Mutual Aid: Community Recovery Support Groups

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US DHHS ACF FVPSA-Funded Special Issue Resource Center Dedicated to Addressing the Intersection of Domestic Violence, Trauma, Substance Use and Mental Health

- Comprehensive Array of Training & Technical Assistance Services and Resources
- Research and Evaluation
- Policy Development & Analysis
- Public Awareness
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Learning Objectives

- Describe different kinds of mutual aid offerings and resources.
- Identify specific strategies for incorporating mutual aid resources within gender-responsive, culturally-relevant and Domestic Violence (DV) / trauma-informed approaches.
- Describe best practices when making referrals to mutual aid resources as a service provider.
What are mutual aid community recovery support groups?
What Defines Mutual Aid?

...a recovery-oriented process where peers support one another by sharing experiences, community, coping strategies, and hope, while also supporting one another to overcome experiences of chaotic substance use, shame and isolation.
Recovery Capital

HUMAN
Skills, education, self-efficacy, hopefulness, personal values.

SOCIAL
Family, intimate relationships, kinship, social supports.

PHYSICAL
Physical health, safe shelter, basic needs, financial resources.

COMMUNITY
Anti-stigma, recovery role models, peer-led support groups.

(White & Cloud, 2008)
Mutual Aid and Recovery Support Services

- Mutual Aid is (generally) supported by research findings
  - Affiliation seen as a core mechanism for experiencing positive outcomes
  - Affiliation is more likely and outcomes tend to be better when group is selected by the person based on their preferences

- Peer support specialists, recovery coaches, treatment providers, and advocates can support engagement in a number of ways

- Recovery Support Services have a wide evidence base and play an important role in person-centered and comprehensive recovery approaches


What are some examples of mutual aid resources?
Mutual Aid Resources

Include:

- 12-Step (many forms)
- SMART Recovery
- Women For Sobriety
- LifeRing Secular Recovery
- Moderation Management
- HAMS: Harm Reduction, Abstinence and Moderation Support Network
- Buddhist (many forms)
- Faith-based (many forms)
- ...and more!
Approaches to Mutual Aid

- Individualized (there is no one-size-fits-all)
- Led by personal choice
- Not pressured or forced by others (including service provider)
- Important to have safe and affirming options to choose from, especially for people who may experience increased stigma and/or bias
  - Medication Assisted Treatment (MAT)
  - Trauma and/or victimization
  - Women (including pregnant/parenting)
  - LGBTQIA+
  - Racial/ethnic minorities
12-Step Programs

- Groups that are based on the 12-step model, such as Alcoholic Anonymous, Narcotics Anonymous, etc.
- Worldwide, very large network
- Groups are autonomous; different formats

Come as you are
Progress, not perfection
12-Step: Defining Factors

- Fellowship that includes sharing experiences and supporting one another in the common problem of “alcoholism,” “addiction” (etc.)
- Membership is based on the individual’s desire to stop using alcohol and other drugs
- There are no dues or fees for membership
- Maintains neutrality
- Focused on helping to achieve/maintain sobriety
- Groups are self-run, based on common principles
- 12 Steps of Recovery (and 12 Traditions, etc.)

Alcoholic Anonymous World Services  
www.aa.org/assets/en_US/p-2_faqAboutAA.pdf

Narcotics Anonymous World Services  
Three Legacies of 12-Step

- Recovery
- Unity
- Service
12 Steps

- Step 1: We admitted we were powerless over alcohol (addiction/etc.) - that our lives had become unmanageable.
- Step 2: Came to believe that a Power greater than ourselves could restore us to sanity.
- Step 3: Made a decision to turn our will and our lives over to the care of G-d as we understood Him.
- Step 4: Made a searching and fearless moral inventory of ourselves.
- Step 5: Admitted to G-d, to ourselves, and to another human being the exact nature of our wrongs.
- Step 6: Were entirely willing to have G-d remove all these defects of character.
- Step 7: Humbly asked Him to remove our shortcomings.

(Directly quoted from Twelve Steps and Twelve Traditions, Alcoholic Anonymous World Services)
12 Steps (cont.)

- Step 8: Made a list of all persons we had harmed, and become willing to make amends to them all.
- Step 9: Made direct amends to such people wherever possible, except when to do so would injure them or others.
- Step 10: Continued to take personal inventory and when we were wrong promptly admitted it.
- Step 11: Sought through prayer and meditation to improve conscious contact with G-d as we understood Him, praying only for knowledge of His will for us and the power to carry that out.
- Step 12: Having had a spiritual awakening as the result of these steps, we tried to carry this message to alcoholics, and to practice these principles in all our affairs.  

(Directly quoted from Twelve Steps and Twelve Traditions, Alcoholic Anonymous World Services)
Gender-Responsive Approaches When Using 12-Step Programs

A Woman’s Way Through The Twelve Steps
by Dr. Stephanie Covington
12-Step & MAT

- 12-Step based programs are not opposed to the use of medications to assist in treatment.
- Nonetheless, stigma about MAT is pervasive, and some members continue to interpret abstinence as including abstinence from medications.
- Medication-Assisted Recovery Anonymous
  http://mara-international.org/florida/
12-Step Resources for People with Co-Occurring Substance Use and Mental Health Needs

Double Trouble in Recovery, Dual Recovery Anonymous, Dual Diagnosis Anonymous

- 12-Step based
- Mutual aid focused on both substance use and mental health, and the interplay of both
- Those who attended Double Trouble in Recovery (DTR) reported not feeling comfortable discussing their mental health-related experiences in AA/NA, but could do so in DTR (Laudet, Magura, Vogel & Knight, 2000)
12-Step Resources for Individuals Who Identify as Atheist, Agnostic, and/or Humanist

- Secular AA
- Beyond Belief AA
- We Agnostics AA
- Many in-person meetings across Florida
- Book - *Beyond Belief: Agnostic Musings for 12-Step Life*
  https://secularaa.org/
Secular Mutual Aid Traditions

- SMART Recovery
- Women for Sobriety
- LifeRing Secular Recovery
- Moderation Management
- HAMS
- and more!
SMART Recovery

Self-Management and Recovery Training (SMART) uses science-based approaches and mutual support in pursuit of cultivating personal empowerment and “leading fulfilling and balanced lives.”

www.smartrecovery.org
Four Point Program:
1. Building & Maintaining Motivation
2. Coping with Urges
3. Managing Thoughts, Feelings & Behaviors
4. Living a Balanced Life
SMART Recovery 3

Some of the guiding principles

- Recovery through self-empowerment
- Evidence-based approaches
- Acceptance
- Collaboration
- Mutual help
- Volunteer run

www.smartrecovery.org
SMART Recovery Meetings in FL
(retrieved August 2019)

www.smartrecoverytest.org/local/
Women for Sobriety (WFS)

“Women for Sobriety (WFS) is an organization whose purpose is to help all women find their individual path to recovery through discovery of self, gained by sharing experiences, hopes and encouragement with other women in similar circumstances. We are an abstinence-based self-help program for women facing issues of alcohol or drug addiction. Our “New Life” Program acknowledges the very special needs women have in recovery – the need to nurture feelings of self-value and self-worth and the desire to discard feelings of guilt, shame, and humiliation.”

https://womenforsobriety.org
WFS Program

Core approaches to change

1. Positive reinforcement (approval and encouragement)
2. Cognitive strategies (positive thinking)
3. Letting the body help (relaxation techniques, meditation, diet and physical exercise)
4. Dynamic group involvement

https://womenforsobriety.org
WFS: 13 Acceptance Statements

1. I have a life-threatening problem that once had me. I now take charge of my life and my well-being. I accept the responsibility.

2. Negative thoughts destroy only myself. My first conscious sober act is to reduce negativity in my life.

3. Happiness is a habit I am developing. Happiness is created, not waited for.

4. Problems bother me only to the degree I permit. I now better understand my problems. I do not permit problems to overwhelm me.

(Directly quoted)
https://womenforsobriety.org
5. I am what I think.
   *I am a capable, competent, caring, compassionate woman.*

6. Life can be ordinary or it can be great.
   *Greatness is mine by a conscious effort.*

7. Love can change the course of my world.
   *Caring is all-important.*

8. The fundamental object of life is emotional and spiritual growth.
   *Daily I put my life into a proper order, knowing which are the priorities.*

(Directly quoted)
https://womenforsobriety.org
9. The past is gone forever.
   *No longer am I victimized by the past. I am a new woman.*

10. All love given returns.
   *I am learning to know that I am loved.*

11. Enthusiasm is my daily exercise.
   *I treasure the moments of my New Life.*

12. I am a competent woman, and I have much to give life.
   *This is what I am, and I shall know it always.*

13. I am responsible for myself and for my actions.
   *I am in charge of my mind, my thoughts, and my life.*

(Directly quoted)

https://womenforsobriety.org
WFS: Levels of Recovery

1. Acceptance of having a Substance Use Disorder, one that requires the cessation of substance use. (Statement #1)

2. Discarding negative thoughts, putting guilt behind, and practicing new ways of viewing and solving problems. (Statements #2, 4, and 9)

3. Creating and practicing a new self-image. (Statements #5 and 12)

4. Using new attitudes to enforce new behavior patterns. (Statements #3, 6, and 11)

5. Improving relationships as a result of our new feelings about self. (Statements #7 and 10)

6. Recognizing life’s priorities: emotional and spiritual growth, self-responsibility. (Statements #8 and 13)

(Directly quoted)

https://womenforsobriety.org
Women for Sobriety Meetings in FL

https://womenforsobriety.org/meetings/
LifeRing Secular Recovery

LifeRing emphasizes many pathways of recovery, and understands recovery as a unique self-empowering process (the Sober Self) that is supported through positive social support.

“We think YOU are the best person to design YOUR OWN program – you know what’s needed in your life and what has to be abandoned.”

[www.lifering.org/our-approach](http://www.lifering.org/our-approach)
LifeRing Secular Recovery

A typical meeting:

- Sit in a circle
- Short introduction
- Go around the circle
- Share about the previous week as well as the week to come
- Open conversation is encouraged
- Ends with a mutual round of applause

www.lifering.org/meetings
Moderation Management (MM)

Mutual support for individuals who are concerned about their alcohol use. Emphasizes personal responsibility over choice to moderate or abstain from alcohol use, and invites self-assessment and self-management at much earlier phases of “problem drinking.”

http://moderation.org/about_mm/whatismmm.html
MM: 9 Steps

1. Attend meetings or online groups and learn about the program of Moderation Management.

2. Abstain from alcoholic beverages for 30 days and complete steps three through six during this time.

3. Examine how drinking has affected your life.

4. Write down your life priorities.

5. Take a look at how much, how often, and under what circumstances you had been drinking.

(Directly quoted)

http://moderation.org/meetings/readings.html#
6. Learn the MM guidelines and limits for moderate drinking.

7. Set moderate drinking limits and start weekly “small steps” toward balance and moderation in other areas of your life.

8. Review your progress and update your goals.

9. Continue to make positive lifestyle changes and attend meetings whenever you need ongoing support or would like to help newcomers.

(Directly quoted)
http://moderation.org/meetings/readings.html#
MM: Typical Meeting

- Welcoming, facilitator orients group
- Members check-in by describing what kinds of alcohol problems brought them to the group, their current plan, and any situations that have made using their plan challenging
- Experienced members typically start; support and written materials are provided to newcomers
- Facilitator talks about the moderation guidelines, including 30-day abstinence for newcomers
- Ends with a closing statement, often a MM reading

http://moderation.org/about_mm/whatismm.html#mmvalues
MM: Core Values

- Members take personal responsibility for their own recovery from a drinking problem.
- People helping people is the strength of the organization.
- People who help others to recover also help themselves.
- Self-esteem and self-management are essential to recovery.
- Members treat each other with respect and dignity.

(Directly quoted)
http://moderation.org/about_mm/whatismm.html#mmvalues
Pause -
please return in
5 minutes
Harm Reduction, Abstinence, and Moderation Support Network (HAMS)

Emphasizes informed decision-making around alcohol use, self-empowerment and self-management, while supporting “every positive change.”

“HAMS: Where Better is Better!”

Info on how to get started:
https://hams.cc/start/
HAMS: 17 Elements

1. Do a Cost Benefit Analysis (CBA) of your drinking
2. Choose a drinking goal--safer drinking, reduced drinking, or quitting
3. Learn about risk ranking and rank your risks
4. Learn about the HAMS tools and strategies for changing your drinking
5. Make a plan to achieve your drinking goal
6. Use alcohol-free time to reset your drinking habits

(Directly quoted)
https://hams.cc/seventeen/
HAMS: 17 Elements

7. Learn to cope without booze
8. Address outside issues that affect drinking
9. Learn to have fun without booze
10. Learn to believe in yourself
11. Use a chart to plan and track your drinks and drinking behaviors day by day
12. Evaluate your progress - honestly report struggles - revise plans or goals as needed

(Directly quoted) https://hams.cc/seventeen/
HAMS: 17 Elements

13. Practice damage control as needed
14. Get back on the horse
15. Graduating from HAMS, sticking around, or coming back
16. Praise yourself for every success!!
17. Move at your own pace--you don't have to do it all at once

(Directly quoted)
https://hams.cc/seventeen/
Faith-Based Mutual Aid Resources

12-Step + faith tradition:

- White Bison Wellbriety Circles (Native American, mtgs in FL) [www.wellbriety.com/map.html](http://www.wellbriety.com/map.html)
- Overcomers Outreach (Christian) [https://overcomersoutreach.org/](https://overcomersoutreach.org/)
- Celebrate Recovery (Christian) [www.celebraterecovery.com/](http://www.celebraterecovery.com/)
- The Calix Society (Catholic, mtgs in FL) [www.calixsociety.org/](http://www.calixsociety.org/)
- Buddhist Recovery Network (mtgs in FL) [www.buddhistrecovery.org/](http://www.buddhistrecovery.org/)
Buddhist Recovery Network

Mutual support using concepts and practices from Buddhist traditions.

- Meditation / Mindfulness
- Some pair Buddhist teachings with 12-Step
- Open to people of all backgrounds
- Some focus more on complete abstinence while others embrace multiple pathways
- Volunteer run

www.buddhistrecovery.org/
Dharma - The Four Noble Truths

(adapted by Recovery Dharma)

1. There is suffering. We commit to understanding the truth of suffering.

2. There is a cause of suffering. We commit to understanding that craving leads to suffering.

3. There is an end to suffering. We commit to understanding and experiencing that less craving leads to less suffering.

4. There is a path that leads to the end of suffering. We commit to cultivating the path.

Direction quoted from Recovery Dharma: How to Use Buddhist Practices and Principles to Heal the Suffering of Addiction, Recovery Dharma 2019
https://recoverydharma.org/resources
Buddhist Affiliated Meetings in FL

www.buddhistrecovery.org/meetingshere.htm#
Additional Mutual Aid Resources

For a more comprehensive directory, visit Faces & Voices of Recovery:
https://facesandvoicesofrecovery.org/resources/mutual-aid-resources/
With so many different resources, how can we tell what might be helpful for someone?
General Trends

Some characteristics of people who attend SMART Recovery (SR), LifeRing (LR), and Women For Sobriety (WFS) compared to those who attend 12-Step:

- Less religious (all)
- More education and income (all)
- WFS & LR: lower severity of substance use disorders and mental health conditions
- SR & LR: less likely to pursue complete abstinence, more varied and flexible recovery goals

Belief & Mutual Aid

People were most likely to participate in Mutual Aid (and experienced better recovery outcomes), when their ‘primary group’ matched their beliefs.

- Religious people were more likely to participate in 12-Step and Women For Sobriety groups
- Non-religious people were much less likely to participate in 12-Step groups
- Belief had little impact on SMART Recovery participation

Best Practices in Referring to Mutual Aid Resources
Good Indicators to Refer

Mutual aid meetings tend to be most helpful for people who:

- Want to go
- Have a limited recovery support network
- Like the idea of peer support in addition to or instead of formal support services
- Are in preparation, action, and/or maintenance stages of change
Providing Referrals

Before referring someone -

- Become familiar with the resource(s)
  - Principles
  - Different types of meetings and formats
  - Learn some of the language and slogans and what they mean
  - Attend some open meetings

- Explore their past experiences with mutual aid resources
Expand Access

- Offer information and access to an array of mutual aid offerings and styles
- Have accessible and multilingual informational materials available
- Have your organization host community meetings (if there are no safety concerns)
- Make technology resources available for people to access online mutual aid support
Help Prepare for First Meeting

Describe a typical meeting

■ What can be expected at a typical meeting?

■ What are some things they may be asked to do? How would they feel about participating?

■ What may be some norms of the group, based on meeting style and type?
Support Meeting Access

- Help troubleshoot barriers
- Some may need support in attending first meeting(s)
  - Recovery Coaches
  - Peer Support Specialists
  - Someone in the program
  - Attend an open meeting together
Plan Ahead - What Would be Supportive After the Meeting?

- Some may experience cravings to use substances as part of their experience of attending a meeting.
- Help with making a plan for structured and supportive activity after a meeting that can promote self-soothing and ongoing recovery.
Follow Up and Debrief

■ Ask how the meeting went
  ○ What was it like for them?
  ○ How did they feel before, during, after?
  ○ Whom did they talk to?
  ○ What did they take away?
  ○ How did the meeting fit in with their goals?

■ Affirm personal strengths and growth while empathizing with any difficulties
Ongoing Support for Mutual Aid Participation

- Offer self-recording forms to track experiences of meetings
- Help to connect (and potentially reconcile) some of the concepts and skills put forth in a given mutual aid group with approaches used in program services
Recognizing Potential Barriers and Building Bridges
What has come up as potential contradictions between mutual aid and the services you provide?
12-Step                                           Behavioral Treatment

One either has the disease of addiction or does not (cannot be a “little bit alcoholic”)  Substance use and substance use disorders are understood on a spectrum

Chaotic substance use and cravings are seen as inevitable aspects of use  Chaotic substance use and cravings are seen as learned aspects of use

Admitting powerlessness, turning will/life over to higher power, taking personal responsibility  Personal control over change and rational decision making

Solution is lifelong abstinence through working 12-Step program  Treatment goals and methods vary; moderation is possible for some
Building Bridges: 12-Step & Behavioral Treatment

- Skills
- Thoughts
- Feelings
- Social
Both emphasize:

- Avoiding substance use situations and environments
- Developing interests and activities incompatible with use
- Developing skills to use in situations where substances are present
- Having clearly defined behaviors to draw upon when experiencing a desire to use
- Behavior change typically comes before cognitive or affective changes
- How to respond to recurrence in substance use, and neither views this recurrence as ‘failure’
12-Step can offer practical tips on how to avoid returning to substance use, many of which are compatible with cognitive-behavioral approaches:

- using the 24-hour plan (‘a day at a time’)
- changing old routines
- phoning a friend
- getting plenty of rest
- fending off loneliness
- letting go of old ideas
Building Bridges: Thoughts

Both emphasize:

■ The importance of planning out goals using small steps and recognizing gradual change

■ Developing a long-term perspective on use, which incorporates awareness of the unwanted consequences associated with use

■ The person is not at fault for having developed a substance use disorder, while recognizing their responsibility for addressing said disorder
Both recognize:

- Negative feelings are a common experience for people who are making changes to their substance use
- Negative affect does not have to become a reason to use
- Active coping strategies can be used to address negative feelings
Building Bridges: Social

Social support considered vital

- Behavioral approaches seek to support positive relationships through building on existing strengths within social connections and nurturing interpersonal skills.

- All mutual aid approaches are rooted in the power of peer support and seek to help a person grow their recovery-oriented social support network.
Building Bridges: ‘Powerlessness’

- 12-Step emphasizes personal ‘powerlessness’ over alcohol and other people, places, and things, but does not advocate a sense of powerlessness over one's self or one's own actions.

- Behavioral approaches emphasize personal control but also stress the lack of control that an individual has over others.

- Trauma-informed approaches emphasize that a survivor is never at fault for abuse or victimization and does not have control over another person’s behavior, while also focusing on their personal strengths, resilience, and self-determination.
“First things first”... Which is first? Safety or Sobriety?

Supporting Survivors of Domestic Violence and/or Sexual Assault in 12-Step

Combining Treatment with 12-Step: Twelve Step Facilitation (TSF)

- Evidence supported, manualized approach
- Typically 12-15 sessions over 12 weeks
- Used when the person’s goal is total abstinence and they are interested in 12-step
- Focus is on early recovery, first three steps of AA
- Some core clinician skills: person-centered, collaborative, unconditional positive regard, active listening skills, and working knowledge of 12-step approach
- Manual available from National Institute on Alcohol Abuse and Alcoholism (NIAAA):

Can someone work a 12-step and harm reduction program at the same time?
Harm Reduction & 12-Step
The Twain Shall Meet...

“We found that…drinkers would not take pressure in any form, excepting from John Barleycorn himself. They always had to be led, not pushed…We found we had to make haste slowly.”

*Bill W., co-founder of AA*
## Shared Perspectives

<table>
<thead>
<tr>
<th>12-Step</th>
<th>Harm Reduction</th>
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<tbody>
<tr>
<td>“The only requirement for membership is a sincere desire…”</td>
<td>Inclusiveness, acceptance, engagement, relationship building</td>
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<tr>
<td>“Come as you are”</td>
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<td>“Attraction not promotion”</td>
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<td>“Keep coming back”</td>
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<tr>
<td>“Progress not perfection”</td>
<td>Supporting any positive change</td>
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<td>12-Step</td>
<td>Harm Reduction</td>
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<td>------------------------------------------------------------------------</td>
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<tr>
<td>“Sometimes quickly, sometimes slowly”</td>
<td>Meeting people where they are, going at their own</td>
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<tr>
<td>“If he doesn’t want to stop, don’t waste your time…never force yourself</td>
<td>pace</td>
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<td>upon him…Let him draw his own conclusion.”</td>
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<td>“Many roads to recovery…”</td>
<td>Developing a buffet of options</td>
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<td>“We surely have no monopoly…”</td>
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<tr>
<td>“Simply lay out the kit of spiritual tools for his inspection.”</td>
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What Can We Do? Next Steps

- Learn more about the diversity of mutual aid groups available in our community as well as virtually.
- Attend an open meeting to deepen understanding of approaches that may be less familiar.
- Expand access to mutual aid through openly sharing information about the array of options.
- Support people with trying out different styles and getting the most of any style that interests them.
- Support survivors’ access to mutual aid through helping to anticipate and plan for safety concerns as well as helping to adapt mutual aid approaches to be more trauma-informed.
Additional Resources

www.NationalCenterDVTraumaMH.org
Tools for Transformation: Becoming Accessible, Culturally Responsive, and Trauma-Informed Organizations

An Organizational Reflection Toolkit

Carole Warshaw, MD, Erin Tinson, MSW, LSW, and Cathy Cave
April 2018

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Coercion Related to Mental Health and Substance Use in the Context of Intimate Partner Violence: A Toolkit for Screening, Assessment, Brief Counseling in Primary Care and Behavioral Health Settings

Carole Warshaw, MD and Erin Tinnon, MSW, LSW
March 2018
The Relationship Between Intimate Partner Violence & Substance Use (applied research paper)
Question & Answer
Thank You!
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Additional References


