



NATIONAL ASSOCIATION
OF
ADDICTION TREATMENT PROVIDERS

2025 Vision Leadership

<https://bit.ly/47kSC9p>

STAGES OF CHANGE MODEL FOR DIVERSITY, EQUITY, INCLUSION & BELONGING (DEIB) BEST PRACTICES

JCOIN SPEAKER SERIES



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Hazelden Betty Ford



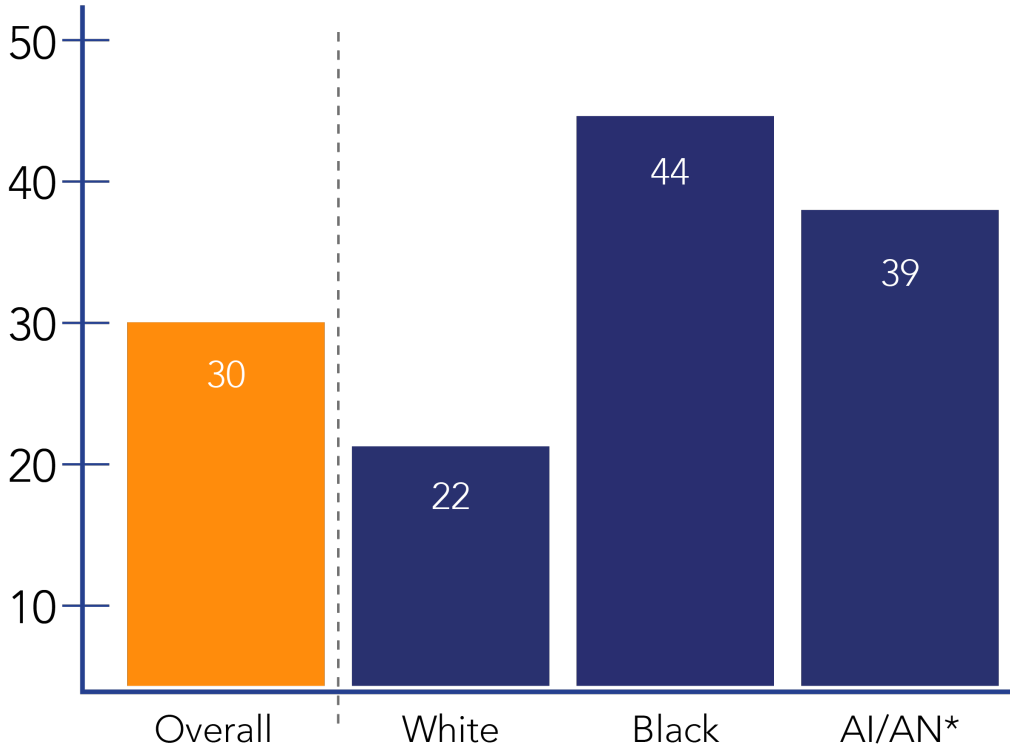
Dr. Tisha Wiley
Branch Chief,
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NAATP Diversity, Equity, and Inclusivity Committee



The Impact of Structural Racism & Discrimination on Health Outcomes

2019-2020 Percent Increase of Overdose Death



*Non-Hispanic American Indian or Alaska Native (AI/AN)

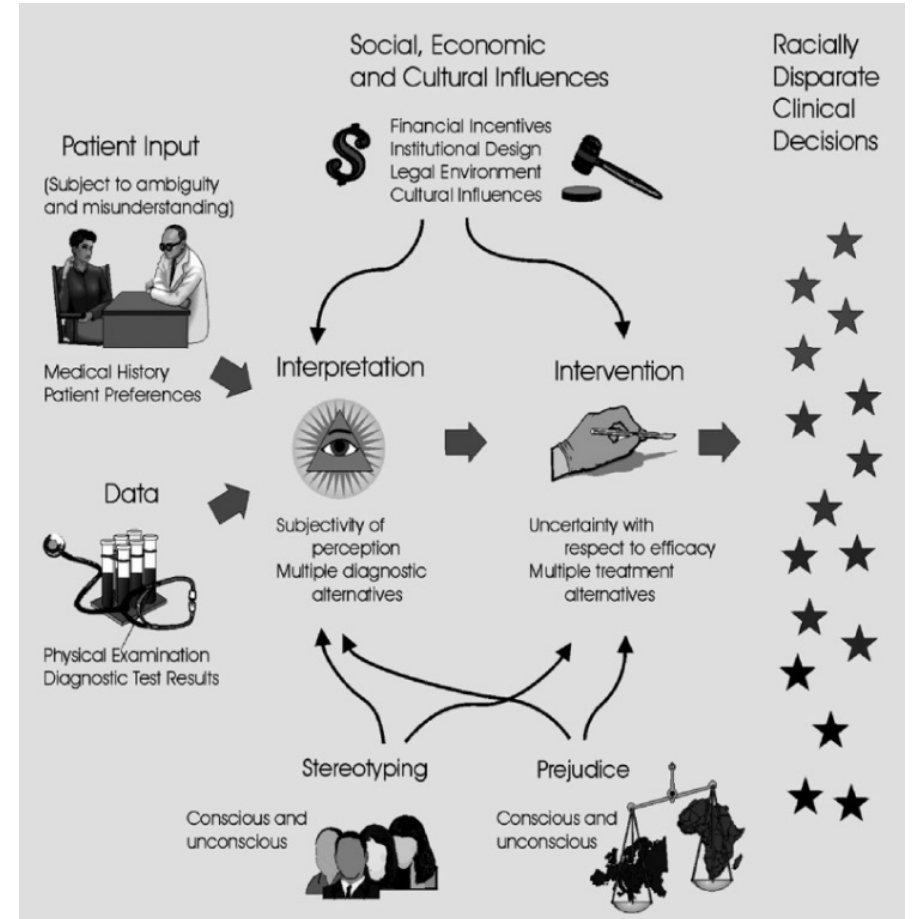


Adapted from ccrweb.ca

@sylviaduckworth

Racial Disparities in SUD & Treatment

- African Americans drink less, but have more alcohol-related problems (Zopolski et al., 2014)
- Delays in treatment entry for African Americans compared to Whites (Lewis et al., 2018)
- African Americans & Latinos less likely to complete treatment compared to Whites (Guerrero et al., 2013)
- OD death rate is up to 7x higher for Blacks and AIAN compared to Whites (Jones, 2022)

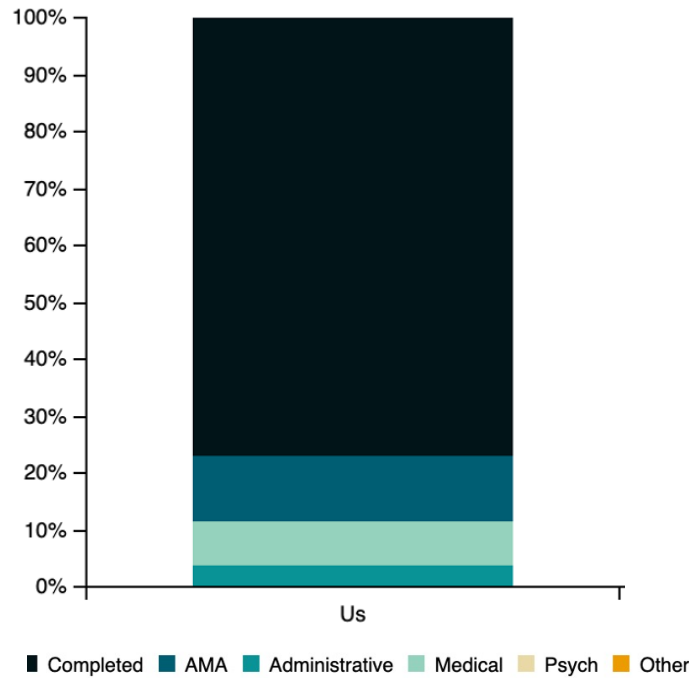


Institute of Medicine (2003)

The Importance of Stratifying Data

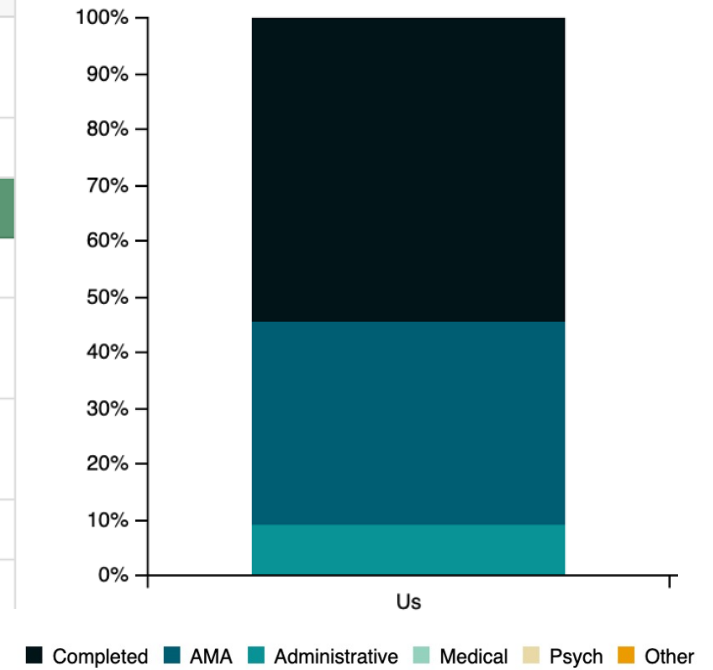
Race and Ethnicity
American Indian or Alaska Native
Asian
Black or African American
Hispanic or Latinx
Middle Eastern or North African
Native Hawaiian or Other Pacific Islander
White
Other

Discharge Type



Race and Ethnicity
American Indian or Alaska Native
Asian
Black or African American
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Middle Eastern or North African
Native Hawaiian or Other Pacific Islander
White
Other

Discharge Type



Building DEIB Recovery Capital

“Recovery Capital” = the total resources an individual has available to find and maintain recovery from addiction (FacesAndVoicesofRecovery.org)

- Can be built through personal, social, and community efforts

DEIB Recovery Capital = the internal and external resources an organization (and our society at large) has available to find and maintain recovery from systemic racism & oppression

- Can be built through personal, social, and community efforts



Best and Laudet (2010)

Image from <https://www.myrecoveryplan.ca/>

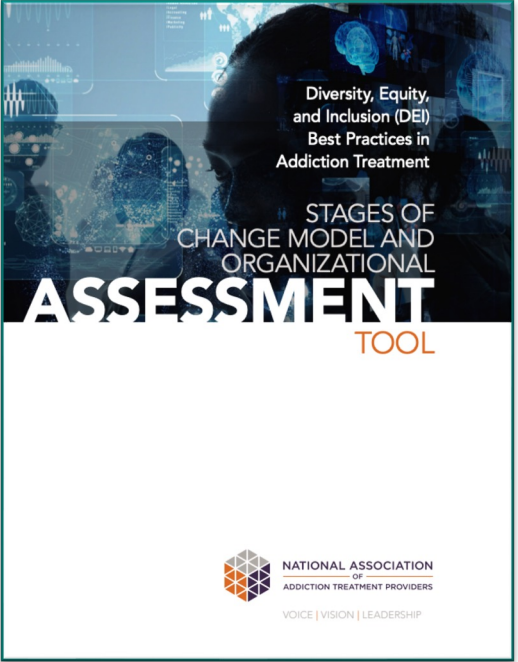
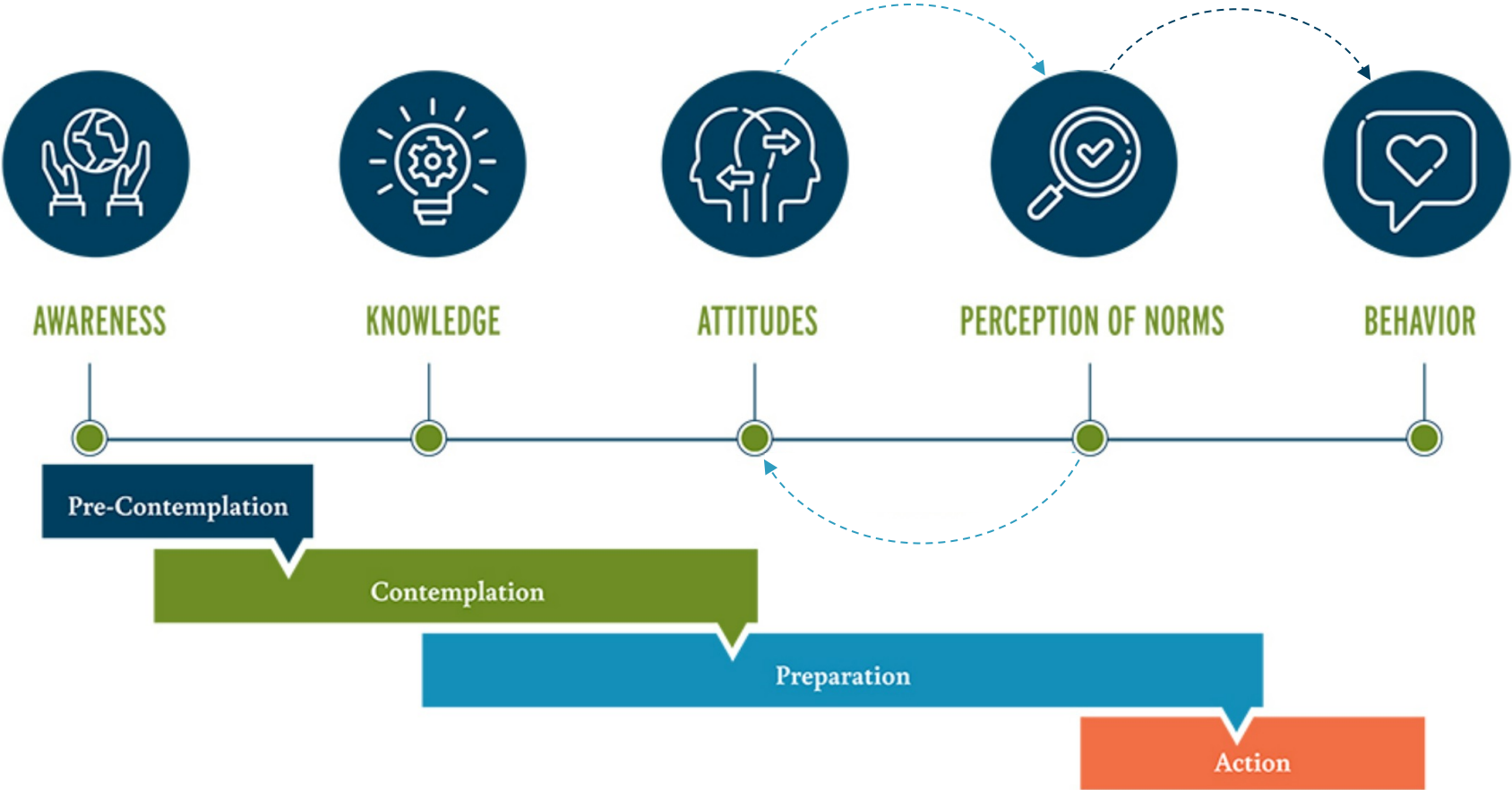
Assessing & Implementing DEIB Best Practices


Why is this needed?

- **Diversity:** increase diversity of staff, leadership, and people served
- **Equity:** eliminate racial differences in access to services and in treatment outcomes
- **Inclusion:** create inclusive, welcoming work and clinical environments
- **Individualized Care:** utilize culturally-responsive treatment methods
- **Community:** engage with diverse communities

NAATP's Stages of Change Model and Organizational Assessment Tool helps providers identify the DEIB work needed within their organization.

Stages of Change Organizational Model



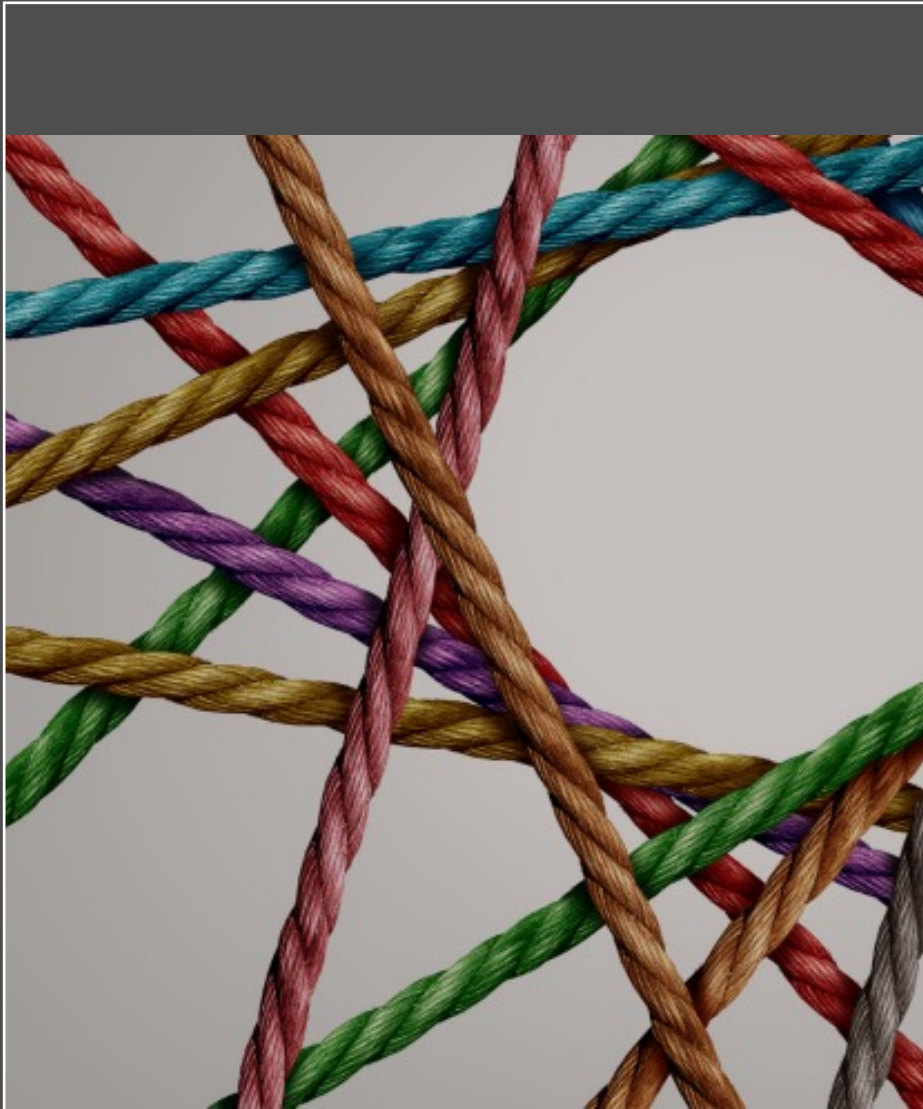


Diversity, Equity, and Inclusion (DEI)
Best Practices in Addiction Treatment

STAGES OF
CHANGE MODEL AND
ORGANIZATIONAL

ASSESSMENT

TOOL



Precontemplation

As with clients, identifying an individual or an organization as “Precontemplative” is not a value judgment. Rather, it means that the person or entity isn’t equipped with a perspective on the need for and value of change in their lives and work. In this stage, with respect to implementing DEIB best practices, individuals and organizations may lack awareness that their current practice contributes to inequities or a decreased sense of belonging by diverse staff and clients. With the intent of treating everyone equally, a colorblind approach may be evident, resulting in harm caused by microaggressions in both organizational and clinical culture, milieu, treatment materials, company policies, public relations, and business development. This harm may or may not rise to the attention of leadership and may be addressed (or not) in staff and client day-to-day activities.

GOALS: Raise doubt and concern about current beliefs and practices, increase perception of problems with the current state, and practice harm reduction strategies.

Contemplation

Some recognition exists of privilege and oppression and that current behavior is problematic. Guilt or shame may be present. Racism and other forms of discrimination may be seen as occurring only in the past or currently present against the dominant group as well. An ambivalent, compliance-oriented mindset may be present, with minimal changes made in DEIB policies and practices in response to outside pressures or regulations.

GOALS: Explore ambivalence, identify reasons for change and risks of not changing, and increase confidence in the ability to change. As awareness grows, address guilt and shame through healing practices.

PRE-CONTEMPLATION

GOALS: Raise doubt and concern about current beliefs and practices, increase perception of problems with the current state, and practice harm reduction strategies

Pre-Contemplation

Organizational DEI Commitment	Policies & Procedures	Leadership and Infrastructure	Training
Does not see DEI as relevant to its work, or does not have an interest in advancing DEI work.	Does not have any DEI-related organizational policies beyond non-discrimination policies.	Members of management or board have not taken leadership on DEI issues.	Has not done any training related to DEI, or staff completes trainings as required for compliance.

Clinical Care	Community	Diversity	Equity	Inclusivity
Treatment materials and modalities are not commonly adapted for different individuals.	Doesn't express interest in building stronger partnerships with communities facing disparities; may see it as an unrealistic or unimportant to the organization's mission.	Doesn't see diversification of leadership, board, and staff as a priority; may be paralyzed by the perceived challenges or view it as unattainable.	DEI-related metrics* are not collected or considered in programs or in operational accountability mechanisms.	No explicit effort is made to create an inclusive atmosphere for diverse staff and patients.

Inclusive Implementation Framework



Building Blocks to an Inclusive Organization



References

- Guerrero, E.G., Marsh, J.C., Duan, L., Oh, C., Perron, B., & Lee, B. (2013). Disparities in Completion of Substance Abuse Treatment Between and Within Racial and Ethnic Groups. *Health Services Research*, 48(4), 1450-67. <https://doi.org/10.1111/1475-6773.12031>
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- Zapolski, T. C. B., Pedersen, S. L., McCarthy, D. M., & Smith, G. T. (2014). Less drinking, yet more problems: Understanding African American drinking and related problems. *Psychological Bulletin*, 140(1), 188–223. <https://doi.org/10.1037/a0032113>



THE MEASURE
OF OUR
SUCCESS:

ACCELERATING DEI
AT THE
HAZELDEN BETTY FORD
FOUNDATION

Andrew Williams
National Director DEI



Hazelden Betty Ford
Foundation

A Generative DEI Vision

DEI VISION OF SUCCESS

We are a diverse, equitable, and inclusive organization that is harnessing the power of love, culture, and lived experience to be a transformative force for health equity and healing justice.

STRATEGIC GOALS

- Create a culture of inclusion
- Diversify our workforce
- Reach more diverse individuals, families, and communities
- Expand our outreach and authentic collaboration with a more diverse roster of community partners



The Measure of our Success

- Distinct **listening** sessions with BIPOC, female-identified, and LGBTQAI+ employees
- **DEI Employee Engagement Index Scores** disaggregated by location, gender, age, socioeconomic status, and race/ethnicity
- **Press Ganey Patient Assessment scores** for culturally and gender inclusive care disaggregated by race/ethnicity and gender
- Completed **St. Paul Center for Economic Inclusion's Racial Equity Dividends Index**.
 - The Index assessed 37 business practices across the categories of leadership, hiring, culture, procurement, philanthropy, public policy, and products.



The Measure of our Success

- **Spring 2022**
 - 39 senior & executive leaders completed the NAATP DEI Organizational Assessment Tool
 - 1 Board member completed the assessment tool
 - 10+ BFC senior and executive leaders completed the NAATP DEI Organizational Assessment Tool
- **Summer 2023**
 - 15 Pacific North West (Beaverton, Newberg, Bellevue) completed the NAATP DEI Organizational Assessment Tool
 - 13 NYC staff members including senior leaders, counselors, and other staff completed the NAATP DEI Organizational Assessment Tool



Where is the J in DEI?

- **NAATP Community Visions of DEIB**

- “Has strong, mutually beneficial, accountable, and equitable partnerships with diverse organizations and leaders from communities facing disparities. The organization collaborates with communities to assess community needs, and raise awareness of services in a culturally-responsive manner.”

- **Healing Justice & Reparations**

- **Turning Point partnership**

- Pro bono architectural assessment of capital improvement needs submitted with successful request for State Legislature funding: \$1 million
- Generated media coverage on public radio, local television, and local press
- Pro bono capacity building consulting
- Turning Point contracted to offer HBFF training on culturally responsive clinical care for African Americans

- **Free Virtual Native American Family Program**

- **Indigenous Recovery Initiative**

- Work Force Development initiative between Rosebud nation and HBFF Graduate School
- Mutual training and capacity building efforts
- Collaborate Research: Butler Research Center & John Hopkins Center for Indigenous Health

- **Recovery Equity Video Series**

