



Policy and Procedures Development Resource Guide

Topic: Recovery Planning

Date: January, 2019

Recovery planning is often a critical step in launching and sustaining an individual's recovery journey. Recovery plans are highly individualized, organic and evolve over time and recovery planning is a conscious process of identifying challenges, setting goals, taking actions, marshalling resources and setting timeframes for meeting these challenges across all life domains. An organization's policies and procedures on recovery plans and planning should be designed to reflect the dynamics of the recovery process.

This guide has been developed to provide organizations with additional information on key recovery concepts that can inform the development of strong policies and procedures regarding recovery planning and recovery plans within a residence. Key concepts noted in this guide include:

- ⇨ Definition of Recovery and Four Major Dimensions of a Life in Recovery (SAMHSA)
- ⇨ SAMHSA Guiding Principles of Recovery
- ⇨ Readiness for/Stages of Change
- ⇨ Dimensions of Health
- ⇨ Recovery Capital
- ⇨ Recovery Stages and Tasks
- ⇨ Social supports within Recovery Residences

With national, federal, state and local commitment to supporting recovery across and within communities, research and experience continues to shape our knowledge and understanding of what recovery is and looks like. Organizations are encouraged to use this guide as an initial starting point to increase own knowledge and skills to best support lives in recovery within their programs and communities.

DEFINITION OF RECOVERY/ DIMENSIONS OF RECOVERY

The United States Department of Health and Human Services- Substance Abuse and Mental Health Services Administration (SAMHSA), has established a working definition of recovery that *defines recovery as a process of change through which individuals improve their health and wellness, live self-directed lives, and strive to reach their full potential.* Recovery is built on access to evidence-based clinical treatment and recovery support services for all populations. (*emphasis added*)

SAMHSA has delineated four major dimensions that support a life in recovery:

- **Health**—overcoming or managing one's disease(s) or symptoms—for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem—

and, for everyone in recovery, making informed, healthy choices that support physical and emotional well-being

- **Home**—having a stable and safe place to live
- **Purpose**—conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society
- **Community**—having relationships and social networks that provide support, friendship, love, and hope

(www.samhsa.gov/recovery)

SAMHSA'S GUIDING PRINCIPLES OF RECOVERY

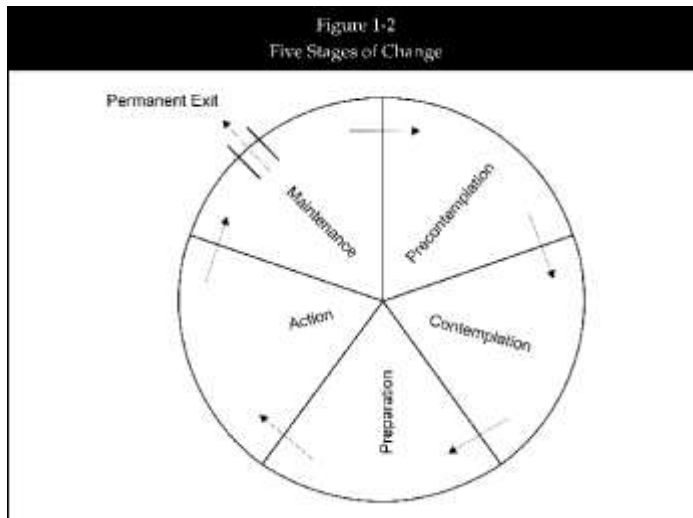
Recovery:

- emerges from hope
- is person-driven
- occurs via many pathways
- is holistic
- is supported by peers and allies
- is supported through relationship and social networks
- is culturally based and influenced
- is supported by addressing trauma
- involves individual, family, and community strengths and responsibility
- is based on respect

SOURCE: SAMHSA's working definition of recovery updated. Available: <http://blog.samhsa.gov/2012/03/23/definition-of-recovery-updated> [May 2016].

STAGES OF CHANGE

The change process has been conceptualized as a sequence of stages through which people typically progress as they think about, initiate, and maintain new behaviors ([Prochaska and DiClemente, 1984](#)).



This model emerged from an examination of 18 psychological and behavioral theories about how change occurs, including components that compose a biopsychosocial framework for understanding addiction. In this sense, the model is "transtheoretical" ([IOM, 1990b](#)).

Excerpted from: *Center for Substance Abuse Treatment. Enhancing Motivation for Change in Substance Abuse Treatment. Rockville (MD): Substance Abuse and Mental Health Services Administration (US); 1999. (Treatment Improvement Protocol (TIP) Series, No. 35.)*

Available from: <https://www.ncbi.nlm.nih.gov/books/NBK64967/>

There are several tools and checklists available on-line for residents to self-assess their current readiness for recovery and change. This understanding is critical as residents develop and update their recovery plans.

DOMAINS OF HEALTH

Addictions impact the entire health of an individual. Recovery planning will focus on identifying challenges, setting goals, taking actions, marshalling resources and setting timeframes for meeting these challenges within 7 core health areas:

- ❖ physical health
- ❖ social health, including family, friends and community
- ❖ emotional health
- ❖ occupational and financial health,
- ❖ environmental health (i.e. living situation)
- ❖ intellectual health
- ❖ spiritual health

Additionally, residents may have other challenges not covered by these health dimensions such as legal issues. Recovery planning should address these dimensions as well.

RECOVERY CAPTIAL

Recovery capital is defined as “the volume of internal and external assets that can be brought to bear to initiate and sustain recovery for alcohol and other drug problems.” (1) This recovery capital is highly individual and changes over time within an individual throughout their recovery. Recovery capital also will shape the types, intensity and duration of supports needed by an individual to achieve and maintain their recovery. (1) (<http://www.williamwhitepapers.com/pr/Recovery%20Capital%20Scale.pdf>)

There are on-line tools that will enable an individual to assess their recovery capital, which can be utilized during the recovery planning process.

RECOVERY PHASES AND TASKS OF RECOVERY

While recovery is a highly individualized process, research and self-report from individuals in long term recovery points to common phases, timeframes, tasks and foci in recovery journeys.

Phase and Time Frame	Recovery Tasks and Focus
<p><i>Initiation of Recovery/Early Recovery</i> -(up to six month) Focus on avoiding substance usage</p>	<p>-Tasks should be specific and concrete—changes in behavior are readily observed</p> <p>-Results are seen relatively quickly—less crises in life</p> <p>-Change in daily routine occupies most of one’s attention</p>
<p><i>Established Recovery</i> (6-18 months) Focus on relapse prevention and rebuilding of life</p>	<p>-Tasks involve longer term decisions about relationships, residence, leisure, job, and family</p> <p>-Results take somewhat longer because these changes are more involved and may directly affect other people</p>

	-Building a long-term foundation occupies most of one's attention
<p>Long Term Recovery (18 months plus)</p> <p>Focus on long-term issues—trauma, psychological disorders, personality issues, unresolved conflicts</p> <p>Focus on the meaning of life, purpose or mission in life, long-term goals, a sense of priorities, knowing one's place in the world, a sense of why one is here on earth</p>	<p>-Tasks are more involved and require significant time-investment</p> <p>-Results are less specific because they involve internal change</p> <p>-Understanding one's life occupies most of one's attention</p> <p>-Tasks are very involved—much self-reflection</p> <p>- Results take a lifetime—these questions are ongoing</p> <p>-Gaining a sense of identity occupies most of attention</p>

Adapted from: www.asi-mvconnect.com/uploadedFiles/Public/Worksheets_and_Forms/ASIMVWorksheet.pdf

SOCIAL SUPPORTS WITHIN RECOVERY RESIDENCES

Social supports within Recovery Residences are a critical factor in helping people move to long-term recovery. The four kinds of social supports identified in recovery literature (Salzer, M. *Consumer-delivered services as a best practice in mental health care delivery and the development of practice guidelines*. *Psychiatric Rehabilitation Skills*, 6 (3), 355-383), that constitute quality standards for recovery residences include:

Emotional Support-demonstrations of empathy, caring and concern among residents and staff in both formal and informal conversations and activities;

Informational Support-through the sharing of health, wellness, education, employment, citizenship (e.g. driver's licenses) information between residents and staff and leveraging opportunities to develop and enhance life skills of residents through daily communal living activities;

Instrumental Support- through concrete assistance in accomplishing tasks, including stressful or unpleasant ones such as filling out applications and obtaining public benefits;

Affiliation Support- through establishment of positive social connections with other residents and staff, and the community outside of the residence, including the recovery community