Regulating sober living

Providing safe places for adults in recovery poses challenge for lawmakers, homeowners

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Matthew McGinn was looking for a safe place to rebuild his life. He had battled addiction for years and bounced around to a few sober living homes, but none of them seemed to help him. He had nowhere else to turn. His addiction had taken a heavy cost.

"I've lost everything," he said.

For McGinn and many others in recovery, a safe, sober environment to live while getting back on their feet from a battle with addiction is essential. But they're not always easy to find or properly regulated, putting people seeking help at risk when they're most vulnerable and leading to relapse, or, in some cases, overdose and death.

Regulating such homes, however, has posed challenges to lawmakers and homeowners, who have struggled to identify and define them.

New regulations

New Jersey legislators have taken recent steps to try to regulate sober homes, yet advocates believe the measures don't go far enough.

In January, the New Jersey Department of Community Affairs implemented a Class F license under rooming and boarding laws, allowing for "cooperative sober living residences."

"The Department's decision to create a new class under the Rooming and Boarding House Act was one part of the state's effort to address the issue of addiction," said Tammori Petty, a spokeswoman for the Department of Community Affairs. "Sober Homes, such as Class F Cooperative Sober Living Residences, are intended to operate as a residential setting that will serve as a home for individuals who are recovering from drug or alcohol addiction, and provide



Matthew McGinn, left, and Jonathan Salvato, house manager of a sober living home in Evesham, play a game of air hockey. [NANCY ROKOS / STAFF PHOTOJOURNALIST]

About the State of Emergency Series

Throughout the year, this series will identify efforts being made to save lives impacted by addiction and the opioid crisis, and identify those barriers that keep help out of reach.

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thus fall outside the department's jurisdiction."

She said the Class F residences allow the house owners and operator to have more control over things like who can reside in the house and house rules. Houses for residents in recovery that have more than 10 people are required to get a different license, due to the size, Petty said.

Not all advocates of sober living are in support of the Class F license, however.

Jennifer Hansen, co-founder of the Hansen Foundation, which operates sober living homes in Atlantic County, said the limitations put on by the state hurt her residents because of the size limit and the fact that they don't factor in procedures for how to run a sober living home properly. "They put a 10-bed limit on it," Hansen said. "We have between 12 and 14 people in all of our houses. If we were have to scale back to 10 our houses financially wouldn't work." Hansen also argued that the Class F licenses focus more on the structural aspects of homes and not the policies of the home that help keep residents on track.

"We wanted to make sure it was all done properly," Chris Smith said.

McGinn already is a tenant of the Smiths' new sober living house in Evesham – the Kenny Smith Freedom Foundation home – thanks to another foundation, the Adam O'Brien Foundation, which thought it could help him get back on track.

"(They) thought that it would be a good fit because I've lived in other sober living houses before that were overcrowded and not run properly," McGinn said. "It was kind of a God thing to be honest."

The Smiths know firsthand the potential dangers of an unregulated sober living home. Their son, Kenny, died of an overdose in 2016 when he was staying in a such a facility in Florida. "It really wasn't what we consider a sober living home," Gail Smith said. "It was really a flop house, so upon learning that we knew that we needed to do something positive to give back to other folks." The five-bedroom home that the Smiths purchased and remodeled can house up to seven men, Chris Smith said. So far, they've brought in their house manager, Jonathan Salvato, to help oversee the house and help with the interview process. "Once somebody does come in, it's just day-today operations, making sure everybody's keeping the house clean, doing their chores, doing some sort of program, staying clean, drug testing, just making sure everything's running smoothly here," Salvato said.

housing is a central component of successful long-term recovery," a May 2018 report from the National Council for Behavioral Health titled "Building Recovery: State Policy Guide for Supporting Recovery Housing" reads.

Defining a recovery house is a bit trickier than it sounds, according to the council, as they're often called recovery residences, three-quarter houses, sober living homes and alcohol/drug-free homes.

Because of this, they're also often difficult to track. Estimates from the National Alliance for Recovery Residences, which has affiliates in over 30 states, have more than 25,000 individuals in 2,500 certified recovery houses. Oxford Houses, the longest-running model for recovery housing, supported more than 18,000 beds within 2,300 homes across 43 states in 2017, but there are many houses not part of either organization that call themselves "recovery houses" or "sober living facilities."

sustaining transparency in operational and financial decisions; and having consistent and uniformly applied rules.

The state NAAR chapter has four levels of certification for sober living homes that choose to get voluntarily certified and includes different levels of houses — from level 1, a peer-run Oxford House-type model, up to level 4, run by a service provider. Each level adds steps of supervision and oversight, as well as various services and resources.

NJARR offers voluntary certifications for houses that want to be inspected both physically and procedurally as well as training for house managers, Hansen said. Ideally, those mechanisms would be put into legislation so that anyone who operates a sober home would have to go through that process, she said.

"We want to make sure people are doing things the right way," she said. "We would even share policies and procedures."

It would also give residents in the community a place to file a grievance if they felt like a home was not being run properly, she said.

"This bill would require the Department of Health, within 120 days after the bill's enactment, to approve a credentialing entity to develop and administer a voluntary certification program for recovery residences and recovery residence administrators in the State," the legislation reads.

Homes that did not meet the established standards would not be able to receive a referral from a health care and/or substance abuse treatment provider, according to the legislation.

That idea is backed nationally. The National Council for Behavioral Health's report provides sample legislation for states to adopt, that is very similar to the one proposed in Hansen's legislation.

"Recovery house owners who wish to receive state funds and referrals from licensed drug and alcohol treatment service providers will be required to become certified either through the NARR national standards, or by registering as an Oxford House," a piece of sample legislation from the report reads. There's also been national movement on sober living, including in the latest bipartisan opioid package that passed the Senate in September and signed into law by President Donald Trump this week. The legislation directs the federal Department of Health and Human Services to identify and promote best practices for running houses for people in recovery.

an environment where residents can support each other's sobriety and recovery."

The licenses call for the homes to be "a residential setting that serves solely as a home for individuals who are recovering from drug or alcohol addiction and is intended to provide an environment where the residents can support each other's sobriety and recovery." To get a license, home operators must meet the local codes for the definition of a "single-family home;" must have 10 or fewer residents living in the house; and must have one "staff member" or operator on site to oversee the functions of the house.

Previously, the two main ways a person could officially operate a sober living residence, according to the DCA, was to either apply for astandard rooming and boarding house license or open an Oxford House. Oxford Houses, which were established in 1975, utilize a democratically run model, where the residents are in charge of the house. There are eight Oxford Houses in Burlington County, according to Oxford House lists.

Petty said there are a few main differences between the Oxford House model and the intention behind the Class F policies.

"The Oxford House model places significant control in the hands of the residents, who operate as what has been judicially described as a single-housekeeping unit," Petty said. "The residents share all decision-making, establish house rules cooperatively, and decide who may move in when space becomes available. Oxford Houses do not constitute rooming or boarding houses under the Rooming and Boarding House Act and "They're basically looking at the physical structure, they're not looking at the policies and procedures," she said.

David Sheridan, president of National Alliance for Recovery Residences, said the national chapter helped Hansen with her legislation because they believe the current licensing goes a bit too far in restricting people in recovery living together. Hansen worked with legislators to introduce a bill that would, in part, regulate the standard of care in sober homes and set up a voluntary certification for operators.

"What New Jersey's done is crossed the line and is imposing requirements for anybody to be able to live together, and eventually it's going to come to tears," he said.

Sheridan argued the state should adopt a model similar to Massachusetts or Indiana, which incentivizes house owners to become certified and has established a process for neighbors to voice complaints if a certified house is not run correctly.

However, with the regulations in place, so far, the Department of Community Affairs has issued 16 Class F licenses, according to officials, and three more are nearing approval.

Gail and Chris Smith, of Mount Laurel, are in the process of applying for that new license.

Importance of sober living

For Salvato, who is also in recovery, and others, having a safe place to go after treatment is essential.

Evan Cherry takes three trains every day, each way, to get back and forth from his job in his hometown of Riverside to his recovery home in Philadelphia.

The long commute is worth it to keep him sober, he said.

"I feel like if I came back here (to Riverside) immediately then it wouldn't have worked as well as it did," he said. "And now I just love the city. I take public transportation and I love it."

For Cherry and many others in recovery, an environment like that is necessary.

"Those in the addiction field and recovery community have recognized that recovery

Changing legislation

While the Smiths are in the process of getting their Class F license, pending legislation could change the regulations slightly if it was adopted.

Assembly Bill 3607, cosponsored by Assemblymen Vincent Mazzeo and John Armato, both D-2nd of Northfield, would create a voluntary certification program, based on National Alliance for Recovery Residences standards. An independent organization, chosen and funded by the New Jersey Department of Health, would administer the certifications to make sure that the houses meet these standards.

Hansen, who helped draft the legislation and started the New Jersey chapter of NARR, said meeting the NARR standards would ensure people were opening sober homes for the right reasons and maintaining them properly.

"We really feel like it (legislation) needs to be in alignment with the NARR standards," she said.

NARR standards include maintaining an alcohol and illicit drug-free environment; providing a safe, homelike environment; providing consistent, fair practices for drug testing; taking appropriate action to stop intimidation, bullying and sexual harassment and otherwise threatening behavior of residents, staff and visitors; Sheridan said NARR has worked with HHS on this and hopes to help states implement systems to understand those best practices.

"Let's get the expertise out under a federal seal of approval and then help states understand what steps they can take to help their systems of care," he said.

For people like Salvato, a well-run sober living home that meets certain standards helps him maintain his sobriety.

"For a lot of people, they don't have anywhere to go, so going from a rehab to a sober living house, it's just a really good step to kind of just build upon your basic life skills of getting yourself together, of becoming responsible in a safe place and just taking care of responsibilities and just putting yourself in a position where you finally are able to move on and succeed out on your own," he said.

Salvato and Cherry said they wouldn't be where they are without sober homes.

"Going back to your own house is usually a bad idea," Cherry said. "I don't want to say that it sets everyone up for failure, but the majority of people who go back to where they were running and using it triggers them and sends them back into their old ways."