



Great Lakes (HHS Region 5)

ATTC

Addiction Technology Transfer Center Network
Funded by Substance Abuse and Mental Health Services Administration



Clinical and Non-Clinical Roles & Services for Recovery-Oriented Behavioral Health Providers



Presented by:

Cherie A. Hunter

Executive Director

Hunter Communications Group, Inc.

(Great Lakes ATTC Consultant)

Webinar Objectives



- Review the definitions of ROSC, Recovery and Recovery Management
- Raise and expand awareness about Recovery Management; its relationship within a ROSC and how it impacts both clinical and non-clinical roles.
- Describe clinical and non-clinical roles and services
- Understand the importance of role clarity and role integrity
- Understand how these roles when bundled support long-term recovery

What is a ROSC?



Recovery-oriented systems of care (ROSC) 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.

CSAT, SAMHSA

Recovery-oriented systems of care (ROSC) are networks of formal and informal services developed and mobilized to sustain long-term recovery for individuals and families impacted by severe substance use disorders. The system in ROSC is not a treatment agency, but a macro level organization of a community, a state or a nation.

William "Bill" White

What is Recovery?



What is Recovery?

From National Focus Groups



- Getting involved with things I enjoy (e.g. church, friends, dating, support groups, etc)
- Learning what I have to offer
- Seeing myself as a person with strengths
- Taking one day at a time
- Knowing my illness is only a small part of who I am
- Having a sense that my life can get better
- Having dreams again
- Believing I can manage my life and reach my goals (bravery and hope)
- Being able to tackle everyday
- Having people I can count on

--Davidson et al.

What is Recovery?

From a Community's Perspective

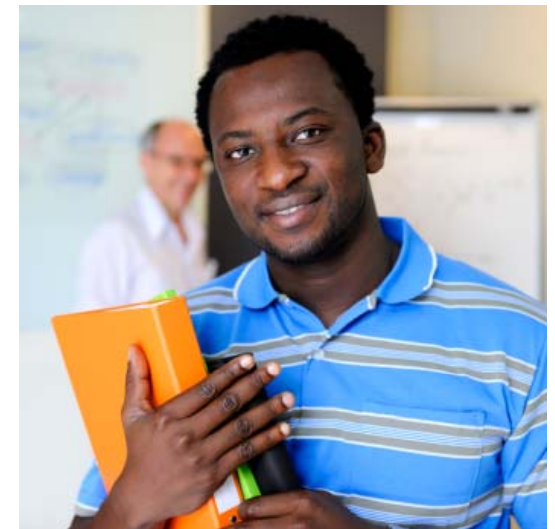
- **Discovering** who I am
- **Lifelong effort** to become the best we can be
- **Change**
- **Regaining health** – physical / mental / spiritual / relationships
- **New beginning** – becoming what you want to be
- **Personal** – different for each person
- **Hope**
- **Bravery** – facing a different way of life
- **Repairing** what is broken
- **Re-establishing** oneself from crises
- **Living** life on life's terms



Recovery Management

A philosophy for organizing treatment and recovery support services to enhance pre-recovery engagement, recovery initiation, long-term recovery maintenance, and the quality of personal/family life in long-term recovery

(William White)



ROSC as a Conceptual Framework & Road Map



SOCIAL SUPPORT

NAMI

Peer Support

Housing Improvements

Treatment and Medication Support

Employment Opportunities

AA and NA

Family Education

Faith-based Support

Physical Health

RCOs

Healthy relationships

Life skills training

Many Paths to Recovery



- Mutual Support groups
- Other peer support
- Professional treatment
- Nontraditional methods
- Medical interventions
- Medication-assisted treatments
- Family support
- Faith
- On your own
- And more!

Clinical and Non-Clinical Roles & Services



The question is not:

“Which of these roles is THE most important in the recovery process?”

The question is:

“How can such resources be bundled and sequenced in ways that widen the doorway of entry into recovery and enhance the quality of recovery?”

Example of: Clinical and Non-Clinical Roles

Clinical

- Counselor
- Case Manager
- Psychologist
- Psychiatrist
- Social Worker
- Physicians
- Nurses

Non-Clinical

- Recovery Coach
- Peer Coach
- Sponsor
- Peer Recovery Coach
- Peer Specialist

So What's the Difference



**Distinguishing
Between Clinical
and Non-Clinical
Roles and Services**

So What's the Difference



Clinical Services involve diagnosis and treatment by health care professionals that include addiction and other professionals in recovery



Non-Clinical means that the relationship is closer to the reciprocity of friendship.

Two Distinctions



One:

- ✓ **Where Clinically Recovery Oriented and Addiction Treatment Services may focus inward on personal wounds,**
- ✓ **Non-Clinical Services involves a focus outward, connecting with resources and relationships beyond self.**

Two Distinctions



Two:

- ✓ **Where Clinically Recovery Oriented and Addiction Treatment Services often values the experience of emotional catharsis**
- ✓ **Non-Clinical Services extols the value of emotional control.**

Clinical vs Non-Clinical Services



Role

Delineation/Clarity



Foundational Knowledge

- Clinical: Emphasis on formal education (theory and science) vetted by the profession**
- Non-Clinical: Emphasis on experiential knowledge and training, vetted by the community.**

Organizational Context

- ❑ **Clinical: Works within organizational hierarchy of treatment organization & with direct supervision**
- ❑ **Non-Clinical: Organizational setting span treatment organizations, allied service, organizations and recovery community organizations, varied degree of supervision**

Service / Support Framework

- Clinical: Works within a particular organizational treatment philosophy.**
- Non-Clinical: Works across multiple frameworks of recovery via choices of those with whom they work.**

Service / Support Relationships

- ❑ Clinical: Significant power differential
extreme separation of helper/helpee:
explicit ethical guidelines: high external
accountability**
- ❑ Non-Clinical: Minimal power differential:
ethical guidelines being developed:
moderate external accountability**

Style of Helping



- Clinical: Formal, Personally Guarded and Strategic**
- Non-Clinical: Varied by organizational setting, but generally personal and informal**

Use of Self



- Clinical: Self-Disclosure discouraged or prohibited**
- Non Clinical: Strategic use of one's own story, role model expectation**

Temporal Orientation

- Clinical: Considerable focus on past experiences**
- Non-Clinical: Focus on present; What can you do today to strengthen your recovery**

Duration of Service Support Relationship

- Counselor: Brief and ever Briefer**
- Recovery Coach: Measured in months or years (via sustained recovery checkups)**

Role Delineation



The question is not:

“Which of these roles is THE most important in the recovery process?”

The question is:

“How can such resources be bundled and sequenced in ways that widen the doorway of entry into recovery and enhance the quality of recovery?”

(White, W. (2006). Sponsor, Recovery Coach, Addiction Counselor: The Importance of Role Clarity and Role Integrity. Philadelphia, PA: Philadelphia Department of Behavioral Health and Mental Retardation Services.

What if we really believed?



WHAT WOULD
LOOK DIFFERENT?

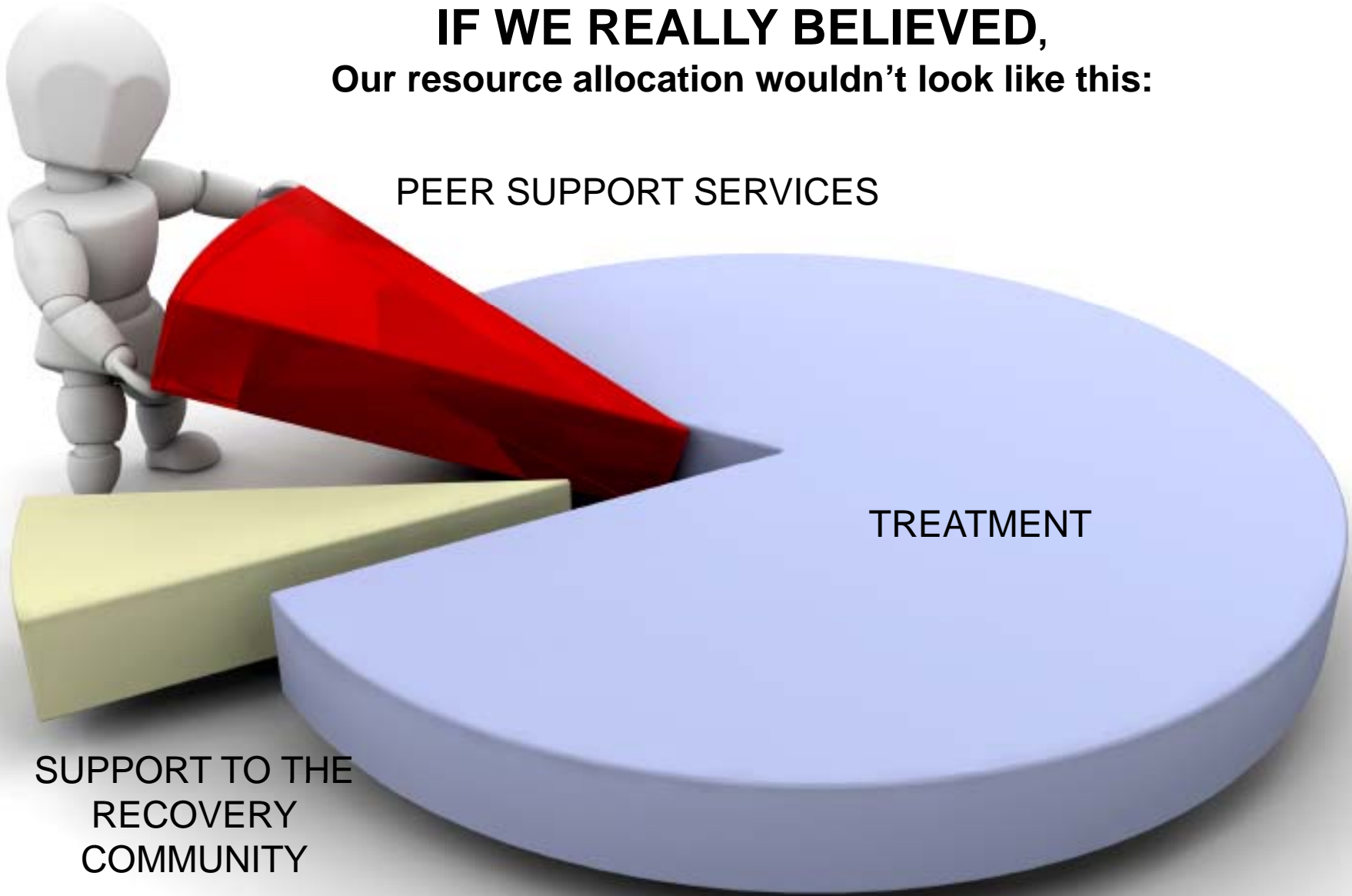
WHAT WOULD
WE WANT TO SEE?

IF WE REALLY BELIEVED,
Our resource allocation wouldn't look like this:

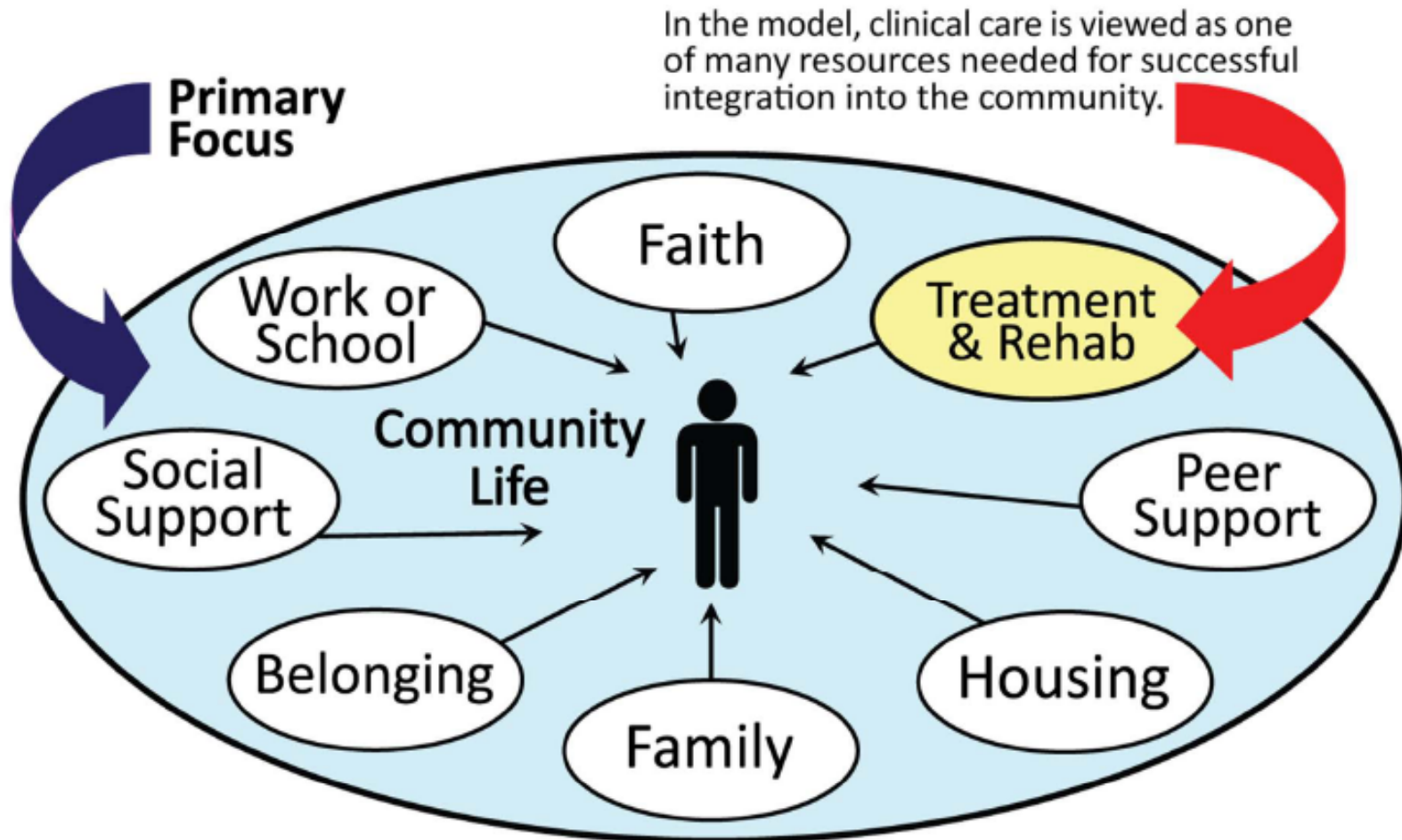
PEER SUPPORT SERVICES

TREATMENT

SUPPORT TO THE
RECOVERY
COMMUNITY



Recovery and Resilience Oriented System of Care



Acknowledgements



All content regarding ROSC provided by
Dr. Ijeoma Achara
Achara Consulting, Inc.

Recommended Resources

● Monographs

- Recovery Management
- Peer-based Addiction Recovery Support: History, Theory, Practice, and Scientific Evaluation
- Recovery Management and Recovery-Oriented Systems of Care: Scientific Rationale and Promising Practices
- Practice Guidelines for Resilience and Recovery Oriented Treatment

● Websites:

- www.attcnetwork.org/greatlakes
- <http://www.facesandvoicesofrecovery.org/>
- <http://beta.samhsa.gov/brss-tacs>
- <http://www.centerstone.org/>

Contact Information



Cherie A. Hunter

Executive Director

Hunter Communications Group, Inc.

Hunterca7@comcast.net

www.huntercommunicationsgroup.net

Lonnetta Albright

Executive Director

Great Lakes Addiction Technology Transfer Center (Great Lakes ATTC)

1640 W. Roosevelt Road

Suite 511 (MC779)

Chicago, IL 60608

(312) 996-0966

lalbrigh@uic.edu

www.attcnetwork.org/greatlakes



Questions?