The Shatterproof Principles of Care for Addiction Treatment® are evidence-based practices which improve outcomes for individuals with a substance use disorder. Addiction treatment should follow best practices for other chronic diseases - it should be individualized, feedback-informed and encompass all 8 of these principles.

1. **Routine screenings in every medical setting**
   During check-ups and in the ER, from pediatric to psychiatric care—screenings for a SUD should be as common as measuring blood pressure.

2. **A personal plan for every patient**
   One size doesn’t fit all. Treatment must consider unique social, mental, biological, and environmental needs—with frequent check-ins and adjustments.

3. **Fast access to treatment**
   Addiction alters brain chemistry, making moments of motivation to seek treatment fleeting. So when an individual is ready, it is essential that they have access right away.

4. **Long-Term Disease Management**
   While inpatient treatment may be appropriate for some based on disease severity, this isn’t the best option for all. And it’s not enough for sustained success. Long-term outpatient care—similar to the management of other chronic diseases—is key to recovery.

5. **Coordinated care for every illness**
   Many people with addiction also suffer from other mental or physical disorders. Treatment for all illnesses should be coordinated and integrated into the SUD treatment plan.

6. **Behavioral health care from legitimate providers**
   Behavioral interventions help individuals manage their disease and sustain recovery—and should be offered by properly trained, accredited, and well-supervised providers.

7. **Medication for addiction treatment**
   Just like with other chronic diseases, medication is appropriate for treating some individuals. It should be destigmatized and easily accessible.

8. **Recovery support services beyond medical care**
   Practical and emotional support from family members, the community, and peer groups improves outcomes for individuals with substance use disorders.