohol & Drug Abuse Division
CO Department of Human Services
4055 South Lowell Boulevard
Denver, CO 80236-3120
Tel: (303) 866-7486 (direct)
Fax: (303) 866-7481
E-mail: janet.wood@state.co.us

CONNECTICUT

Thomas A. Kirk, Jr., Ph.D., Commissioner
CT Dept. of Mental Health & Addiction Services
410 Capitol Avenue, 4th Floor, MS#14COM
P.O. Box 341431
Hartford, CT 06134
Tel: (860) 418-6700
Fax: (860) 418-6691
E-mail: thomas.kirk@po.state.ct.us

DELAWARE

Jack Kemp, Director
Alcohol and Drug Services
Division of Substance Abuse and Mental Health
Delaware Health & Social Services
1901 N. DuPont Highway, Main Bldg.
New Castle, DE 19720
Tel: (302) 255-9433, Ext. 46
Fax: (302) 255-4427 or 4428
E-mail: Jack.Kemp@state.de.us
cc: Yvonne.davis@state.de.us

DISTRICT OF COLUMBIA

Robert Johnson, Director
Substance Abuse Services Addiction Prevention
& Recovery Administration
D.C. Department of Health
825 N. Capitol Street, N.E., Room 3125
Washington, DC 20002
Tel: (202) 442-5898
Fax: (202) 442-4827
E-mail: robert.johnson1@dc.gov

FLORIDA

Stephenie Colston, Director
Substance Abuse
FL Department of Children & Families
1317 Winewood Blvd., Bldg. #6, Room 334
Tallahassee, FL 32399-0700
Tel: (850) 921-2495
Fax: (850) 487-2627
E-mail: stephenie_colston@dcf.state.fl.us
cc: lori_rogers@dcf.state.fl.us

GEORGIA

Neil Kaltenecker, Director
Office of Addictive Diseases
GA Department of Human Resources
Two Peachtree Street, NW 22nd Floor
Atlanta, GA 30303-3171
Tel: (404) 657-2275
Fax: (404) 657-1137
E-mail: [njaltenecker@dhr.state.ga.us](mailto:njkaltenecker@dhr.state.ga.us)

HAWAII

Keith Yamamoto, Division Chief
Alcohol & Drug Abuse Division
601 Kamokila Boulevard, Room 360
Kapolei, HI 96707
Tel: (808) 692-7506
Fax: (808) 692-7521
E-mail: keith.yamamoto@doh.hawaii.gov

IDAHO

Pharis Stanger, Manager
Substance Abuse Program
FACS Division, Substance Abuse Program
Department of Health and Welfare
P.O. Box 83720 - 5th Floor
Boise, ID 83720-0036
Tel: (208) 334-4944
Fax: (208) 332-7305
E-mail: stangerp@idhw.state.id.us

ILLINOIS

Theodora Binion Taylor, Director
Division of Alcoholism & Substance Abuse
IL Department of Human Services
100 W. Randolph Street, Suite 5-600
Chicago, IL 60601-3297
Tel: (312) 814-2300
Fax: (312) 814-3838
E-mail: DHSASA4@dhs.state.il.us
cc: DHSAS49@dhs.state.il.us

INDIANA

John Viernes, Jr., Deputy Director
Division of Mental Health and Addiction
IN Family & Social Services Administration
402 W. Washington Street., Room W353
Indianapolis, IN 46204-2739
Tel: (317) 232-7913 or 7845
Fax: (317) 233-3472
E-mail: jviernes@fssa.state.in.us

IOWA

Janet Zwick, Deputy Director
Division of Behavioral Health and Professional
Licensure
Iowa Department of Public Health
321 East 12th Street
Des Moines, IA 50319
Tel: (515) 281-4417
Fax: (515) 281-4535
E-mail: jzwick@idph.state.ia.us

KANSAS

Donna Doolin, LSCSW, Director
Addiction & Prevention Services
Kansas Department of Social & Rehabilitation
Services
915 SW Harrison Street - 10th Floor North
Topeka, KS 66612
Tel: (785) 291-3326
Fax: (785) 296-7275
E-mail: dxmd@srskansas.org
cc: bxk@srskansas.org

KENTUCKY

Donna J. Hillman, Director
Division of Mental Health and Substance Abuse
100 Fair Oaks Lane 4E-D
Frankfort, Kentucky 40621
Tel: (502) 564-9208
Fax: (502) 564-9335
E-mail: Donna.Hillman@ky.gov

LOUISIANA

Michael Duffy, Assistant Secretary
Department of Health & Hospitals Office for
Addictive Disorders
1201 Capitol Access Road, 4th Floor
P.O. Box 2790
Baton Rouge, LA 70821-2790
Tel: (225) 342-9532
Fax: (225) 342-3875
E-mail: mduffy@dhh.la.gov
cc: mmills@dhh.la.gov

MAINE

Kimberly Johnson, Director
Behavioral & Developmental Services
Office of Substance Abuse
AMHI Complex, Marquardt Bldg., 3rd Floor
159 State House Station
Augusta, ME 04333-0159
Tel: (207) 287-6344 or 6342
Fax: (207) 287-4334
E-mail: Kimberly.Johnson@maine.gov
cc: tom.lewis@maine.gov

MARYLAND

Peter F. Luongo, Ph.D., Director
Alcohol & Drug Abuse Administration
Spring Grove Hospital Center
55 Wade Avenue
Catonsville, MD 21228
Tel: (410) 402-8600
Fax: (410) 402-8601
E-mail: pluongo@dhhm.state.md.us
cc: alstono@dhhm.state.md.us

MASSACHUSETTS

Michael Botticelli, Assistant Commissioner
Substance Abuse Services
Massachusetts Department of Public Health
250 Washington Street
Boston, MA 02108-4619
Tel: (617) 624-5111
Fax: (617) 624-5261
E-mail: michael.botticelli@state.ma.us
cc: tonya.fernandes@state.ma.us
cynthia.chan@state.ma.us

MICHIGAN

Deborah Hollis, Administrator
Division of Community Services and Gambling
Office of Drug Control Policy
MI Department of Community Health
320 South Walnut Street
Lansing, MI 48913
Tel: (517) 241-2600
Fax: (517) 241-2611
E-mail: hollisd@michigan.gov
cc: fedewaml@michigan.gov

MINNESOTA

Donald R. Eubanks, Director
Chemical Health Division
MN Dept. of Human Services
P.O. Box 64977
St. Paul, MN 55164-0977

FedEx Mailing Address
540 Cedar Street
St. Paul, MN 55101
Tel: (651) 431-2457
Fax: (651) 431-7449
E-mail: don.eubanks@state.mn.us

MISSISSIPPI

Herbert L. Loving, Director
Division of Alcohol & Drug Abuse
Department of Mental Health
1011 Robert E. Lee Building
239 N. Lamar Street
Jackson, MS 39201
Tel: (601) 359-1288
Fax: (601) 359-6295
E-mail: herb.loving@dmh.state.ms.us
cc: Rhoda.thomas@dmh.state.ms.us

MISSOURI

Michael Couty, Director
Division of Alcohol & Drug Abuse
MO Department of Mental Health
1706 East Elm Street, P.O. Box 687
Jefferson City, MO 65102
Tel: (573) 751-9499
Fax: (573) 751-7814
E-mail: michael.couty@dmh.mo.gov
cc: heidi.dibiaso@dmh.mo.gov

MONTANA

Joan Cassidy, Bureau Chief
Addictive & Mental Disorders Division
Department of Public Health and Human
Services
P.O. Box 202905
555 Fuller
Helena, MT 59620-2905
Tel: (406) 444-6981
Fax: (406) 444-9389
E-mail: jcassidy@mt.gov

NEBRASKA

John McVay, Administrator
Office of MH, Substance Abuse and Addiction
Services
NE Health & Human Services System
P.O. Box 98925
Lincoln, NE 68509-4728
Tel: (402) 479-5583
Fax: (402) 479-5162
E-mail: john.mcvay@hhss.ne.gov

NEVADA

Maria Canfield, Bureau Chief
Bureau of Alcohol & Drug Abuse
NV Health Division
505 E. King Street, Room 500
Carson City, NV 89701-3703
Tel: (775) 684-4190
Fax: (775) 684-4185
E-mail: mcanfield@nvhd.state.nv.us

NEW HAMPSHIRE

Joseph Harding, Director
Office of Alcohol and Drug Abuse Policy
Health & Human Services
105 Pleasant Street
Concord, NH 03301
Tel: (603) 271-6100
Fax: (603) 271-6116
E-mail: jharding@dhhs.state.nh.us
cc: sullstrup@dhhs.state.nh.us

NEW JERSEY

Carolann Kane-Cavaola, Assistant
Commissioner
NJ Department of Health Services
Division of Addiction Services
P.O. Box 362, 120 S. Stockton Street
Trenton, NJ 08625-0362
Tel: (609) 292-5760 or 7385
Fax: (609) 292-3816
E-mail: carolann.kane-cavaola@dhs.state.nj.us
cc: donald.Busch@dhs.state.nj.us

NEW MEXICO

Karen Meador, Director
Behavioral Health Services Division
Department of Health
Harold Runnels Bldg., Room 3300 North
1190 St. Francis Drive
Santa Fe, NM 87505
Tel: (505) 827-2658
Fax: (505) 827-0097
E-mail: Karen.meador@doh.state.nm.us
cc: cathy.thompson@health.state.nm.us

NEW YORK

Fran Harding, Associate Commissioner
Division of Prevention and Treatment Services
NYS Office of Alcoholism & Substance Abuse
Services
1450 Western Avenue
Albany, NY 12203-3526
Tel: (518) 485-6022
Fax: (518) 485-5474
E-mail: francesharding@oasas.state.ny.us

NORTH CAROLINA

Flo Stein, Chief
Division of Mental Health, Developmental
Disabilities & Substance Abuse Services
NC Department of Health & Human Services
3007 Mail Service Center
Raleigh, NC 27699-3007
Tel: (919) 733-4670, Ext. 231
Fax: (919) 733-4556
E-mail: flo.stein@ncmail.net

NORTH DAKOTA

Don Wright, Unit Administrator
Division of Mental Health &
Substance Abuse Services
ND Department of Human Services
1237 W Divide Avenue
Suite 1C
Bismarck, ND 58501-1208
Tel: (701) 328-8924
Fax: (701) 328-8969
E-mail: sowrid@state.nd.us

OHIO

Carolyn J. Givens, Interim Director
OH Department of Alcohol & Drug Addiction
Services
Two Nationwide Plaza
280 N. High Street, 12th Floor
Columbus, OH 43215-2537
Tel: (614) 752-8359
Fax: (614) 728-4936
E-mail: givens@ada.state.oh.us
cc: dabe@ada.state.oh.us

OKLAHOMA

Terry Cline, Ph.D., Commissioner
Mental Health and Substance Abuse Services
OK Department of Mental Health
P.O. Box 53277
Oklahoma City, OK 73152-3277
Tel: (405) 522-3878
Fax: (405) 522-0637
E-mail: tccline@odmhsas.org
cc: apatterson@odmhsas.org

OREGON

Robert Nikkel, MSW, Administrator
Office of Mental Health & Addiction Services
Department of Human Services
500 Summer Street NE, E86
Salem, OR 97301-1118
Tel: (503) 945-9704
Fax: (503) 373-7327
E-mail: robert.e.nikkel@state.or.us
cc: jamie.rockwell@state.or.us

PENNSYLVANIA

Gene R. Boyle, Director
PA Department of Health
Bureau of Drug & Alcohol Programs
02 Kline Plaza, Suite B
Harrisburg, PA 17104
Tel: (717) 783-8200
Fax: (717) 787-6285
E-mail: eboyle@state.pa.us

RHODE ISLAND

Craig Stenning, Executive Director
Division of Behavioral Healthcare Services
14 Harrington Rd., Barry Hall Bldg. #52
Cranston, RI 02920-3080
Tel: (401) 462-2338
Fax: (401) 462-6636
E-mail: cstenning@mhrh.state.ri.us

SOUTH CAROLINA

W. Lee Catoe, Director
SC Dept. of Alcohol & Other Drug Abuse
Services
101 Business Park Boulevard
Columbia, SC 29203-9498
Tel: (803) 896-5551
Fax: (803) 896-5557
E-mail: leecatoe@daodas.state.sc.us
cc: lgrant@daodas.state.sc.us

SOUTH DAKOTA

Gilbert Sudbeck, Director
Division of Alcohol & Drug Abuse
Department of Human Services
Hillsview Plaza, East Hwy. #34
c/o 500 E. Capitol
Pierre, SD 57501-5090
Tel: (605) 773-3123
Fax: (605) 773-7076
E-mail: gib.sudbeck@state.sd.us

TENNESSEE

Stephanie W. Perry, M.D., Assistant
Commissioner
Bureau of Alcohol & Drug Abuse Services
TN Department of Health
26th Floor, Snodgrass Tennessee Tower
312 8th Avenue North
Nashville, TN 37247-4401
Tel: (615) 741-1921
Fax: (615) 532-2419
E-mail: Stephanie.Perry@state.tn.us
cc: pamela.sylakowski@state.tn.us

TEXAS

Dave Wanser, Ph.D., Deputy Commissioner
Behavioral and Community Health Services
Office of the Commissioner
TX Department of State Health Services
1100 W. 49th Street, M751 -Mail code #1911
Austin, TX 78756-3199
Tel: (512) 458-7376
Fax: (512) 458-7477
E-mail: dave.wanser@dshs.state.tx.us
cc: dolly.klinefelter@dshs.state.tx.us

UTAH

Mark Payne, Director
Division of Substance Abuse and Mental Health
Department of Human Services
120 North 200 West
Salt Lake City, UT 84103
Tel: (801) 538-3939
Fax: (801) 538-9892
E-mail: mpayne@utah.gov
cc: schen@utah.gov
bkelsey@utah.gov

VERMONT

Barbara Cimaglio, Deputy Commissioner
Division of Alcohol & Drug Abuse Programs
VT Department of Health
P.O. Box 70
108 Cherry Street, Suite 202
Burlington, VT 05402
Tel: (802) 651-1550
Fax: (802) 651-1573
E-mail: bcimagl@vdh.state.vt.us
cc: jjgreen@vdh.state.vt.us
sgregor@vdh.state.vt.us

VIRGINIA

Ken Batten, Director
Office of Substance Abuse Services
Department of Mental Health,
Mental Retardation & Substance Abuse
Services
P.O. Box 1797
Richmond, VA 23218
Tel: (804) 786-3906
Fax: (804) 786-4320
E-mail: Ken.Batten@co.dmhmrsas.virginia.gov
cc: lynette.bowser@co.dmhmrsas.virginia.gov

WASHINGTON

Doug Allen, Acting Director
Division of Alcohol & Substance Abuse
Department of Social and Health Services
P.O. Box 45330
Olympia, WA 98504-5330
Tel: (360) 725-3700
Fax: (360) 438-8078
E-mail: allende@dshs.wa.gov
cc: walklj@dshs.wa.gov

WEST VIRGINIA

Steve Mason, Director
Health & Human Resources
Division of Alcoholism & Drug Abuse
350 Capitol Street., Room 350
Charleston, WV 25301-3702
Tel: (304) 558-2276
Fax: (304) 558-1008
E-mail: stevemason@wvdhhr.org
cc: stephaniewarner@wvdhhr.org

WISCONSIN

John Easterday, Ph.D., Associate Administrator
Division of Disability & Elder Services
Substance Abuse and Mental Health Services
WI Department of Health and Family Services
1 West Wilson Street, Room 850
P.O. Box 7851
Madison, WI 53707-7851
Tel: (608) 267-9391
Fax: (608) 266-2576
E-mail: Eastejt@dhfs.state.wi.us
cc: vandebj@dhfs.state.wi.us

WYOMING

Steven Gilmore, Administrator
Substance Abuse Division
Wyoming Department of Health
6101 Yellowstone Road, Suite 220
Cheyenne, WY 82002
Tel: (800) 535-4006 or (307) 777-6494
Fax: (307) 777-5849
E-mail: sgilmo@state.wy.us
cc: smogar1@state.wy.us
lflynn1@state.wy.us

AMERICAN SAMOA

Dr. Uiagalelei Lealofi, Director
Department of Human & Social Services
American Samoa Government
P.O. Box 997534
Pago Pago, AS 96799
Tel: (011-684) 633-2696
Fax: (011-684) 633-7449

GUAM

J. Peter Roberto, ACSW, Director
Department of Mental Health & Substance
Abuse
790 Governor Carlos Camacho Road
Tamuning, GU 96913
Tel: (671) 647-5330 or 5303
Fax: (671) 649-6948
E-mail: proberto@mail.gov.gu
cc: reyese@mail.gov.gu

PUERTO RICO

Jose L. Galarza-Arbona, M.D., MPH,
Administrator
Mental Health & Anti-Addiction Service
Administration
P.O. Box 21414
San Juan, PR 00928-1414
Tel: (787) 764-3670
Fax: (787) 765-5888
E-mail: jgalarza@assmca.gobierno.pr
cc: shuerta@assmca.gobierno.pr

REPUBLIC OF PALAU

Hon. Sandra S. Pierantozzi, Vice President &
Minister of Health
Republic of Palau, Ministry of Health
P.O. Box 6027
Koror, Republic of Palau PW 96940
Tel: (011-680) 488-2552
Fax: (011-680) 488-1211
E-mail: vpres@palaunet.com
cc: bhd@palau-health.net

VIRGIN ISLANDS

Dr. Denese Marshall, Director
Mental Health, Alcoholism & Drug Dependency
Department of Health
3500 Richmond
Christiansted, VI 00822
Tel: (340) 774-4888, Ext. 2610 or 2602
Fax: (340) 774-4701
E-mail: denese.marshall@usvi-doh.org
cc: brent.woodward@usvi-doh.org

Appendix F – Treatment Provider Association Contact List

List of State Provider Associations' Executive Directors and Lead Contacts

(This is not a complete list of provider associations. Other associations exist for which we do not have information.)

ALASKA

Vacharee Howard, Executive Director
Substance Abuse Directors Association of
Alaska, Inc.
4111 Minnesota Drive
Anchorage, AK 99503
Tel: (907) 770-2927
Fax: (907) 258-6052
E-mail: sada@ak.net

Helyne Meshar, Executive Director
California Association of Alcohol and Drug
Program Executives, Inc.
1127 11th Street, Suite 208
Sacramento, CA 95814
Tel: (916) 329-7409
Fax: (916) 442-4616
E-mail: hmeshar@aol.com

ARIZONA

David Miller, CEO
Arizona Council of Human Service Providers
2100 N. Central Avenue Suite 225
Phoenix, AZ 85004
Tel: (602) 252-9363
Fax: (602) 252-8664
E-mail: azcouncil@qwest.net

Tom Renfree, Executive Director
County Alcohol and Drug Program
Administrator's Association of California
1414 K Street, Suite 300
Sacramento, CA 95814
Tel: (916) 441-1850
Fax: (916) 441-6178
E-mail: tom@slgs.org

ARKANSAS

David Coleman, President
Arkansas Association of Substance Abuse
Treatment Programs
c/o Health Resources of Arkansas
P.O. Box 2578
Batesville, AR 72503
Tel: (870) 793-8900
Fax: (870) 793-4258
E-mail: dcoleman@hra-health.org

COLORADO

Carmelita Muniz, Executive Director
Colorado Association of Alcohol & Drug
Service Providers, Inc.
1410 Grant St., Suite B 205
Denver, CO 80203
Tel: (303) 433-6022
Fax: (303) 433-6023
E-mail: caadsp@msn.com

CALIFORNIA

Susan Blacksher, Executive Director
California Association of Addiction Recovery
Resources
P.O. Box 214127
2921 Fulton Avenue
Sacramento, CA 95821
Tel: (916) 338-9460
Fax: (916) 338-9468
E-mail: susan@caarr.org

CONNECTICUT

Nora Duncan, Program Services Coordinator
Connecticut Association of Substance
Abuse Agencies
c/o Connecticut Association of Non-Profits
90 Brainard Rd.
Hartford, CT 06114
Tel: (860) 525-5080, Ext. 26
Fax: (860) 525-5088
E-mail: nduncan@ctnonprofits.org

DELAWARE

Doyle Dobbins, Executive Director
Delaware Association of Rehabilitation Facilities
100 West 10th Street, Suite 103
Wilmington, DE 19801
Tel: (302) 622-9177
Fax: (302) 777-5386
E-mail: ddobbins@dca.net

FLORIDA

John Daigle, Executive Director
Florida Alcohol and Drug Abuse Association
2868-1 Mahan Drive
Tallahassee, FL 32308
Tel: (850) 878-2196, Ext. 102
Fax: (850) 878-6584
E-mail: jdaigle@fadaa.org

GEORGIA

Becky Vaughn, Executive Director
Georgia Council on Substance Abuse
100 Edgewood Avenue, Suite 518
Atlanta, GA 30303
Tel: (404) 523-3440
Fax: (404) 523-3649
E-mail: becky@gasubstanceabuse.org

ILLINOIS

Joe Anna Sullivan, Director
Illinois Alcoholism & Drug Dependence
Association
937 S. 2nd Street
Springfield, IL 62704
Tel: (217) 528-7335
Fax: (217) 528-7340
E-mail: jsullivan@iadda.org

IOWA

Julie Shepard, Executive Director
Iowa Substance Abuse Program Directors'
Association
1211 Vine Street, Suite 2230
West Des Moines, IA 50265
Tel: (515) 223-6211
Fax: (515) 309-3317
E-mail: julie@isapda.org

MAINE

Ruth Blauer, Executive Director
Maine Association of Substance Abuse
Programs
8 Muliken Court
Augusta, ME 04330
Tel: (207) 621-8118
Fax: (207) 621-8362
E-mail: rblauer@masap.org

MARYLAND

Ann Ciekot, Executive Director
Maryland Addictions Directors Council
c/o Binderman & Ciekot
48 Maryland Avenue, Suite 304
Annapolis, MD 21401
Tel: (410) 207-3189 or (410) 268-0990
Fax: (410) 268-7514
E-mail: aciekot@verizon.net

MASSACHUSETTS

Constance Peters, Vice-President of Substance
Abuse
Mental Health and Substance Abuse
Corporations of Massachusetts
251 W. Central St., Suite 21
Natick, MA 01760
Tel: (508) 647-8385, Ext. 15
Fax: (508) 647-8311
E-mail: cpeters@mhsacm.org

MICHIGAN

Michael F. Reagan, President
Michigan Association of Licensed Substance
Abuse Organizations
330 Eastern Avenue, SE
Grand Rapids, MI 49503
Tel: (616) 776-0891, Ext. 103
Fax: (616) 776-9906
E-mail: mikereagan@projectrehab.org

MINNESOTA

Shannon Pfarr Thompson
Minnesota Association of Resources for
Recovery & Chemical Health
100 Westgate Dr., Suite 252
St. Paul, MN 55114
Tel: (651) 290-6277
Fax: (651) 290-2266
E-mail: davide@ewald.com

MISSOURI

Dick Dillon
Missouri Association of Alcohol & Drug Abuse
Programs
7558 York, #2E
Clayton, MO 63105
Tel: (314) 504-6672
Fax: (314) 361-3302
E-mail: ddillon@pfh.org

MONTANA

Judy Kolar, President
Montana Addiction Service Providers
P.O. Box 2122
Great Falls, MT 59403-2122
Tel: (406) 727-2512
E-mail: judy@gatewayrecovery.org

NEBRASKA

Jason Conrad, President
Nebraska Association of Behavioral Health
Organizations
Houses of Hope of Nebraska, Inc.
2015 South 16th
Lincoln, NE 68502
Tel: (402) 435-3165
Fax: (402) 435-0430
E-mail: jconrad@housesofhope.com

NEVADA

Frank Parenti, President
Nevada Alliance for Addictive Disorders
Advocacy, Prevention and Treatment Services
c/o Bridge Counseling Associates
1701 W. Charleston Boulevard, Suite 400
Las Vegas, NV 89102
Tel: (702) 474-6450
Fax: (702) 474-6463
E-mail: fjparenti@yahoo.com

NEW HAMPSHIRE

Tym Rourke, MA, President
NH AOD Service Providers Assn
c/o Makin It Happen Coalition
27 Lowell Street, Suite 502
Manchester, NH 03101
Tel: (603) 622-6116
Fax: (603) 622-7551
E-mail: tym@makinithappen.org

NEW JERSEY

Jim O'Brien, Executive Director
Addiction Treatment Providers of New Jersey
176 W. State Street, Suite 2
Trenton, NJ 08608
Tel: (877) 703-3774
Fax: (877) 703-3774
E-mail: atpnj@ureach.com

NEW YORK

John J. Coppola, Executive Director
New York State Association of Alcoholism and
Substance Abuse Providers, Inc.
1 Columbia Place
Albany, NY 12207
Tel: (518) 426-3122, Ext. 110
Fax: (518) 426-1046
E-mail: jcoppola@asapnys.org

NORTH CAROLINA

Randolph E. Cloud
North Carolina Association for Behavioral
Health Care
P.O. Box 10972
Raleigh, NC 27605
Tel: (919) 821-3008
Fax: (919) 833-5743
E-mail: randolph@recanc.com

NORTH DAKOTA

Anna M. (Andi) Johnson, LAC, Director of
Operations
ShareHouse
4227 9th Ave. SW
Fargo, ND 58103
Tel: (701) 388-7423
Fax: (701) 277-0306
E-mail: Johnsonam@cablone.net

OHIO

Pat Bridgman, Associate Director
Ohio Council of Behavioral Healthcare Providers
35 E. Gay Street, Suite 401
Columbus, OH 43215-3138
Tel: (614) 228-0747, Ext. 200
Fax: (614) 228-0740
E-mail: OCBridgman@aol.com

OKLAHOMA

H. N. "Sonny" Scott, President-Elect
Oklahoma Substance Abuse Services Alliance
Executive Director
NAIC-Center for Oklahoma Alcohol and Drug
Services, Inc.
P.O. Box 824
Norman, OK 73070
Tel: (405) 321-0022
Fax: (405) 360-4918
E-mail: sscott@naicnor.org

OREGON

Deborah Gilmour, Executive Director
Alcohol and Drug Abuse Programs Association
of Oregon
707 13th St. SE, Suite 290
Salem, OR 97301
Tel: (503) 361-3903
Fax: (503) 362-0149
E-mail: janet@adapao.org

PENNSYLVANIA

Deborah Beck, President
Drug & Alcohol Service Providers Organization
of Pennsylvania
3820 Club Drive
Harrisburg, PA 17110
Tel: (717) 652-9128
Fax: (717) 652-3857
Asst: Joelen Hoover:
Tel: (717) 657-7702
Fax: (717) 657-7784
E-mail: dasdbeck@hotmail.com

RHODE ISLAND

Neil Corkery, Executive Director
Drug and Alcohol Treatment Association of
Rhode Island
260 West Exchange Street, Suite 301
Providence, RI 02903
Tel: (401) 521-5759, Ext. 12
Fax: (401) 751-7850
E-mail: ncorkery@datafri.org

SOUTH CAROLINA

Laura L. Stuckey, Executive Director
Behavioral Health Services Association of South
Carolina
1122 Lady Street, Suite 1115
Columbia, SC 29202
Tel: (803) 252-7004
Fax: (803) 252-0589

SOUTH DAKOTA

Terry L. Dosch, Executive Director
South Dakota Council of Substance Abuse
Providers
P.O. Box 532
Pierre, SD 57501-0532
Tel: (605) 224-0123
Fax: (605) 224-0123
E-mail: tladosch@dakota2k.net

TENNESSEE

Laura Durham, Associate Director
Tennessee Association of Alcohol, Drug &
Other Addiction Services
1800 Church Street, Suite 100
Nashville, TN 37203
Tel: (615) 780-5901, Ext. 11
Fax: (615) 780-5905
E-mail: laura@taadas.org

TEXAS

Cynthia Humphrey, Executive Director
Association of Substance Abuse Programs of
Texas
169 Catalina Court
Kerrville, TX 78028
Tel: (830) 792-4541
Fax: (830) 792-4542
E-mail: chumphrey@texxa.net

UTAH

Richard J. Nance, LCSW, MSW, MSHHA,
Executive Director/CEO
Utah Behavioral Healthcare Network, Inc.
Director, Utah County Division of Human
Services
Utah County Administration Building
100 E. Center Street, Suite 3300
Provo, UT 84606
Tel: (801) 370-8430
Fax: (801) 370-8498
E-mail: ucadm.richardn@state.ut.us

VERMONT

Will Shakespeare
Vermont Association of Addiction Treatment
Programs
51 Fairview Street
Brattleboro, VT 05301
Tel: (802) 254-7500, Ext. 116
Fax: (802) 254-7501
E-mail: wshakesp@hcrs.org

VIRGINIA

Mike Fragala, President
Virginia Association of Drug and Alcohol
Programs
314 Orange Plank Road
Hampton, VA 23669
Tel: (757) 344-3970
E-mail: mfragala@cox.net

WASHINGTON

Linda Grant
Washington Association of Alcoholism and
Addictions Programs
c/o Evergreen Manner
2601 Summit Avenue
Everett, WA 98201
Tel: (425) 258-2407
E-mail: kestercm@lakesidemilam.com

WISCONSIN

Yvonne Nair-Gill, Executive Director
Wisconsin Association on Alcohol and Other
Drug Abuse, Inc.
6601 Grand Teton Plaza, Suite A
Madison, WI 53719
Tel: (608) 276-3400 or (800) 787-9979
Fax: (608) 276-3402

WYOMING

Linda Aker, President
Wyoming Association of Mental Health and
Substance Abuse Centers
c/o Southwest Counseling Service
1124 College Road
Rock Springs, WY 82901
Tel: (307) 352-6677

Appendix G – Contact Information and Other Resources

For questions regarding this manual or to obtain technical assistance related to providing a *Know Your Rights* training, contact the Legal Action Center:

The Legal Action Center
225 Varick Street
New York, NY 10014
Telephone: (212) 243-1313
Fax: (212) 675-0286
E-mail: lacinfo@lac.org

To obtain a copy of *Are You in Recovery from Alcohol or Drug Problems? Know Your Rights*, visit the website of the National Clearinghouse for Alcohol and Drug Information (NCADI) www.health.org or call 1 (800) 729-6686. This document can also be found on the *Partners for Recovery* website.

To learn more about the *Partners for Recovery* (PFR) Initiative, visit the PFR website at: www.pfr.samhsa.gov.