



Good morning, Madame Chair and Representatives of the House Committee on Human Services

Mention Ask upfront - \$1.85 million for recovery organizations and \$1 million for recovery residences.

Tell the story of how I came to work in this field after a blessed career

- a) Three-month stint
- b) Walked through the door and saw artists, poets, writers, musicians, architects, lawyers, graduate students, etc.
- c) Nine Years later I left! It was a love affair.
 - a. Because I saw beautiful people who were beaten up by their addiction
 - i. Most had experienced trauma if not before they started using alcohol or drugs certainly by the time they had stopped using.
 - ii. They were stigmatized by the general public for having an addiction (substance use disorder)
 - iii. They, like any one of us wanted to succeed and be accepted. In life, there are two things that we all need: Love and meaningful work. If we have both we are good to go. If we have one of those things we can get by. Most of our guests walk through the doors with neither of those things.
- d) The story of Amy. (Name changed to protect the anonymity of the person)
 - a. Drawing quietly away at a table. I go over and realize this is someone special. Beautiful artwork. We sat and talked and like many guests I asked her if she would be interested in volunteering for us at the front desk for a few hours a week. She said “absolutely.”
 - b. I noticed she was very pleasant to guests as they walked through the door. Over time her hours increased. At one point, a few months down the road I had a part-time operations manager position and asked her if she would be interested in taking that job. Again, she said yes and was a superstar. Part-time became full-time and by the time I left she was the Director of programming and the Recovery Coach Supervisor. Her art work graced the



covers of our annual Circle of Stars Benefit Dinner Cover program and Annual Comedy night program. And when we bought our property in Burlington, we created a space for artists to work. Amy offered many classes to new and experienced artists over the months and years.

- e) What that story tells us is that everyone's recovery is unique to themselves. Our job in a peer run recovery center is to help them find that path to recovery that is right for them.
- f) Everyday people walk through our doors that if not for our recovery organizations would likely not live much longer. They are at the end of their rope. They are met by a staff that are all in recovery and instantly they are embraced and accepted for who they are. It is an amazing miracle to watch new guests come through our doors feeling lost and shamed for their disease and over the weeks and months to see them transform into amazing people who want to give back to their family and their community. Hope lives! The richer the programming the more likely someone will find what works for them.
- g) We are not a treatment center so we refer many of our guests to the local community mental health agency to help them deal with their trauma history
- h) We refer many people to our community health center for physical and oral health issues. By the way, oral health was the third highest co-morbid issue among our guests. Anxiety and Depression the first and second most frequent co-morbid issues.
- i) Our staff not only work within the recovery organization but can now be found in the Emergency Departments around the state. By the way, 80% to 90% of the people we are called in to help support in those Emergency Departments are there because of an alcohol-related crisis. Alcohol use disorder is alive and prevalent. And it kills just like fentanyl just in a slower longer terrible process.
- j) Staff are also doing outreach in homeless shelters, and hotels. They work with police and fire departments and visit people who are incarcerated where we offer recovery coaching.
- k) 30% of our guests are on medically assisted treatment from the hub and spoke system. (Study done at the TPCCC)



- l) All that to say that the dedicated staff of these recovery organizations and recovery residences deserve a decent salary and benefits. They have neither at this moment.
- m) Many staff are not able to work more than part-time because if they work more hours, they will lose their Medicaid benefits. You want to give them a bonus for a job well done and they have to refuse it because of the income limits that they have to worry about. The best we have been able to offer to date is a health care stipend for a few full-time staff members. An anonymous donor is willing to pay the employer costs for eye & dental insurance for one year for full time employees. It will be the first time in the history of the recovery organizations that they will have a benefit of any kind system wide.

We asked our recovery organizations: What would make you whole? By that we meant your ability to pay a competitive wage with benefits and to have the proper personnel to run a dynamic non-profit organization. The “ask of \$1.85 million for recovery organizations and \$1 million for recovery residences” was their collective response. Thank you.

Gary De Carolis, Executive Director

Recovery Partners of Vermont

gary@vtrecoverynetwork.org

802-310-5255