



Building Recovery-Oriented Systems of Care for Drug Court Participants

By Pat Taylor, CEO of Faces & Voices of Recovery

Drug Courts make it possible for participants to begin a recovery journey that will hopefully last a lifetime. Their long-term recovery will benefit them, their families, and their communities. Over 23 million Americans are in recovery and each sustains his or her recovery in the communities where he or she lives and works (Rondo & Feliz, 2012). Professionals and recovery community members have been partnering to create a supportive environment that connects participants with a broader, community-based system of services and support, bridging the gap between the treatment and recovery communities.

What is Recovery?

While there is no single definition of recovery, each person who is in recovery knows what it means personally and its importance to his or her life. For policy makers, researchers, and service providers, reaching agreement on a definition of recovery has been challenging, as can be seen in the recent attempts described in Table 1. In each of the definitions and for purposes of describing the recovery journeys of Drug Court participants, recovery has some common principles:

- Recovery from alcohol and drug problems is a process of change, sometimes described as a journey.
- Recovery involves no longer using alcohol or other drugs.
- Recovery includes improved overall health, wellness, and civic engagement.

What this means for a person who has just completed treatment is the initiation of a recovery journey that will involve managing and sustaining his or her recovery for the long haul.

Recovery-Oriented Systems of Care

Recovery-oriented systems of care build on the strength and resilience of individuals, families, and communities to support responsibility for long-term recovery, health, and wellness. They create an environment of hope, connectedness, and potential. Because life keeps getting better as recovery progresses, how a person manages and plans his or her recovery often changes over time. Recovery exists on a continuum of improved health and wellness. Because it's not a linear process, recovery-oriented systems of care offer a variety of services and supports based on continual growth and improved functioning. They also

TABLE 1 Definitions of Recovery

Source	Year	Definition
Center for Substance Abuse Treatment (CSAT)	2005	Recovery from alcohol and drug problems is a process of change through which an individual achieves abstinence and improved health, wellness, and quality of life
American Society of Addiction Medicine	2005	A patient is in a “state of recovery” when he or she has reached a state of physical and psychological health such that his or her abstinence from dependency-producing drugs is complete and comfortable
Betty Ford Institute Consensus Panel	2006	A voluntarily maintained lifestyle characterized by sobriety, personal health, and citizenship
UK Drug Policy Commission	2008	The process of recovery from problematic substance use is characterized by voluntarily sustained control over substance use which maximizes health and wellbeing and participation in the rights, roles, and responsibilities of society
Scottish Government	2008	A process through which individuals are enabled to move on from their problem drug use towards a drug-free life as an active and contributing member of society.
SAMHSA	2011	Recovery from mental disorders and substance use disorders is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential

SOURCE: Recovery Research Institute, 2012

help build recovery-supportive communities that provide emphasis on the physical, social, spiritual, and cultural environments where people live their daily lives.

Public policy considerations can impede or promote the shift from a crisis-oriented, professionally directed, acute-care approach emphasizing treatment to one that is person-directed and recognizes the many pathways to health and wellness. With a greater focus on what happens *before* and *after* treatment, public policies that affect a person’s ability to get and keep his or her life on track gain more importance. Because discriminatory public policies continue in the areas

of health care, employment, education, housing, and enfranchisement of those with past criminal justice involvement, everyone who actively supports the recovery process needs to work to end discriminatory policies.

Changing how we think about and engage people with addiction is an important part of building recovery-oriented systems of care. Similar to other chronic health conditions, people with addiction should be treated with dignity and respect. Language and the words that we use to talk about people in or seeking recovery matter because it is such a stigmatized health condition. For example, terms such as *substance abuse* suggest

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that the individual is voluntarily misusing a substance. In a randomized study of mental health professionals, when a person was described as a *substance abuser* as opposed to having a *substance use disorder*, clinicians perceived them as being responsible for their condition and were more likely to agree that the person should be punished rather than treated (Kelly et al., 2010). Further, recovery-oriented and strength-based approaches avoid pathologizing a person's experience or defining them by their condition or disorder.

Each Drug Court participant has strengths in addition to the issues that brought him or her to Drug Court. One way of determining a person's strengths is by conducting a recovery capital assessment. This is a way to assess the person's internal and external strengths, supports, and resources, and to pinpoint areas that need attention, cultivation, or bolstering. Drug Court teams are uniquely positioned to change attitudes about people seeking recovery from addiction within the criminal justice system. They can engage participants with strength-based approaches, focusing on establishing trust, building relationships, reinforcing existing capabilities, and creating and locating new capabilities. When Drug Court teams elevate recovery as the expectation, their relationships with participants and with other service providers become transformed.

Making Connections in Recovery-Oriented Systems

One of the essential ingredients for sustained recovery is connection to family and community. Some Drug Courts have successfully developed linkages with the broader recovery community during the Drug Court experience, setting the stage for postgraduate participation in formal services and community supports. These activities, many of which encourage the participation of families, can help support long-term recovery following the Drug Court experience.

A notable example is the Chittenden County Drug Court in Vermont referring many participants to the Turning Point Center of Chittenden County, a peer-run recovery community center (Vermont Recovery Network, 2013). The court requires all new Drug Court participants to participate in a six-session peer-facilitated group called *Making Recovery Easier*, funded by the court administrator's office. Feedback from these groups has been positive and

participants have reported positive outcomes. The Drug Court staff reports that the groups are particularly effective in helping people connect with others in recovery, develop an understanding of the recovery process, and become willing to consider the work required to sustain their recovery. The Drug Court and recovery community center staffs have collaborated on developing programming for participants, which includes peer recovery coaching.

Peer Recovery Support Workers

Historically sponsors from mutual-aid support programs (such as 12-step groups) who offered voluntary service within communities of recovery were at one end of the spectrum while clinically focused addiction treatment specialists (certified addiction counselors, psychiatrists, psychologists, case managers, and social workers) were at the other end. However, new roles have emerged to help bridge the gap between brief professional treatment in a clinical or institutional setting and sustainable recovery in the community. These peer recovery support workers help individuals and families initiate, stabilize, and sustain recovery. They have *lived experience*, meaning they have successfully engaged in their own recovery with addiction, and are preferably alumni of Drug Courts.

The peer recovery support worker builds a relationship with the participant through identification and trust and has credibility based on mutual understanding. Part of the work of the peer recovery support worker is to help the Drug Court participant develop a recovery plan. Based on the recovery capital assessment, the recovery plan outlines the person's recovery goals. The peer recovery support worker also helps people develop action plans to achieve their goals, to articulate and visualize the kind of life they would like to have in recovery, and to develop a roadmap to get there. They connect participants to recovery-supportive resources that are instrumental to sustaining recovery (e.g., housing and employment) and serve as a liaison to formal and informal community supports, resources, and recovery-supporting activities.

Paid and volunteer peer recovery support workers go by such names as *recovery coach*, *personal recovery assistants*, or *peer support specialist* (see Table 2). They can be found in recovery community centers, jails, hospitals, child welfare systems, in traditional treatment sites, and in the community.

TABLE 2 Definition of Roles

Role	Definition
Peer or recovery coach	<ul style="list-style-type: none"> • A volunteer or paid person with personal experience going through recovery
Peer recovery specialist	<ul style="list-style-type: none"> • A guide and mentor who may have received training but not necessarily formal education
Peer support specialist	<ul style="list-style-type: none"> • A consultant with links to traditional professional services and support communities
Personal recovery assistant	<ul style="list-style-type: none"> • A consultant with links to traditional professional services and support communities
Counselor	<ul style="list-style-type: none"> • A licensed medical care professional with specialized education
Case manager	<ul style="list-style-type: none"> • A provider of traditional therapy and services
Sponsor	<ul style="list-style-type: none"> • A volunteer with personal experience going through recovery • A person who is aligned with a 12-step recovery program rather than a professional treatment provider

Recovery-Oriented Culture in Drug Courts

In the Chittenden County Drug Court, the court that requires attendance in six to twelve peer recovery coaching sessions, many participants continue to receive coaching after graduation (Vermont Recovery Network, 2013). The idea of the recovery community as a “holding area” to nurture and support recovery is not a new one, but has been formalized by the use of peer recovery support services and recovery community centers. These community-based and -driven supports reinforce recovery by creating recovery cultural norms, addressing relapse both before and when it occurs, and providing safe spaces where recovery can flourish.

Recovery community centers are providing public and visible spaces for recovery in an increasing number of communities. They engender civic engagement and leadership development. They promote advocacy and education about recovery and are a welcoming place to bring together people in recovery, family members, friends, and a host of community stakeholders.

These community-based supports and services are filling the gap between specialty treatment and mutual-aid support groups. They are part of growing network of institutions that are building recovery-oriented communities and creating a new recovery culture (see Figure 1).

In another example, the Drug Courts in Dauphin County, Pennsylvania, contract with the RASE (Recovery, Advocacy, Service, Empowerment) Project, a recovery community organization in Harrisburg, Pennsylvania, to provide weekly group sessions called *Introduction to Recovery* for participants. In Lancaster and Cumberland Counties, the organization sends volunteers in recovery from its speakers bureau to share their recovery stories. The RASE Project has also assigned a peer recovery specialist (a state-certified and reimbursable service role) to attend court sessions twice a month and provide support services to participants.

A number of recovery community organizations hire Drug Court graduates. For example, in South Carolina, a drug court participant who completed the 40-hour certified peer support specialist

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training is leading a women's peer recovery group. Many of these organizations receive referrals for recovery coaching and recovery housing. Most have informal relationships with Drug Courts. Participants may be referred to the recovery community organization or recovery community center for opportunities to socialize and volunteer. These partnerships are reconnecting Drug Court participants with their communities as is demonstrated in an example from Connecticut where two people referred by the Drug Court were awarded volunteer of the month by the Connecticut Community for Addiction Recovery (CCAR).

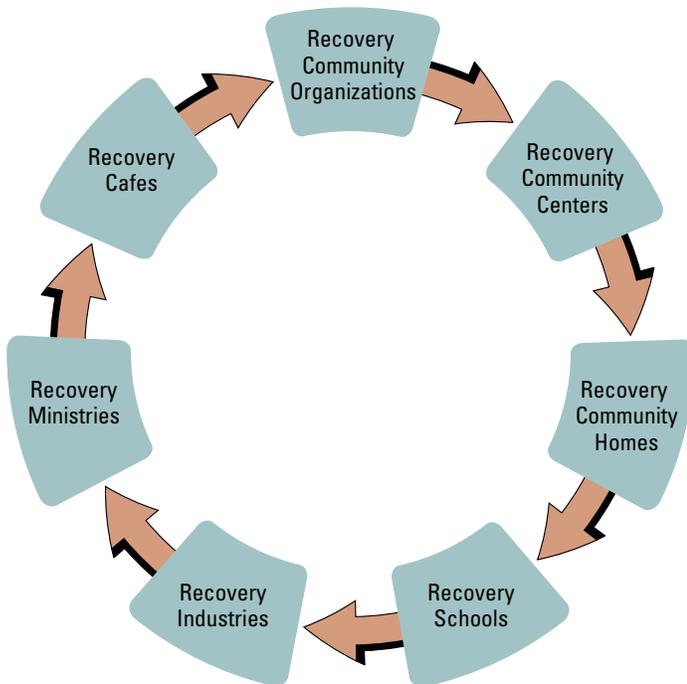
For Drug Court participants with a criminal history, the opportunity to be involved with a recovery community organization has proved vitally important. At Utah Support Advocates for Recovery Awareness (USARA) in Salt Lake

City, participants can complete their community service hours at their recovery community center. Because of their criminal histories, this center is one of the few places where they can do this. The organization's family resource facilitator helps families in the family Drug Court program in the juvenile courts. The facilitator works with parents who have a substance use problem and are involved with the Division of Child and Family Services to regain or maintain custody of their children.

In southeast Pennsylvania, PRO-ACT (Pennsylvania Recovery Organization—Achieving Community Together) works with its Drug Courts by providing a certified recovery specialist to each Drug Court participant to help assess recovery capital and develop a resource recovery plan to help participants enhance and strengthen their recovery. These specialists provide ongoing support through each level of the Drug Court process either face to face or through the use of telephonic recovery support. Family members and significant others receive a family advocate and participate in a family education program, which includes parenting classes. The parenting classes are attended by family and drug court participants together to strengthen family bonds and provide skill-building opportunities to enhance parent effectiveness. In addition, all Drug Court participants have access to Gateway to Work, an 8-session program to help individuals gain and maintain satisfying employment.

Recovery community organizations in rural communities also have relationships with Drug Courts. The Recovery Wyoming Board of Directors includes the DUI/Drug Court coordinator. Drug Court participants learn about the organization's recovery community center, peer recovery support services, and opportunities for sober social activities. In Houston, the Center for Recovery and Wellness Resources provides recovery coach services and all-recovery support groups to help participants on their recovery journey. They also transport individuals to events and services at the local recovery community center to get them plugged into the recovery community. Faces and Voices of Recovery maintains a list of recovery community organizations on its Web site (see Resources at the end of this fact sheet).

FIGURE 1 Creating Recovery-Oriented Culture



Source: White, 2009a, 2009b; White et al., 2012



Building Recovery-Oriented Systems of Care

Recovery-oriented systems of care make services and resources available for people to meet their needs. These systems build on the strengths and resilience of individuals, families, and communities to support responsibility for the person's long-term recovery, health, and wellness. Following are some key components of recovery-oriented systems of care (White, 2009a, 2009b; White et al., 2012).

The Foundation for a Recovery-Oriented System of Care

- Individuals and their families seeking help
- Effective, quality addiction prevention, treatment, and peer and other recovery support services
- An organized recovery community

Building Blocks of Recovery-Oriented Systems of Care

- Recovery residences: safe and sober peer-driven housing (e.g., Oxford House)
- Developing standards to assure quality
- Advocacy to address increasing not-in-my-backyard (NIMBY) discrimination
- Legal assistance
- Primary health care and dental care
- Employment: recovery-oriented employers and employment programs; job readiness and preparation; and opportunities to volunteer and build work histories
- Financial stability
- Transportation including driver's license
- Education: recovery GED programs; recovery high schools; collegiate recovery programs; and community colleges
- Child care
- Recovery-oriented leisure and social activities (e.g., recovery music, recovery murals, recovery social events, sports venues, and recovery walks)
- Civic engagement (e.g., working to end restrictions on voting rights for people with a criminal justice history)

Communities of Recovery

- Recovery community organizations
- Recovery community centers
- Peer recovery support services
- September Recovery Month events and rallies
- Recovery chat rooms
- Recovery apps for phones
- Mutual-aid support groups (e.g., AA, NA, MA, CA, Smart Recovery)
- Recovery-oriented employers
- Treatment and Drug Court alumni and graduate associations
- Recovery high schools and collegiate recovery communities
- Recovery media and entertainment
- The FIX, Radio Recovery, recovery cruises
- Recovery professional organizations
- Recovery ministries

Drug Courts can take the first steps toward building recovery-oriented systems of care for participants by bringing in people in recovery to programs, offering hope, and inviting participants to build their own recovery journeys. They can help organize and encourage participants to be a part of community-based recovery celebrations throughout the year and during September's National Recovery Month observances. The Recovery Self-Assessment Tool below is a comprehensive list of practical steps that Drug Courts can take to assess and address their readiness to bridge the gap between the treatment and recovery communities.

Recovery-Oriented Drug Courts: A Self-Assessment Tool

Use this tool to think about the ways that your program is building bridges to the recovery community and providing opportunities for individuals to achieve and sustain their recovery from addiction. A recovery orientation will increase your ability to be successful in getting individuals the support they need while they are in your program and as they transition into the community.

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CHECK LIST

LEADERSHIP

- We incorporate a vision of long-term recovery for participants and their families in the Drug Court's mission.
- Our advisory board includes Drug Court graduates who are in long-term recovery and representatives of the recovery community.
- Our staff members and volunteers include people in long-term recovery and their family.
- Our staff members are involved in activities that address the social stigma and other forms of discrimination faced by people in recovery who have criminal records.
- Our staff members receive ongoing specific training on addiction and recovery policies and practices, including updates on research, support services, community organizations, and resources, and attend open 12-step meetings.
- Our staff members are required to be familiar and experienced with a variety of mutual-aid support groups (e.g., 12-step programs, Smart Recovery, Double Trouble).
- We encourage opportunities to share stories of long-term recovery.

FAMILY AND SUPPORTER INVOLVEMENT

- We provide an information packet about Drug Court and resources for help.
- When the participant agrees, we involve family in the development of the recovery plan.
- We provide added incentives for individuals who attend family counseling.
- We encourage family members to participate in recovery community organizations, recovery community center activities, family mutual-aid groups, and other supports.
- When the participant agrees, we encourage family to attend Drug Court sessions and participate in meetings, barbecues, outings, and other sober social events.
- When the participant agrees, we involve family in progress sessions that are scheduled before graduation.

SERVICE PHILOSOPHY

- We educate all participants, family members, and supporters about the recovery community.
- We embrace the importance of self-determination and choice in planning a program for long-term recovery, which includes goal development, a menu of supports and services, and desired outcomes.
- We require each participant to develop a recovery plan before entering the final phase of Drug Court.
- We embrace the importance of matching and understanding individual participants' characteristics with the methods and services that will best help them achieve and sustain their recovery.

COMMUNITY LINKAGES

- We offer a volunteer program that includes people in long-term recovery.
- We have an alumni program that includes participants and their families.
- We provide and maintain a comprehensive listing of diverse mutual-aid supports.
- We provide and maintain linkages with secular and faith-based recovery support resources.
- We offer and support alcohol- and drug-free social activities.
- We provide and maintain linkages to safe, sober, and structured housing opportunities.
- We provide and maintain linkages to recovery friendly jobs, employers, and training.
- We include recovery-oriented questions in the exit questionnaire and all program evaluation for graduates.
- We monitor and assess the percentage of participants who are linked to the recovery community prior to graduation.

Resources

Faces & Voices of Recovery

www.facesandvoicesofrecovery.org

National Alliance of Recovery Residences

narronline.org

Oxford House

www.oxfordhouse.org

Recovery Research Institute

www.recoveryanswers.org

Substance Abuse and Mental Health Services Administration (SAMHSA)

- Recovery Support
samhsa.gov/recovery/
- Bringing Recovery Support Services to Scale Technical Assistance Center
beta.samhsa.gov/brss-tacs
- Recovery to Practice
www.samhsa.gov/recoverytoPractice/index.aspx
- Recovery Month—recoverymonth.gov

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