Recovery Capital: Measure, Plan, Engage

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August, 2022
Acknowledgements

• David Best, Trinity Leeds University
• John Kelly, Recovery Research Institute
• Jessica Casteel, Recovery Outcomes Institute
• Individuals in recovery
• Recovery support leaders and staff

Dr. Hennessy is supported by funding from the National Institute on Alcohol Abuse and Alcoholism (K01-AA028536). The content is solely the responsibility of the author and does not necessarily represent the official views of the National Institutes of Health.
Objectives

1. Describe the key components of recovery capital theory.

2. Describe how the key components of recovery capital theory inform the REC-CAP tool.

3. Demonstrate and provide examples of the use of the REC-CAP tool for care planning.
Overview

1. Recovery

2. Recovery Capital Theory

3. Operationalize Recovery Capital

4. REC-CAP: Measure

5. REC-CAP: Plan

6. REC-CAP: Engage

7. Summary

8. APA Resources

9. References
Recovery
Recovery

Betty Ford Institute Consensus Panel (2007): recovery is “a voluntarily maintained lifestyle characterized by sobriety, personal health and citizenship”

SAMHSA: recovery 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.”

**Recovery Navigator:** Person who champions and guides the recovery process by supporting another person to address barriers and unmet needs and build the resources they need to sustain and enhance their recovery journey.
Recovery & CHIME

The Engine of Change

Measure
↓
Plan
↓
Engage / Connect ➔ ➔ Hope ➔ ➔ Empowerment

M^4
Meaning, Mentor, Monitor, Measure

Identity

Best & Wheatley, 2019; Wheatley, 2019
Recovery Capital Theory
Recovery Capital

Total **resources** to overcome substance dependency:

1. Tangible and intangible resources and relationships
2. Attitudes and beliefs
3. Mental status and personal characteristics

- Considers multiple ecological levels and life domains
- Individuals with some resources are likely to generate more
- Changes over time

Cloud and Granfield, 2004; Hennessy, 2017; White and Cloud, 2008
Recovery Capital Model

- Personal
- Social
- Community
Human Recovery Capital

- Self-confidence
- Motivation
- Mental health
- Physical health
- Cognitive health
- Spiritual beliefs
- Job/Employability
Financial Recovery Capital

- Income & education
- Stable living
- Health insurance
- Transportation
- Treatment access
Social Recovery Capital

- Supportive friends in recovery
- Supportive family
- Recovery home environment
- Non-substance oriented social groups
Community Recovery Capital

- Self-help or other mutual aid groups
- Collegiate recovery community
- Recovery cafes
- Recovery identity
- Perceptions of peer use
What does one do with recovery capital theory?

• Need a systematic and rigorous way to measure it and assess change over time
• Identify ways to intervene to actively build recovery capital
• Consider how to use it as a marker of readiness and to recovery planning
• Supports individuals in identifying opportunities for growth as well as current overall strengths.

Best & Hennessy, 2022
Recovery management philosophy

- Shifts focus of care from professional-centered episodes of acute symptom stabilization toward client-directed management of long-term recovery
- Wraps traditional treatment within a more sustained continuum of pre-recovery support services to enhance recovery readiness
- Support services enhance the strength and stability of recovery initiation and maintenance

SAMHSA, 2009; White, Kurtz, and Sanders, 2006
QUESTIONS?
Operationalize Recovery Capital: REC-CAP
Under the hood of using the REC-CAP

• Address areas of acute need and barriers first – through active linkage to organizations that can help address these
• Use existing strengths to build more strengths
• Try to help them achieve "easy wins" to build

Cano et al., 2017
### Overview of the REC-CAP Tool

<table>
<thead>
<tr>
<th>Section</th>
<th>Questions</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section 1: Demographic Characteristics</strong></td>
<td>4 questions</td>
<td></td>
</tr>
<tr>
<td><strong>Section 2: Quality of Life and Satisfaction</strong></td>
<td>5 questions</td>
<td>Adapted from WHOQOL-BREF (Skevington et al., 2004)</td>
</tr>
<tr>
<td><strong>Section 3: Barriers to Recovery</strong></td>
<td>5 sections</td>
<td>Adapted from Treatment Outcome Profile (Delgadillo et al., 2013)</td>
</tr>
<tr>
<td><strong>Section 4: Services Involvement and Needs</strong></td>
<td>8 questions</td>
<td></td>
</tr>
<tr>
<td><strong>Section 5: Personal Recovery Capital</strong></td>
<td>25 questions</td>
<td>Assessment of Recovery Capital, Personal (Groskkova et al., 2013)</td>
</tr>
<tr>
<td><strong>Section 6: Social Recovery Capital</strong></td>
<td>25 questions</td>
<td>Assessment of Recovery Capital, Social (Groskkova et al., 2013)</td>
</tr>
<tr>
<td><strong>Section 7: Involvement with Recovery Groups and Your Local Community</strong></td>
<td>17 questions 6 questions 4 questions</td>
<td>Recovery Group Participation Scale (Groskkova et al., 2011) Support from others</td>
</tr>
<tr>
<td><strong>Section 8: Commitment to Sobriety</strong></td>
<td>5 questions</td>
<td>Commitment to Sobriety (Kelly &amp; Greene, 2013)</td>
</tr>
<tr>
<td><strong>Section 9: Needs and goals</strong></td>
<td>4 questions</td>
<td>Open-ended</td>
</tr>
</tbody>
</table>
Growing evidence base

• Recovery residences

• Incarcerated or supervised populations
REC-CAP and residences

• 8 recovery residences in Florida (n = 546)

• 78% male, 33 years old on average, 23% reported substance use (3 mo.)

• Cross-sectional sample

• Recovery capital was highly predictive of well-being

• Time in the residence → increased meaningful activities and decreased recovery barriers → reduced number of unmet needs

Cano et al., 2017
REC-CAP and residences

- Recovery residences in Florida (n = 823 at baseline and 267 at 6 months)
- 95% male, 38 years old on average

Increased recovery capital associated with…
- Recovery group participation
- Working full time
- Higher rated quality of life
- Greater social support

Hard et al., 2022
REC-CAP and UK recovery prison

• Setting: HMP Holme House, UK drug recovery prison

• Acceptable to staff and those in the setting

• Trained peer supporters in the prison as recovery navigators

Best & Wheatley, 2019; Wheatley, 2019
REC-CAP and drug treatment courts

Setting: Two Federal drug treatment courts in New England

Participants: Court staff (9) and their clients (10-15/year, to date n = 22)

Court staff feel REC-CAP:

• Provides structure and positive orientation to work with clients and to court procedures
• Enables relationship building
• May present a “rosy” picture of client experience if the client does not answer honestly
• May need court staff to help with completion (literacy issues)
Adapt for Target Group

Consider…

• which areas of recovery capital are significant
• known (or potential) gaps in recovery capital for that population
• specific areas to build upon existing sources of recovery capital or synergy
• different cultural or developmental aspects of questions/responses
QUESTIONS?
REC-CAP: Measure
Begin with a learning and growth mindset for the *measure* phase…

Emphasize – this is an assessment, but it is *not* a test

- We hope to learn where there are recovery capital strengths to build upon
- We hope to learn where there are recovery capital gaps that community supports could help to build
- All scores can always be improved – we will see this growth as we work together in building recovery capital
- Reflection and honesty will help this process along
Recovery: A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

We are introducing a strengths-based way of assessing your abilities and skills and resources to help us support you achieve your goals. The assessment is called REC-CAP, which stands for “recovery capital.”

What does this mean for you?
At the start of your time with us, and every 3 months after that, we will ask you to complete a questionnaire that will take you around 15-20 minutes that shows where you are and what you need on your recovery journey. The staff working with you will see your answers.

The questionnaire starts by looking at your barriers to recovery and what unmet service needs you have but primarily focuses on your strengths - what you are good at and what supports you have from family, friends, and your community.
What do we do with the results?
The questionnaire will allow us to create a strengths profile for you that will allow us to develop a Recovery Care Plan to support your journey over the course of the next three months and to build towards your long-term goals.

You will discuss this plan with your [staff member] and they will help you to break down goals into manageable targets and to connect you with the supports you will need to achieve your own objectives and aims.

Why are we doing this?
We are committed to help increase your chances of successful recovery and all the things we hope will come with that - strong relationships, a good job and a safe place to live. If you have any questions, please discuss them with your [program staff]. We are committed to making this work.
## Section 1: Demographic Characteristics

<table>
<thead>
<tr>
<th>Question</th>
<th>Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>What is your gender?</td>
<td></td>
</tr>
<tr>
<td>How old are you?</td>
<td></td>
</tr>
<tr>
<td>What is your race? (Check all that apply.)</td>
<td>American Indian or Alaska Native</td>
</tr>
<tr>
<td></td>
<td>Asian</td>
</tr>
<tr>
<td></td>
<td>Black or African American</td>
</tr>
<tr>
<td></td>
<td>Native Hawaiian or Other Pacific Islander</td>
</tr>
<tr>
<td></td>
<td>White</td>
</tr>
<tr>
<td>What is your ethnicity?</td>
<td>Non-Hispanic</td>
</tr>
<tr>
<td></td>
<td>Hispanic</td>
</tr>
</tbody>
</table>
Section 2: Quality of Life and Satisfaction

For each of the questions below, please give a rating on the scale for how you are feeling today, where higher scores mean you are feeling better and lower scores that you are not so satisfied with this part of your life. Indicate your score by sliding the ruler.

<table>
<thead>
<tr>
<th>Question</th>
<th>Rating Options</th>
</tr>
</thead>
<tbody>
<tr>
<td>How good is your psychological health?</td>
<td>poor, acceptable, good</td>
</tr>
<tr>
<td>How good is your physical health?</td>
<td>poor, acceptable, good</td>
</tr>
<tr>
<td>How would you rate your overall quality of life?</td>
<td>poor, acceptable, good</td>
</tr>
<tr>
<td>How would you rate the quality of your housing?</td>
<td>poor, acceptable, good</td>
</tr>
</tbody>
</table>
Section 3: Barriers to Recovery, housing

- Identify areas of acute problems or barriers
- Difficult to accrue strengths while these acute barriers exist

### Table of Living Locations

<table>
<thead>
<tr>
<th></th>
<th>Own home</th>
<th>Sober house</th>
<th>Hospital</th>
<th>With family</th>
<th>Temporary housing</th>
<th>Treatment center</th>
<th>With friends</th>
<th>Rooming house</th>
<th>Jail/Prison</th>
<th>TOTAL Days</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
<td>days out of 90</td>
</tr>
</tbody>
</table>
## Section 3: Barriers to Recovery, substance use

<table>
<thead>
<tr>
<th>Substance</th>
<th>Ever been a problem?</th>
<th>Used in the last 90 days</th>
<th>Days used in the last 90 days</th>
<th>Avg daily amount</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alcohol</strong></td>
<td>Yes</td>
<td>Yes</td>
<td></td>
<td>drinks/day</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>No</td>
<td></td>
<td>reset</td>
</tr>
<tr>
<td><strong>Amphetamines</strong></td>
<td></td>
<td></td>
<td></td>
<td>g/day</td>
</tr>
<tr>
<td><strong>Heroin</strong></td>
<td></td>
<td></td>
<td></td>
<td>g/day</td>
</tr>
<tr>
<td><strong>Crack cocaine</strong></td>
<td></td>
<td></td>
<td></td>
<td>g/day</td>
</tr>
<tr>
<td><strong>Cocaine powder</strong></td>
<td></td>
<td></td>
<td></td>
<td>g/day</td>
</tr>
<tr>
<td><strong>Fentanyl</strong></td>
<td></td>
<td></td>
<td></td>
<td>g/day</td>
</tr>
<tr>
<td><strong>Gabapentin</strong></td>
<td></td>
<td></td>
<td></td>
<td>mg/day</td>
</tr>
<tr>
<td><strong>Marijuana</strong></td>
<td></td>
<td></td>
<td></td>
<td>g/day</td>
</tr>
<tr>
<td><strong>Methadone (prescribed)</strong></td>
<td></td>
<td></td>
<td></td>
<td>mg/day</td>
</tr>
<tr>
<td><strong>Methadone (street)</strong></td>
<td></td>
<td></td>
<td></td>
<td>mg/day</td>
</tr>
</tbody>
</table>
### Section 3: Barriers to Recovery, Injection Drug Behaviors

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>How many days have you injected in the past 90 days?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Have you injected with a needle or syringe used by someone else?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Have you injected using a spoon, water or filter used by someone else?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>
Section 3: Barriers to Recovery, criminal justice involvement

- Additional support needs and barriers for these individuals

<table>
<thead>
<tr>
<th>Involvement with the criminal justice system</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you currently charged with any crime?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Are you currently subject to a restraining order?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Are you currently on state probation?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
<tr>
<td>Do you presently have any other involvement with the criminal justice system?</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>No</td>
</tr>
</tbody>
</table>
### Section 3: Barriers to Recovery, work, training, and volunteering

<table>
<thead>
<tr>
<th>Question</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are you currently attending school?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are you currently working full-time?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are you currently working part-time?</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Are you currently volunteering?</td>
<td>Yes</td>
<td>No</td>
</tr>
</tbody>
</table>

**Please describe your volunteering work**

[Participant's response field]

[Reset button]
Section 4: Services Involvement and Needs

- Identify ongoing professional support the person uses
- Identify whether they need additional professional support
- Unmet needs = immediate need to respond by supporting the person to access the kinds of help they think are either not being addressed or not being addressed sufficiently by other professionals
- Recovery capital navigator role - support engagement with relevant resources...
  - May involve providing contact details, arranging an initial appointment, and helping to prepare the person to engage with the service

<table>
<thead>
<tr>
<th>Services</th>
<th>Are you currently engaged with this kind of service?</th>
<th>Are you satisfied with the service you are getting?</th>
<th>Do you need help or additional help in this area?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Drug treatment services</td>
<td>Yes</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Alcohol treatment services</td>
<td>Yes</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Mental health services</td>
<td>Yes</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td>No</td>
</tr>
<tr>
<td>Housing support</td>
<td>Yes</td>
<td></td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td></td>
<td>No</td>
</tr>
</tbody>
</table>
Section 5: Personal Recovery Capital

Please read the following statements and check a statement only if you agree with it entirely and unreservedly. Do not linger over the question but give your initial feeling at this moment. If you disagree or are unsure, leave it blank. These should reflect how you currently feel about things that have happened to you in the last 3 months (90 days).

Having a sense of purpose in life is important to my recovery journey
- Agree
- Disagree

I am able to concentrate when I need to
- Agree
- Disagree

I am coping with the stresses in my life
- Agree
- Disagree

I am free from worries about money
- Agree
- Disagree
Section 6: Social Recovery Capital

Please read the following statements and check a statement only if you agree with it completely. Do not linger over the question but give your initial feeling at this moment. If you disagree or are unsure, leave it blank. These statements are about how you currently feel and about things that have happened to you in the last 3 months (90 days).

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree</th>
<th>Disagree</th>
<th>Reset</th>
</tr>
</thead>
<tbody>
<tr>
<td>I am actively involved in leisure and sport activities</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am currently completely sober and/or clean from drug use</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am actively engaged in efforts to improve myself (training, education and/or self-awareness)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>I am happy with my personal life</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Section 7: Involvement with recovery groups and your local community (1)

Please check if you agree with any of the following statements about any group you have attended in the last month to support your recovery. These questions refer to any group - formal or informal - that you attend that supports your recovery, including AA, NA, SMART Recovery, local peer groups, aftercare groups and any other types of recovery group you belong to:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agree</th>
<th>Disagree</th>
</tr>
</thead>
<tbody>
<tr>
<td>I attend recovery group meetings on a weekly basis or more frequently</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If I did not make a meeting at my group for two weeks, people would call to see if I was okay</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I speak at recovery meetings</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I perform service at recovery meetings</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Section 7: Involvement with recovery groups and your local community (2)

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Peer Support</td>
<td></td>
<td></td>
</tr>
<tr>
<td>12-Step program</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other community recovery groups</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Online recovery groups</td>
<td><strong>Yes</strong></td>
<td><strong>No</strong></td>
</tr>
</tbody>
</table>
Section 7: Involvement with recovery groups and your local community (3)

For each of the questions below, please give a rating on the scale for how you are feeling about the question today, where higher scores mean you receive more support and lower scores mean you receive less support. Indicate your score by selecting the number that best describes your feeling.

<table>
<thead>
<tr>
<th>Question</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Do you get the emotional support you need from other people?</td>
<td></td>
</tr>
<tr>
<td>Do you get the help you need from other people?</td>
<td></td>
</tr>
<tr>
<td>Do you get the resources you need from other people?</td>
<td></td>
</tr>
<tr>
<td>Do you get the advice you need from other people?</td>
<td></td>
</tr>
</tbody>
</table>
For each of the questions below, please give a rating on the scale for how you are feeling about the question today, where higher scores mean you strongly agree and lower scores mean you strongly disagree with this statement. Indicate your score by selecting the number that best describes your feeling.

<table>
<thead>
<tr>
<th>Statement</th>
<th>Rating</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staying sober/clean is the most important thing in my life.</td>
<td></td>
</tr>
<tr>
<td>I am totally committed to staying off of alcohol/drugs.</td>
<td></td>
</tr>
<tr>
<td>I will do whatever it takes to recover from my addiction.</td>
<td></td>
</tr>
<tr>
<td>I never want to return to alcohol/drug use again.</td>
<td></td>
</tr>
<tr>
<td>I have had enough alcohol and drugs.</td>
<td></td>
</tr>
</tbody>
</table>
Section 9: Needs and goals

- Encourage a reflective mode to consider why they might be involved in this process
- Identify things about their experience that the REC-CAP does not capture and are important to know
- Ensure that their individual and personal needs are included
- Crucial to support the recovery capital navigators to help the participants develop their own personal recovery plans and journeys
QUESTIONS?
REC-CAP: Plan
Pivot from Assessment to Planning

• Link scores on the REC-CAP with a live recovery planning model
• Complete at start and every ~90 days
• Strengths-based care planning using strengths and building recovery capital
• Use of node-link maps help to structure and share goals and achievements
Use Traffic Lights to guide planning

HIGH (Green): this is effectively a list of the assets that the individual has that should be used to help to build their recovery capital and to meet their personal goals.

MEDIUM (Yellow): these are areas that are neither a strength nor a problem and will only become the focus once goals are met and there are no more red areas on the person’s score profile.

LOW (Red): these areas are to be addressed as soon as possible, ideally using the strengths that have been identified, but may also need additional assertive linkage.
A “good” score is individualized and will depend on:

1. Where they are in their recovery journey
2. How their score has changed since the last time they completed the REC-CAP
3. How their score compares to other people in the program at the same stage*

*Population norms: we can only answer when a number of people in a similar program have completed the REC-CAP measure.
Discussion steps

1. Reflect with the individual on their goals. Discuss how realistic the goals are and discuss a viable timeline for achieving them.

2. Talk about how you will reconcile the profile reported in the REC-CAP with their own personal goals and objectives.

3. Address acute barriers (barriers identified in traffic light system as red) to recovery – these are the things that will prevent the growth of strengths if they are not addressed.

4. Attend to chronic and unmet needs (but these should not stop the growth of strengths).
Discussion steps

5. The typical order of strength building is; Community, Social, Personal. The aim is to build social and external supports as the foundation for supporting the development of internal skills and capabilities – this is a social model of change and recovery.

6. Use strengths to build strengths: Identify strengths to meet short term goals. Get some ‘quick wins’ that help to build the relationship and trust in the process.

7. Build relationships and community connections to meet longer term goals – these will need to be broken down into realistic steps and recovery planning process will help you to work through these in a systematic way.

8. Provide feedback and evaluate successes.
Kevin is a 35-year-old male who is starting a Drug Treatment Court program. He has had many unsuccessful quit attempts in the community, has a long history of multiple substance use, and has been engaged in treatment services at different times in his past. He is now engaged in a drug treatment court due to a nonviolent criminal offense.

**Future Goals**

- **Life Goals:**
  
  *Get my own place, find a relationship, get a job*

- **Recovery and Re-entry Goals:**

  *Drop down use so I can save some money*
Fictional case, “Kevin” and his barriers

You indicated that you have 3 barriers.

<table>
<thead>
<tr>
<th>Barriers</th>
</tr>
</thead>
<tbody>
<tr>
<td>You indicated you have problems securing housing because of bad credit or other debt issues.</td>
</tr>
<tr>
<td>You indicated you have used illegal substances in the last 90 days.</td>
</tr>
<tr>
<td>You indicated you are currently involved with the criminal justice system in the following ways:</td>
</tr>
<tr>
<td>- Subject to a restraining order</td>
</tr>
<tr>
<td>- Currently on state probation</td>
</tr>
</tbody>
</table>
Fictional case, “Kevin” and his service needs

You indicated that you have 2 service needs.

You have indicated that you need help or additional help in the following areas:

- **Mental health treatment services**
  - The National Alliance on Mental Illness Rhode Island
    - NAMI Rhode Island works to connect people to mental health resources and advocate for non-discriminatory access to quality healthcare, housing, education, and employment for people with mental illness.
    - Phone: (401) 331-3060

- **Employment services**
  - EmployRI
    - EmployRI is a free online job service database available from any computer with internet access. It contains links to thousands of job opportunities and enables users to post resumes and apply for jobs as well as research careers and find training.
    - Website: [https://www.employri.org/vosnet/Default.aspx](https://www.employri.org/vosnet/Default.aspx)
Fictional case, “Kevin” and his community support needs

You indicated you have 2 community support needs

You indicated that you feel you need more support from the following resources:

- Peer Support
- Online Recovery Groups
Fictional case, “Kevin” and areas to set actionable goals

Planning for the future

You indicated you do not have a High School Diploma or GED. Let’s discuss what you need to do to get a GED.

You indicated you have trouble traveling from place to place on time. Let’s discuss why.

You indicated your car is unreliable or in danger of breaking down. What’s wrong with it?

You indicated you do not have a resume. What part of a resume are you having the most difficulty completing?

You indicated you do not feel you know how to effectively search for a job. What difficulties are you having while you look for a job?
Fictional case, “Kevin” and his recovery capital scores

Recovery Capital Score Summary

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Overall Recovery Capital:</td>
<td>-5.38</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>This is a measure of your</td>
<td></td>
</tr>
<tr>
<td>overall level of positive</td>
<td></td>
</tr>
<tr>
<td>recovery capital (resources</td>
<td></td>
</tr>
<tr>
<td>to use in your journey) and</td>
<td></td>
</tr>
<tr>
<td>barriers to recovery capital</td>
<td></td>
</tr>
<tr>
<td>(things getting in the way of</td>
<td></td>
</tr>
<tr>
<td>your journey) on a scale of</td>
<td></td>
</tr>
<tr>
<td>-100 to 100.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Resources to use in your</td>
<td>37.12</td>
</tr>
<tr>
<td>journey</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>Things getting in the</td>
<td>-42.5</td>
</tr>
<tr>
<td>way of your journey</td>
<td></td>
</tr>
</tbody>
</table>
Fictional case, “Kevin” and his social and community recovery capital

<table>
<thead>
<tr>
<th>Social Recovery Capital Score: 40%</th>
<th>Low social recovery capital</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other Support Score: 21.43%</td>
<td>This indicates you have low other support</td>
</tr>
<tr>
<td></td>
<td>- Low emotional support from others</td>
</tr>
<tr>
<td></td>
<td>- Low help from others</td>
</tr>
<tr>
<td></td>
<td>- Moderate resources from others</td>
</tr>
<tr>
<td></td>
<td>- Low advice from others</td>
</tr>
<tr>
<td>Community Recovery Capital Score: 0%</td>
<td>Low community recovery capital</td>
</tr>
</tbody>
</table>
Fictional case, “Kevin” and his personal recovery capital

Personal Recovery Capital Score: 48%

Quality of Life and Satisfaction Score: 57.6%

Based on the results of previous studies, your score of 57.6 would be classified as low.

Here is an overview of your scores in this section and average scores from other people in long-term recovery for comparison.

<table>
<thead>
<tr>
<th>Overall Score: Quality of Life and Satisfaction</th>
<th>Physical Health</th>
<th>Support Satisfaction</th>
<th>Housing Satisfaction</th>
<th>Psychological Health</th>
<th>Quality of Life</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your Scores</td>
<td>57.6</td>
<td>13.2</td>
<td>8.8</td>
<td>15</td>
<td>8.8</td>
</tr>
<tr>
<td>Average Scores</td>
<td>78.20</td>
<td>15.43</td>
<td>16.09</td>
<td>16.29</td>
<td>15.87</td>
</tr>
</tbody>
</table>

Commitment to Sobriety Score: 40%

Low commitment score
Node Link Mapping

Visual way to organize and present information to improve communication and decision-making

Main Benefits
• Provides a communication tool that clarifies information and contributes to sharing meaning
• Gives the person in recovery a sense of ownership over the conversation
• Helps to better structure planning sessions
• Regular use of mapping helps ensure continuity of recovery support – the maps can be referred back to, added to, and worked on as a way of maintaining the thread of discussions and plans
• Provides recovery navigator with a record that can be used to reflect on and build navigator skills

Texas Christian University, 2005
Recovery Well-being

**Overall wellbeing score:** 57.6 /100

**STRENGTHS**
- **Personal capital**
  - Reasonable physical health
  - Reasonable accommodation

- **Wellbeing**
  - Needs to build community capital and links to recovery community

- **Social capital**
  - Moderate levels of support from others
  - Can access some resources from other people

**RECOVERY BARRIERS**
- Problems securing housing because of bad debts
- Ongoing substance use
- Involvement with the justice system

**AND AREAS FOR DEVELOPMENT**
- Peer support
- Online recovery groups

**SHORT-TERM GOALS**
- Cut down on my use

**LONG-TERM GOALS**
- Get my own place
- Start a relationship
- Get a job

**ONGOING TREATMENT AND RECOVERY SUPPORT NEEDS**
- Employment support
- Additional help with mental health problems
## Continuing the Recovery Journey

<table>
<thead>
<tr>
<th>Priority Area</th>
<th>Describe the need or goal</th>
<th>How to achieve that goal?</th>
<th>Intended date to achieve goal</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BARRIERS AND NEEDS</strong></td>
<td>Ongoing substance use</td>
<td>Review treatment received</td>
<td>By 3m review</td>
</tr>
<tr>
<td></td>
<td>Problems securing housing</td>
<td>Debt repayment planning</td>
<td>By 3m review</td>
</tr>
<tr>
<td></td>
<td>Justice involvement</td>
<td>Work with my probation officer</td>
<td>6 months</td>
</tr>
<tr>
<td></td>
<td>Mental health support</td>
<td>Look for community mental health support</td>
<td>3m review</td>
</tr>
<tr>
<td></td>
<td>Employment support</td>
<td>Training needs assessment</td>
<td>6 months</td>
</tr>
</tbody>
</table>

| **STRENGTHS TO WORK ON** | Build recovery social networks | Get involved with a local RCO | 3m review |
|                         | Engage with community | Find a SMART group that I can attend | 3m review |
|                         | Improve decision making | Join a local swimming club | 6 months |
|                         | Build up my self-confidence | Get help to address my anxiety | 3m review |
Continuing the Recovery Journey

**LONG-TERM GOALS**
- Get my own home
- Get a job
- Meet a new partner
- Stay abstinent and stay out of trouble

**SHORT-TERM GOALS**
- Address acute mental health needs
- Improve housing situation
- Start looking at career options
- Get recovery support
- Make a mental health appointment for review and community support
- Review recovery housing options
- Develop a resume and visit community college
- Access local RCO

**This week**
- By year end
  - By Easter 2023
  - By Christmas
- From today but to be reviewed at every session
Setting a Goal

**MY GOAL**
Stop drinking and using cocaine

**Specific Actions**
- Change my friendship networks and stay away from old mates
- Make new friends through recovery groups
- Engage with RCO and my probation officer

**Possible Problems**
- This is what my friends do when we are out
- Lack willpower and motivation
- Lack of support and sober activities

**Solutions**
- Supported introductions to RCOs and MHO’s
- Fill my time with meaningful activities
- Focus on a safe place to live away from my friends and a plan for training and recovery

**Helpful people & useful thoughts**
- My brother
- Probation officer
- Recovery navigator

**Strengths you have or need**
- Social support
- Coping skills
- Recovery supports

**When**
RCO and probation
Appointments today
Do not answer the phone
QUESTIONS?
REC-CAP: Engage
Remember...

• An individual cannot do this alone… but neither can the staff

• Be the *bridge* to the assets that exist in the community that can support the person in recovery to meet their needs and find their passions

• Start with peer organizations and local community groups

• Be *flexible* and *adaptable* to their needs and readiness
Asset Based Community Engagement (ABCE)

Developed from *Asset Based Community Development* - citizen-led, strengths-based approaches to community development

1. Identify current levels of community engagement through asset mapping
2. Explore assets (accessibility, affordability, connectedness and social networks)
3. Explore the personal interests of the individual
4. Identify barriers to community engagement
5. Highlight the role of assertive linkage to the recovery navigator
6. Establish assertive linkages and community engagement

Collinson & Best, 2019
How to get started?

• What are the key organizations and groups?
• Who are the community connectors?
• What should be done to prepare the person for connection?
• How do you test the effectiveness of the initial matches?
• How do you build on this success?
Summary
Synergistic benefits of Building Recovery Capital

Best et al., 2017, Best & Ivers, 2021
American Psychological Association

Resources


Reference List


Note: All photos or pictures used for the presentation are from the public domain of pixabay.com


• Substance Abuse and Mental Health Services Administration. (2009). Designing a Recovery-Oriented Care Model for Adolescents and Transition Age Youth with Substance Use or Cooccurring Mental Health Disorders. Rockville, MD: U.S. Department of Health and Human Services.

