

## SOAR Enhances Recovery

### Empowering Local Communities

Through the dedicated work of the SAMHSA SOAR TA Center, state and local SOAR Leads, and benefits specialists, the **SOAR model has assisted over 40,311 people** with serious mental illness in receiving SSI/SSDI benefits, enabling these individuals to access stable housing, gain mental health and substance abuse treatment, and pursue their vocational goals.

#### SOAR Collaborates with Communities to Develop Customized On-Site Technical Assistance Events

SAMHSA SOAR TA Center staff deliver technical assistance in collaboration with local key stakeholders, using a grassroots approach that **empowers each locality to identify its needs** and receive individualized assistance to work towards its identified goals.

Since 2009, the SAMHSA SOAR TA Center has delivered on-site technical assistance to over 169 localities across the United States.

Using this approach, the SAMHSA SOAR TA Center has reached over 5,070 local stakeholders across the United States.

#### SOAR Develops Local Leaders through the Leadership Academy Model

From 2013 to 2018, the SAMHSA SOAR TA Center facilitated **24 regional SOAR Leadership Academies**.

Leadership Academies have provided **skills training and mentorship** for **613** SOAR Local Leads from all 50 states and Washington, DC.

These Local Leads have in turn facilitated **85 SOAR Online Course Review Sessions** with over **1,400** local participants.

#### SOAR Works with Local Communities to Develop Funding and Sustainability Plans for Long-Term Success

Communities develop **funding and sustainability plans** for SOAR assistance, in collaboration with the SAMHSA SOAR TA Center.

Each locality is offered technical assistance and **individualized support in identifying funds** that could be used for SOAR.

These efforts have resulted in **589 full-time and part-time SOAR positions** nationally.

### Scaling Federal Resources to Enhance Communities

Through its national reach and extensive network of partnerships, the SAMHSA SOAR TA Center is able to scale federal resources to fit the needs of community members. The SAMHSA SOAR TA Center tracks its impact at the local level to demonstrate the efficacy of its model.

#### The SOAR Online Course is a Standardized Training Module that is Enhanced with Individualized Feedback

Between 2014 and April 2018, over 25,000 trainees enrolled in the course and almost **5,500 people have successfully completed** the SOAR Online Course.

Experts from the SAMHSA SOAR TA Center have completed over **8,500 individual reviews** of trainees' work.

Each trainee in the SOAR Online Course receives **comprehensive, individualized feedback** from an expert in the SOAR model.

The SAMHSA SOAR TA Center shares SOAR-related news, events, and resources with over **22,600 individuals** via the SOAR listserv.

[The SOAR Online Application Tracking Tool Tracks National Outcomes to Demonstrate Local Impact](#)

A peer-reviewed evaluation using OAT data found that disability applications that used the SOAR model had a higher likelihood of approval than applications that did not.<sup>1</sup>

**28,000+** SOAR-assisted SSI/SSDI applications reported in OAT

- **3,112** users registered in OAT
- **1,527** agencies registered in OAT

[The SAMHSA SOAR TA Center Works in Collaboration with Federal and National Agencies on Efforts to End Homelessness](#)

Since 2009, the SAMHSA SOAR TA Center has held **88** partner webinars and presentations to expand the reach of SOAR.

Through extensive partnerships with the U.S. Department of Veterans Affairs (VA), the SOAR model is now VA's recommended approach for increasing access to SSI/SSDI for Veterans who have disabling conditions.

**378** VA Medical Center staff and VA grantee staff (Supportive Services for Veteran Families and Grant and Per Diem Program) have passed the SOAR Online Course.

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<sup>1</sup> Source: An Evaluation of SOAR: Implementation and Outcomes of an Effort to Improve Access to SSI and SSDI, Jacqueline F. Kauff, Elizabeth Clary, Kristin Sue Lupfer, and Pamela J. Fischer, *Psychiatric Services* 2016 67:10, 1098-1102. <https://doi.org/10.1176/appi.ps.201500247>