Recovery Community Organization Toolkit

By our silence we let others define us:
Building the voice of the Organized Recovery Community
# Contents

<table>
<thead>
<tr>
<th>Section</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduction</td>
<td>4</td>
</tr>
<tr>
<td>Recovery Community Organizations</td>
<td>5</td>
</tr>
<tr>
<td>Section I: Recovery Community Organizations: Core Principles</td>
<td>6</td>
</tr>
<tr>
<td>Section II: Recovery Community Organizations: Core Strategies</td>
<td>8</td>
</tr>
<tr>
<td>1. Public education and awareness</td>
<td>8</td>
</tr>
<tr>
<td>2. Policy advocacy</td>
<td>8</td>
</tr>
<tr>
<td>3. Peer-based and other recovery support services and activities</td>
<td>8</td>
</tr>
<tr>
<td>Types and examples of Recovery Community Organizations</td>
<td>9</td>
</tr>
<tr>
<td>Section III: Recovery Community Organizations: Examples</td>
<td>11</td>
</tr>
<tr>
<td>Connecticut Community for Addiction Recovery</td>
<td>11</td>
</tr>
<tr>
<td>Connecticut Community for Addiction Recovery Milestones</td>
<td>12</td>
</tr>
<tr>
<td>Association of Persons Affected by Addiction</td>
<td>14</td>
</tr>
<tr>
<td>Section IV: Statewide Recovery Community Organizations: Advocacy Focus</td>
<td>16</td>
</tr>
<tr>
<td>Massachusetts Organization for Addiction Recovery</td>
<td>16</td>
</tr>
<tr>
<td>People Advocating Recovery</td>
<td>17</td>
</tr>
<tr>
<td>Section V: Local Recovery Community Organizations</td>
<td>18</td>
</tr>
<tr>
<td>Pennsylvania Recovery Organization – Achieving Community Together (PRO-ACT)</td>
<td>18</td>
</tr>
<tr>
<td>Section VI: Learning from Experience: Keys to Successful Recovery Community Organizations</td>
<td>19</td>
</tr>
<tr>
<td>Section VII: Steps for Creating a Recovery Community Organization</td>
<td>23</td>
</tr>
<tr>
<td>Visioning</td>
<td>23</td>
</tr>
<tr>
<td>Having Good Meetings</td>
<td>24</td>
</tr>
<tr>
<td>Developing a Shared Vision</td>
<td>25</td>
</tr>
<tr>
<td>Creating Mission and Vision Statements</td>
<td>25</td>
</tr>
<tr>
<td>Building an Organizational Structure</td>
<td>25</td>
</tr>
<tr>
<td>Communications</td>
<td>27</td>
</tr>
<tr>
<td>Building Your Agenda</td>
<td>28</td>
</tr>
</tbody>
</table>

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The Association of Recovery Community Organizations at Faces & Voices of Recovery is a growing network of recovery community organizations across the nation. More information is available online at www.facesandvoicesofrecovery.org.
Introduction

When Faces & Voices of Recovery was founded in 2001, we stood on the shoulders of a rich history of organized advocacy by the addiction recovery community – people in recovery, their families, friends and allies.

Marty Mann founded the National Council on Alcoholism almost 70 years ago to provide education to raise the awareness of addiction and recovery across our society. Bill Wilson, the co-founder of Alcoholics Anonymous, testified before Congress on the Hughes Act, envisioning a day when hundreds of AAs would fill the halls of Congress to demonstrate wellness and recovery. The late Senator Harold Hughes, a person in long-term recovery from addiction, founded the Society of Americans for Recovery in 1991.

The Society of Americans for Recovery (SOAR) is a grass-roots organization of concerned people from all walks of life. It is dedicated to the fundamental belief that alcoholic and drug-dependent people and their families should have the same rights and privileges as all other people. It strives for a better understanding that treatment and recovery will reduce other health, social, and economic problems. Please join us to champion hope, justice, and opportunity for all whose lives are damaged by diseases of alcoholism and drug dependence.

— Senator Harold Hughes, SOAR Founder and Chairman

Faces & Voices of Recovery was founded to provide focus for a growing advocacy force. Faces & Voices is dedicated to organizing and mobilizing the over 20 million Americans in recovery from addiction to alcohol and other drugs, our families, friends and allies into recovery community organizations and networks, to promote the right and resources to recover through advocacy, education, and demonstrating the power and proof of long-term recovery.

In many cases, recovery voices are marginalized and ineffective when the work is shouldered primarily by lone individuals. As we know from the great social movements that precede ours, the public, policy makers, and the media can easily ignore individual voices. In fact, the reality of long-term recovery is often overshadowed by media and public fascination with active addiction and popular myths supported by stories of celebrities’ very public struggles with the dark side of addiction.

Never doubt that a small group of thoughtful committed citizens can change the world; indeed, it's the only thing that ever has.

— Margaret Mead
Long-term recovery from addiction to alcohol and other drugs is real for over 20 million Americans and thousands more get well every year, benefiting individuals and their families, the communities in which we live, work and go to school. There are as many different paths to recovery as there are different people in recovery. Regardless of how people achieve recovery, they are the living proof that recovery happens and that there are real solutions to the problem of addiction to alcohol and other drugs.

Times have changed. As the recovery community has unified around key priorities – to gain needed resources, embrace all pathways to recovery, innovate and provide services, and to end discrimination against people in or seeking recovery, new institutions have developed across the country.

Building strong recovery community organizations is one way to break feelings of isolation and shame, build strong relationships, and advocate for the solutions that we know work. Grassroots organizations develop recovery leaders, offer opportunities to express a collective voice and provide a forum for community service. Coming together to build a constituency of consequence means acting together to bring about positive changes in community life through public action.

Recovery community organizations are usually created by people in personal and/or family recovery in response to unmet needs in their communities. Often, they exist as voluntary advocacy and service organizations for some time before they have funding to support their activities on a more formal basis. They have learned that deliberate effort and regular adjustments to their plans and activities is required to strike a balance between building an organization that has the capacity to bring about real change and keeping an agenda focused on making a real difference in the lives of people in the recovery community.

We know that when the recovery community works together – organizes – we have the ability to improve all of our lives.

Many of us have carried a message of hope on a one-to-one basis; this new recovery movement calls upon us to carry that message of hope to whole communities and the whole culture. It is time we stepped forward to shape this history with our stories, our time and our talents.

— William White, recovery historian

**Recovery Community Organizations**

Across the country, organizations that are independent, non-profit, led and governed by people in recovery, family members, friends and allies are mobilizing resources within and outside of the recovery community to make it possible for the over 23 million Americans still struggling with addiction to find long-term recovery. Each organization has a mission that reflects the particular issues and concerns of their community.
SECTION I: Recovery Community Organizations: Core Principles

All groups share three core principles – recovery vision; authenticity of voice; and accountability to the recovery community.

• Recovery Vision

Recovery community organizations focus on the reality of long-term recovery from addiction to alcohol and other drugs for over 20 million Americans and their families. The recovery community organization, its leaders, and members have a singular goal: enhancing the quantity and quality of support available to people seeking and experiencing long-term recovery from addiction. Faces & Voices of Recovery envisions a day when public and private policies have been implemented at the local, state, and federal levels to help individuals and families get the help they need to recover, including access to effective care including treatment and peer and other recovery support services. Policies that discriminate against people in or seeking recovery will have been reversed and removed.

The focus is on the “solution” that involves mobilizing individual and community resources to promote recovery, not a particular service or model of care. One of the founding principles of Faces & Voices of Recovery is embracing all pathways to recovery. This principle is embodied in our Recovery Bill of Rights, a statement of a recovery vision and agenda. While recovery community organizations form strategic alliances with like-minded partners, this vision is distinct from that of for example, human service agencies, faith-based and other community organizations, professional addiction treatment, and mental health treatment, and primary care providers. There are mission and vision statements from a variety of recovery community organizations in the Resource Section.

• Authenticity of Voice

 Authenticity of voice means representing the interests of communities of recovery. A guiding principle is self-governance, mutual aid and support. Recovery community organizations are developing to serve communities, with leadership by and for community members. Recovery community organizations have a majority of board members, managers, staff, and volunteers drawn from the community. This strong connection is the source of a recovery community organization’s strength and ensures that the voice of the recovery community takes precedence over other interests.

By developing and nurturing strong grassroots networks, recovery community organizations develop leaders, offer opportunities for people to make their voices heard, and provide a forum for community service. Vibrant recovery community organizations insure that the voices of people who have the lived experience of recovery, including family members, are heard and embraced and that the organization’s public education, advocacy, and recovery support services respond to the broadest spectrum of local recovery needs.
• Accountability to the recovery community

Recovery community organizations’ credibility and effectiveness depends on their ability to be accountable and responsive to the community they work in and with. In most cases, this means being an independent, stand-alone nonprofit organization, where they can manage their relationships with other organizations. For example, a recovery community organization may work closely with an association of treatment providers, a Drug Court, a Community Prevention Coalition or a hospital, but be independent of them in their governance. Independence allows a recovery community organization to bridge the gaps between the recovery community and government agencies, the criminal justice system and the larger network of health and human services providers. The recovery community organization’s real strength is drawn not from its links to other service organizations but from the authentic voice of the individuals in the recovery community who relate to and actively support it.

Recovery community organizations recruit and engage people in recovery, family members, friends and allies to advocate on behalf of their own, identified interests. Wherever possible, recovery community organizations use something called “participatory processes” – different ways to involve both leaders and members – to weigh in on decisions on programming and policy. Recovery community organizations provide an organized way for people to give back to their communities through volunteer and paid service to others seeking recovery and work with allied organizations by offering recovery support services, advocating on common public policy agendas, and broadening public understanding of the reality of recovery while remaining accountable to the recovery community.
Recovery community organizations use three primary strategies to achieve their mission, fostering recovery-focused and oriented values and communities. Each organization determines the mix and priority given to each of these core strategies:

1. Public education and awareness

Putting a face and a voice on recovery to educate the public, policy makers, service providers, and the media about the reality of recovery offers hope and dispels myths and pessimism about the power and reality of long-term addiction recovery. This strategy also draws attention to the social and policy barriers facing people in and seeking recovery.

Growing numbers of individuals are speaking out publicly and sharing their experience as members of recovery community organizations. They are using Faces & Voices recovery messaging to advocate while respecting the anonymity traditions of 12-step programs they may participate in – advocating with anonymity.

Recovery community organizations have web sites, speakers bureaus, host educational forums at schools, host Town Hall meetings, cable TV shows, and carry out many other public awareness activities. They are training people in recovery and family members as speakers and organizing public events, bringing recovery to the broader community. One well-known national awareness effort is the annual September National Recovery Month observances. Groups across the nation and now worldwide organize walks, rallies and other events to focus attention on the reality of recovery.

2. Policy advocacy

To build recovery-oriented and supportive communities, recovery community organizations are addressing the public policy barriers that keep people from sustaining their recovery for the long haul. One consequence of addressing addiction as a criminal justice, not a public health crisis, has been the imposition of legal barriers on people with criminal records. Advocacy is aimed at ending the punishment and incarceration of people for their status as people with histories of addiction.

These barriers make it much more difficult for people to get their lives back on track, get a job, obtain housing, and reunite with their families and friends. Recovery community organizations are also engaged in advocacy at the local, state, and federal levels to promote policies and regulations in health insurance, program development, and resource allocation that make sense for the recovery community.

3. Peer-based and other recovery support services and activities
Recovery community organizations are innovating and delivering a variety of peer recovery support services and places to deliver those services, building a lasting physical presence in communities. Recovery coaching, telephone recovery support services, all-recovery meetings, and other services are being organized and delivered by trained volunteers and/or paid staff. A growing network of recovery community centers are home to these services as well as a place for community-wide sober social activities, workshops, meetings, and resource connections.

In addition to these three core strategies, recovery community organizations are also:

- **Developing leaders**, offering opportunities for people in recovery, family members, friends and allies to express their collective voice, learn new skills and responsibilities, and provide a forum for community service;
- **Advocating for meaningful representation and voice** for people in long-term addiction recovery and family members on issues that affect their lives;
- **Assessing needs** related to the adequacy and quality of local treatment’ recovery support services, and other health and social services;
- **Assessing strengths, assets, and resources** available in the community to support recovery;
- **Educating the public, policy makers, and service providers** about the prevalence and multiple pathways of addiction recovery;
- **Developing human and fiscal resources** by expanding philanthropic and public support for addiction treatment, recovery support services, and recovery advocacy and cultivating volunteerism within local communities of recovery; and
- **Supporting research** that illuminates effective strategies and the processes of long-term recovery and establishes an evidence base for peer and community supports.

**Types and examples of Recovery Community Organizations**

This section describes different types of organizations with in-depth examples to illustrate the principles and strategies that characterize recovery community organizations. There's information on their history, including the context in which each was formed, and how they have evolved. The descriptions highlight some of their activities and shared principles of success.

Recovery community organizations are organized in a variety of ways, depending on the needs of their respective communities and goals. Core principles of vision, authenticity of voice, and accountability are often embodied but expressed in different ways. Some are statewide organizations, while others focus on serving the needs of local communities. In addition to these different geographic focuses, groups have adopted different strategies. For example, the statewide Massachusetts Organization for Addiction Recovery (MOAR) focuses primarily on public awareness and advocacy and doesn't provide peer recovery support services. Its membership is comprised of individuals throughout the state. Other recovery community organizations in Massachusetts provide peer recovery support services, workshops, and community events. .
support services and turn to MOAR for its leadership on state-level public policy advocacy.

By contrast, the Recovery Alliance in El Paso, Texas focuses on public awareness and providing peer services like recovery coaching and recovery housing to the El Paso recovery community. The Recovery Alliance is also one of the founding members of a new state wide recovery public awareness and advocacy organization, Texas Recovers! Texas Recovers! members are a confederation of local, community-based groups who have come together to influence state policy.

In some states, individual recovery advocates or local recovery community organizations are coming together to form state wide recovery community organizations. In Virginia, the recently formed Addiction Recovery Council of Virginia (ARCVA) is a group of individuals, active in recovery advocacy, who are influencing Virginia’s policy towards a more productive recovery solution.

ARCVA has organized a Recovery Caucus, modeled after the federal Addiction Treatment and Recovery Caucus launched by former members of Congress Patrick Kennedy (D-RI) and Jim Ramstad (R-MN). They are working with the caucus to advocate for resources to support recovery community organizations in delivering services and supports that help achieve long-term recovery.

Across the country, organizations and individuals are coming together at the state level to address and advocate on policy issues in a unified way. They are advocating and working with state agencies including Alcohol and Drug Administrations, Departments of Correction, Insurance Commissioners, as well as elected officials. With implementation of the Affordable Care Act, they are working with emerging Health Exchanges and other health and funding entities in their states.
SECTION III: Recovery Community Organizations: Examples

Connecticut Community for Addiction Recovery

Bob Savage, CCAR’s founding Executive Director, began the Connecticut Community for Addiction Recovery (CCAR) in 1998 with initial financial support from the CT Department of Mental Health and Addiction Services, followed by a grant from the federal government’s Recovery Community Support Program (RCSP). He organized monthly Chapter meetings across the state that evolved into a statewide recovery community organization. His impetus for forming CCAR came from two questions that were on his mind while he was working for the state government:

1. Where are the people in recovery when we are making critical decisions concerning them?
2. Can the recovery community be organized to advocate for issues of importance to them?

Originally, formed as an advocacy organization, CCAR members began asking to do more and a number of them wanted to be of service. CCAR responded (with the support of RCSP’s switch from “support” to “services”) by developing peer-led services. Since 2002, CCAR has been developing and refining these services. One key service that CCAR has pioneered is peer telephone support that engages and supports individuals in early recovery through telephone check-ins and coaching.

CCAR’s board has never formally defined membership. Its members are people who have agreed to be on its mailing list. The organization hasn’t developed a system of paid membership, but has an Individual Giving Campaign to encourage people to contribute their financial support.

CCAR offers a number of ways for its members to be involved as volunteers – both as advocates and as peers delivering services.

CCAR’s Recovery Coach Academy has been a model for training recovery coaches nationwide. In 2012 alone, CCAR trained 997 recovery coaches from 27 states.

Phil Valentine, CCAR’s current Executive Director, elaborates on some of the lessons learned throughout CCAR’s history:
CCAR’s Lessons Learned

- Pick a few things and do them very well. Don’t try to do everything.
- Family, family, and more family. Family members have the potential to be the recovery advocacy movement’s most powerful constituency.
- Be an ally of the Single State Agency. Work with them, not against them.
- Pay people in recovery well. Value their experience. If a recovery community organization doesn’t pay people in recovery well, who will?
- We have a right to be heard and to speak even when it’s uncomfortable to voice our opinions.
- Integrity matters.
- Treat your Board with utmost respect.
- Hire carefully and take your time when hiring.
- Seek help on special issues from people who have more experience than you in a given area.
- Share your challenges as well as your successes.
- Surround yourself with great people.

Here’s a brief roadmap to CCAR's growth and development that describes its evolving multi-pronged public education, advocacy and peer recovery support services and training activities.

Connecticut Community for Addiction Recovery Milestones

1997
- Held first Recovering Community Organization meeting
- Held first Legislative Day

1998
- Received funding from CSAT’s Recovery Community Support Program, laying the financial foundation that was later supplemented by funding from the Connecticut Department of Mental Health and Addiction Services (DMHAS)

2000
- First Recovery Walks! an idea that came from the recovery community. There had never been a walk in support of addiction recovery that CCAR members knew about. Their goal was 50 people to show up and 700 people showed up for the first walk.
• Recovery Core Values written in collaboration with mental health recovery advocates, becoming the cornerstone of a statewide Recovery-Oriented System of Care that has become a national model.

• Produced two videos, “Putting a Face on Recovery” and “The Healing Power of Recovery”

• Held third Legislative Day where a few legislators revealed their personal recovery status publicly for the first time

2004

• Opened first Recovery Community Center in Willimantic in response to a high profile series of newspaper articles in the state's largest paper, The Hartford Courant, labeling Willimantic “Heroin Town”

2005

• Opened New London Recovery Community Center

• Started Recovery Housing Project, inventorying the state’s independently owned, privately-operated sober houses, established a coalition, wrote standards, and delivered training for recovery home operators.

2006

• Opened Bridgeport Recovery Community Center

• Opened Hartford Recovery Community Center

2007

• Launched Telephone Recovery Support Program

2008

• Formed the Recovery Technical Assistance Group (RTAG) to provide consulting and technical assistance to recovery community organizations and other entities

• Held first Recovery Coach Academy, a 7-day training that drew 30 participants in a “learning laboratory” model

2009

• Held the fourth annual Volunteer Recognition and Celebration dinner with recovery comedian Mark Lundholm attended by 209 people, 108 of them volunteers

• Received a $100,000 service contract from the CT Department of Corrections for the Reentry and Recovery Project for people in the Hartford parole district.

• Recovery Walks! celebrated its tenth anniversary
2010

• Telephone Recovery Support enrolls more than 1,200 individuals
• CCAR volunteer Geraldo Rivera receives Lifetime Achievement award

2011

• Over 20,000 volunteer hours recorded
• Recovery Community Centers have more than 45,000 visits, tripling previous year
• Telephone Recovery Support enrolls more than 1,900 individuals
• Held 12th annual Recovery Walks!

Association of Persons Affected by Addiction

The Association of Persons Affected by Addiction (APAA) was founded in Dallas, Texas in 1998 to focus on the needs of people seeking recovery unmet by the emerging managed care environment. APAA also received a Recovery Community Support Program (RCSP) grant from the Center for Substance Abuse Treatment (CSAT) in 1998. Today, APAA is a non-profit, peer-led organization that offers peer recovery management and promotes volunteerism within the recovery community. The organization offers non-clinical, peer assistance that supports recovery, reduces relapse, and promotes high-level wellness in individuals, families, and the community.

Initially under the jurisdiction of a facilitating or “parent” organization, APAA developed bylaws to define how it would operate, with an elected Steering Committee that hold monthly membership meetings. A few years later, at a two-day long retreat, APAA revisited its mission, goals, and objectives and further refined its core beliefs, and vision.

When APAA was first getting organized, members were anxious for action, wanting to do something to make life better for people seeking and initiating recovery. It was difficult for many to be patient with the process of building a sound organizational foundation. As a group, APAA members came to realize both the importance of shifting the focus from treatment to recovery and the difference between individual recovery work and collective advocacy work accomplished by an organized recovery community.

In 2001, APAA acquired its 501(c)(3) status and began operating with a Board of Directors that now determines the organization's programs and priorities. Many APAA members are actively involved in the community and play leadership roles in advisory councils, planning groups, and policy forum that involve recovery issues throughout the city, county, and state. APAA members provide testimony at the state and local levels and make presentations at conferences. APAA is a founding member of the statewide recovery community organization, Texas Recovers!

In 2007, APAA became the first recovery community organization to enter into a service contract with a managed care provider, Value Options/NorthSTAR, to
provide peer recovery support services for individuals with co-occurring disorders. Because of this relationship and the launching of the NorthSTAR Behavioral Health Managed Care Pilot, persons who had participated in publicly-funded treatment were specifically recruited for membership.

APAA began to develop key relationships with treatment providers that serve the medically indigent population, the Mental Health Association, Coalition on Mental Illness, and the National Alliance for the Mentally Ill-Dallas to let people know about their organization.

**APAA’s Core Values:**

- Commitment to recovery and sobriety
- Sustainability of a drug- and crime-free lifestyle
- Accountability for our actions and mental health
- Courage to do what is right
- Willingness to be of service to others
- Positive regard for others, especially the vulnerable
- Diversity and inclusion in all that we do

APAA has also pioneered many public awareness and education activities including Recovery at the Movies and other social activities.
SECTION IV: Statewide Recovery Community Organizations: Advocacy Focus

Massachusetts Organization for Addiction Recovery

Massachusetts Organization for Addiction Recovery (MOAR) was founded in 1991 by a group of volunteers with a mission to organize recovering individuals, families, and friends into a collective voice to educate the public about the value of recovery. In 1998, MOAR joined the New England Alliance for Addiction Recovery (NEAAR), a six state consortium building a voice for recovery. NEAAR was an RCSP grantee in 1998 and 2001. MOAR’s work as a recovery education and membership organization is done through fiscal sponsorship under Third Sector New England. The organization is funded mostly by the Massachusetts Bureau of Substance Abuse Services, Department of Public Health. Other foundation and individual funding helps MOAR to build recovery-oriented systems of care, overdose prevention, and policymaker education.

It took MOAR’s founding Board one year to develop its mission because it wanted to ensure that many pathways to recovery were authentically represented and there was solid participation from supportive families, friends, and allies. MOAR held focus groups across the state to reflect the voices and perspectives of both individuals in long term recovery, as well as family members. At MOAR, the voices of families became prominent because of their expressed needs for changes in insurance, continuum of care, and criminal justice policies that matched the voices of people in recovery.

MOAR is known in the recovery community as a resource for education, planning, and communications. It has worked extensively to build a statewide network of family support groups. The organization strategically built its staff to represent persons who have gained their recovery from medication assistance, faith-based approaches, mutual aid, as well as treatment. MOAR's staff and Board intentionally represent long-term recovery, ethnic diversity, and family members.

MOAR promotes public awareness and education regarding the value of recovery from addiction to the general public and policy makers by recruiting people in recovery, their family members, and friends to speak out regarding the benefits of recovery and the social costs of addiction in our communities and the workplace. MOAR has celebrated National Alcohol and Drug Addiction Recovery Day at the State House every year for 20 years and holds quarterly forums for the recovery community to educate one another, hear from policymakers, and take action.

MOAR offers Addiction Recovery Education Access Services (AREAS), peer-led and peer-driven educational sessions that build positive social connections among people in recovery while providing practical information regarding how to navigate a complicated social service system. AREAS use a collaborative learning approach, covering such peer-identified topics as Hepatitis C: Finding Facts and Fighting Myths; CORI Criminal Offender Record Information; Telling Our Recovery Stories; housing; mental health; trauma; addiction and recovery; and healthy relationships.
MOAR was instrumental in building the Massachusetts Coalition for Addiction Services, which has grown to a 10-member coalition, educating policymakers about the need to strategically build a continuum of care. The Coalition has been a strong advocacy force that has fought for services threatened by severe budget cuts in the face of an opiate and overdose epidemic in the state. MOAR’s Executive Director chairs the Coalition.

**People Advocating Recovery**

People Advocating Recovery (PAR) was founded as Kentucky’s statewide recovery community organization in 2002, gaining non-profit status in 2006. People in recovery and allies had been coming together in the state as part of Join Together’s Demand Treatment project and developed an Angel’s Program to provide outreach to people in emergency rooms because of addiction-related issues.

Following a Recovery Ambassador advocacy training, conducted by the Johnson Institute, the group formed PAR to bring forward an advocacy and public awareness focus. While relatively few new state dollars had been budgeted in the past 20 years, addiction problems were calling attention to the need for more treatment and recovery options.

PAR’s legislative advocacy agenda has included increasing funding for indigent treatment, restoration of voting rights to ex-felons, seeking increased placement of recovering persons on state policy advisory boards, and working for pre-trial diversion programs. PAR has developed effective partnerships other advocacy groups, such as Kentuckians for the Commonwealth, the Catholic Conference of Bishops and the League of Women Voters. PAR’s partnership with the Restoration of Voting Rights Coalition (ROVRC), housed at Kentuckians for the Commonwealth, has fostered a fruitful collaboration. Three PAR Board members serve on the Coalition’s Executive Council. With the ROVRC, PAR has educated advocates, held rallies, and educated legislators about recovery. PAR members have testified before many committee hearings, talked one-on-one with their legislators, done outreach and linking for people needing help, made public appearances, and been featured in electronic and print media stories.

In the beginning PAR functioned as a strictly volunteer organization. There are now six PAR chapters, with two more developing and 4000 members. Individual chapters each have a seat on the Board and “at large” Board members are selected for their disparate points of view and varied political affiliations. In 2009, with support from the Health Foundation of Greater Cincinnati, PAR moved into a new stage of development with a volunteer Board and a paid Executive Director. This has increased its ability to advocate in the state capitol of Frankfort and elsewhere, to raise awareness of recovery needs and options around the state, and to assist in chapter development. In 2011, PAR broadened its capacity to deliver training and technical assistance in order to educate Kentuckians about peer and other recovery support services.
SECTION V: Local Recovery Community Organizations

Pennsylvania Recovery Organization – Achieving Community Together (PRO-ACT)

PRO-ACT was founded in 1997 to promote the rights of, and ensure opportunities for, those still suffering from the disease of addiction, members of the recovery community, and their family members. PRO-ACT is hosted by and is a project of the Council of Southeastern Pennsylvania, a National Council on Alcoholism and Drug Dependence affiliate with a 37 year history of community mobilizing, education, and advocacy. PRO-ACT grew and developed with grants from the federal government’s Recovery Community Services Program (RCSP) in 1998, 2001, and 2006, as well as other support.

PRO-ACT provides advocacy and peer recovery support services throughout five counties in southeastern Pennsylvania (Bucks, Chester, Delaware, Montgomery, and Philadelphia Counties). PRO-ACT is one of three regional recovery community organizations in the state of Pennsylvania under the umbrella of Pennsylvania Recovery Organizations Alliance (PRO-A), a statewide recovery community organization. The other two organizations are The RASE Project in Harrisburg and Recovery Messengers in Pittsburgh.

The organization operates Central Bucks Recovery Support Services, Philadelphia Recovery Community Center, PRO-ACT Recovery Training Center, and Southern Bucks Recovery Community Center. Their peer support programs are fueled by principles of service and volunteerism, fostering empowerment and the concept of recovery capital as core organizing and program constructs. PRO-ACT has an ongoing assessment of community needs to inform its programs and activities. Recovery Community Centers provide a variety peer and other recovery support services including recovery housing, a support hotline, recovery coaching, resume development, parenting, sober recreation activities, and life skills education.

PRO-ACT’s Family Education Program is for families who have members suffering from addiction. PRO-ACT volunteer facilitators provide the information and resources needed to deal with addiction and tools to get started on the road to recovery. The Family Program is offered monthly in a three part series and requires registration.

PRO-ACT has been successfully influencing policy at the state and national level for many years. They partner with other organizations at the state level to support prevention, treatment, and recovery support services and advocate for increased funding from federal, state, and local budgets. PRO-ACT works closely with the City of Philadelphia and has been involved in the seven year effort to transform services for recovery.

PRO-ACT’s focus on wellness includes recreation and celebration. The organization hosts an annual Recovery Walks! which attracted over 15,000 people in 2011 and features advocacy activities and participation from elected officials from all levels of government.
SECTION VI: Learning from Experience: Keys to Successful Recovery Community Organizations

Here are some critical elements for building a strong recovery community organization:

1. **Taking time to develop a shared vision and mission.** An organization’s vision statement offers the hope of the future and is something that will serve as your organization’s guide post. A mission statement is the path that your organization will follow, identifying who you are representing and serving and how you will get there. Faces & Voices updated its vision and mission statements in 2009 to further refine the organization’s activities and direction. Boards, staff, and members use these statements to make sure that the activities are recovery-focused and that the organization is staying true to its mission. There are examples of vision and mission statements in the Resource section of the Toolkit.

2. **Maintaining organizational independence, ownership, and control.** Many recovery community organizations were launched under the umbrella of another group that served as its fiscal agent before obtaining independent 501(c)(3) status. Other organizations, such as PRO-ACT and Friends of Recovery Vermont, have been able to forge a relationship with their respective host organizations that allow them to retain ownership and control of organizational resources, agenda and activities. Other organizations have struggled with their “parent” organizations and are actively pursuing efforts to establish an independent organizational structure or have changed their host organization when their ability to operate independently was threatened.

3. **Diversifying funding streams.** Recovery community organizations receive funding from public/government sources, corporations, private foundations and individuals. Federal government funding for the RCSP program helped build the infrastructure of some recovery community organizations. When funding for that program was cut, some organizations developed other public sources such as Departments of Correction. Many organizations use block grant or other funding from their Single State Agency (SSA) as core support.

Private foundation funding and corporate donations have helped organizations develop. “Unrestricted” funds from recovery community members are being developed to fund advocacy and education campaigns. Recovery community organizations are working to diversify their funding streams and increase funding from individuals to secure “unrestricted” funds.

4. **Making advocacy a part of a recovery community organization’s agenda.** Groups are testifying before state legislatures, influencing state spending priorities and lobbying for specific pieces of legislation to end discrimination and support recovery-oriented spending priorities. Although most people use the words interchangeably, there is a distinction between advocacy and lobbying that is helpful to understand. When nonprofit organizations advocate on their own behalf, they seek to affect some aspect of society, whether
they appeal to individuals about their behavior, employers about their rules, or the government about its laws. Lobbying refers specifically to advocacy efforts that attempt to influence legislation. This distinction is helpful to keep in mind because it means that laws limiting the lobbying done by nonprofit organizations do not govern other advocacy activities. It’s important to make sure that unrestricted funds are used for these activities and that proper reporting is done. See the Resources Section for information on lobbying by 501(c)(3) organizations.

5. **Maintaining a recovery focus.** There are over 20 million Americans in recovery. Growing numbers are joining recovery community organizations and building a force for changed attitudes and policies. Their primary emphasis is on recovery rather than treatment, prevention, or active addiction. As groups expand in numbers and ability to influence, they are being asked to partner with allied organizations on their agendas and issues. Recovery community organizations are also partnering with allied organizations on their recovery agendas. As the Association of Persons Affected by Addiction (APAA) learned in its early years, having a clear vision and mission is very important. They originally were working on issues around changing the system of managed care practices in Dallas. This issue didn’t resonate with the recovery community and wasn’t recovery focused. After holding meetings with the community, APAA decided to make its agenda and activities emphasize recovery.

6. **Recognizing and embracing diversity within the recovery community.** “Cultural responsibility,” is being able to engage and involve people with diverse cultural, economic, gender and other backgrounds, and should be a goal for groups. Organizations that value the recovery and other life experiences of all enrich their ability to serve and to advocate. Some organizations have developed with a focus on particular communities. For example, White Bison is an American Indian non-profit charitable organization that offers sobriety, recovery, addictions prevention, and wellness/Wellbriety learning resources to the Native American community nationwide. Although White Bison’s philosophies and practices are specific to Native American experience, they have applications across many cultures. Many non-Native people have used White Bison’s healing resources. This is just one example of an organization that has established an organizational culture that embraces diversity by fostering respectful attitudes, behaviors, skills, policies and procedures.

PRO-ACT has a series of one-hour women’s support group meetings that focus on self esteem, relationships and inner beauty. Other organizations make sure that materials and resources are available in languages other than English and their web sites have features that allow materials to be easily translatable.

7. **Valuing and respecting diverse pathways to recovery.** The recovery community is as diverse as our society as a whole, and that diversity is reflected in the multiple pathways to recovery that people around the country pursue. Each individual’s personal recovery should be able to reflect their individual experiences, strengths and values. These diverse pathways include medical, public health, faith and social support approaches. From 12-Step programs to cognitive behavioral approaches and medication-assisted treatment and recovery, how a person finds and maintains recovery is not at issue. What is important is that everyone has the right and opportunity to find a recovery
path that works for them. To ensure that opportunity, recovery community organizations should value and respect all of the diverse pathways to recovery that people in their communities are following whenever possible.

Many recovery community organizations host All Recovery Groups, a peer-led recovery support group that is open to people in recovery, family members, friends and allies to talk about their common goal of recovery. CCAR was one of the pioneers of All Recovery Groups in Willimantic, CT, where CCAR listened to community members who wanted to come together irrespective of pathway to recovery, addiction history or relationship to recovery.

Family-focused activities including holiday celebrations, educational programming, dances, art shows and other activities are another way that recovery community organizations strengthen communities while honoring and valuing the diverse pathways to recovery.

8. **Empowering existing leaders and developing new ones.** Successful organizations invest in current leaders and are always nurturing future leaders because strong leadership is a necessary ingredient. There are clearly defined and understood roles and responsibilities that empower members and staff to carry out the organization’s mission. As in all organizations, leaders, whether volunteer or paid, current or future, must have the best interests of those they serve in mind.

9. **Building relationships with local, national and international recovery community organizations.** Successful recovery community organizations learn from one another and build networks of support. In Vermont, the Vermont Recovery Network is a consortium of that state’s eleven recovery community centers. Faces & Voices Association of Recovery Community Organizations is a network of recovery community organizations across the country. The New England Alliance for Addiction Recovery (NEAAR) is a region wide association of recovery community organizations. There are growing relationships between recovery community organizations across the world. More information can be found on Faces & Voices International Recovery Resources Guide.

10. **Building alliances with allied organizations and movements.** Just like addiction, recovery affects individuals, families and communities. Recovery community organizations have formed strategic alliances on advocacy and recovery support issues. In addition to likely allies including treatment providers and health care professionals, other allies include employers, teachers, the faith community, child welfare service providers, law enforcement officials, attorneys, labor unions and elected officials. People Advocating Recovery partners with Kentuckians for the Commonwealth and the League of Women Voters in efforts to restore voting rights for people with drug convictions. Minnesota Recovery Connection’s 2011 Clean II art exhibit was created and co-sponsored by Your Art’s Desire Gallery of Art and Framing. The Maine Alliance for Addiction Recovery’s 3-day experiential training, The Recovering Women’s Leadership Training, was supported by AdCare Educational Institute; Discovery House, Bangor; and the City of Bangor Health and Community Services. CCAR recently contracted with Connecticut’s ASO (Value Options) to provide community education.
11. **Organizing and building a recovery community organization is a process, not an event.** The process of forming a recovery community organization is ongoing and evolutionary. Organizational planners need to make room and resources for this to occur. Initially, it is important for the leadership group to meet as often as possible and a strong focus is necessary to keep the process moving along. Thriving organizations are ones that take advantage of opportunities and have the ability to adapt and adjust. As you develop, you will be figuring out new ways to carry out your mission. You will also have set backs and learn from them as well.

The National Association of Recovery Residences (NARR) is a new organization of recovery housing providers across the country. The idea for the association was developed in fall 2010 by people from Georgia, Connecticut and Michigan and in May 2011, leaders from across the country came together in a retreat to look at how they could move forward and organize a national network that would develop national standards of operation for residences and develop a national advocacy voice for recovery residences. NARR held an inaugural meeting in September 2011 to introduce a national standard for recovery residences and map out a plan for the coming year. Getting to this point involved weekly telephone conference calls, planning work, meetings and other activities. For its first year, leadership NARR is being driven by a provisional Board, which has divided the workload throughout several committees. At the end of the first year, a fully formed Board of Directors will take leadership.

12. **Developing membership structures that fit your organization's needs.**

There are many different types of membership: Texas Recovers! defines its members as organizations that pay an annual fee. The Vermont Recovery Network's members are recovery community centers across the state. CCAR's members are individuals who participate in CCAR activities. Some organizations have annual membership fees that its members pay to belong, whether they are individuals or organizations.

13. **Educating the public by putting a face and a voice on recovery.** Our friends, neighbors, employers and policymakers are hungry for information about the solution. Almost all recovery community organizations have Speakers Bureaus, offering trained individuals to speak to audiences like the PTA, Rotary Clubs, people who are incarcerated, legislators and others as well as in the media. Many recovery community organizations offer popular trainings and workshops – to family members, people in recovery and other community members. Faces & Voices Our Stories Have Power Message and Media training’s recovery messaging is being used by organizations across the country to train advocates to put a face and a voice on recovery.
SECTION VII: Steps for Creating a Recovery Community Organization

The organized recovery movement grew out of a felt need to bring recovery out from behind the closed doors of church basements, sober homes, and full (but often anonymous) lives that many people in long-term recovery and their families live. Just like advocates in other social movements have done, there are specific steps that recovery advocates can and are taking to find a unified voice on behalf of recovery rights and advance a focus on recovery in all aspects of American life.

A few years ago, Friends of Recovery-New Hampshire, with support from a private foundation, the New Hampshire Charitable Trust, decided to go back to square one and rethink their organization. They wanted to revitalize the organization and engage new members and energy in their work to advance recovery across the state. The process they followed is a good model that groups of people who are coming together can adopt.

There was a core group of people who were interested in moving ahead and they wanted to attract others to participate in a process of visioning and learning. With the help of a facilitator, they held a series of meetings across the state. For each meeting, it was understood and agreed that the group of people attending would drive the process of developing a unified purpose. An agenda for each meeting that included community learning about issues of importance to the recovery community and organizational visioning discussions was distributed widely across the state. At each meeting, there was a discussion about who was not there and how to build a larger network of participants. At the end of this planning process, new vision and mission statements were formulated, a board of directors was elected and a work plan that included hiring an Executive Director was adopted by the board. The new board took on issues that had been identified in the planning process.

Visioning

The first step in establishing a recovery community organization is community visioning. When Bob Savage was thinking about CCAR, he held meetings across the state of Connecticut to find out what was on the minds of the recovery community. Visioning is a process to articulate the group’s hope of the future and will include examining who will be involved, how it will be structured and operate. The visioning process can take many months to carry out.

Many recovery community organizations start with a core group of dedicated and committed volunteers. These individuals will need to formalize their relationship as a steering committee or planning group. This allows them to divide up tasks and move the process forward. They should always be transparent and accountable to the larger group of individuals who they are attracting to the process of getting a group off of the ground. Ideally, they will have demonstrated leadership, communications and listening skills. The most important thing is that they are able to put aside any personal agendas and work together toward the shared vision and goals.
Members of the steering committee should represent the diversity of the recovery community and if you’re forming a statewide recovery community organization, geographical representation is particularly important. Because organizing and building a recovery community organization is a process, not an event, the steering committee will need to set up times to meet and plan as well as times for the larger community to participate in the planning process.

Steering committee meetings can be held by conference call or in-person. If you’re organizing a statewide recovery community organization, planning meetings can be held in various locations around the state. Transportation and timing are important considerations. To attract and involve people who are working, it may make the most sense to schedule meetings on weekends. It’s important to design meeting times and locations that make it as easy as possible for people to attend. Holding regional meetings is one way to address transportation issues, as well as providing opportunities for car pooling and bus transportation. The most important thing is for the steering committee to set up a schedule of meetings so that people know what to expect and where and how they can participate in launching their organization.

**Having Good Meetings**

Throughout this visioning process, you will be holding by phone and in person. For each meeting, there should be an agenda and “ground rules.” This is important because you want to make progress and keep people involved and engaged. It’s easy to forget that everyone is donating their time and talent and you don’t want to lose their investment and commitment to moving forward together. Some organizations establish “ground rules” or “working agreements” as one of their first orders of business. Here are some that have been used successfully:

- Respect
- Openness
- One person speaks at a time
- Practice good listening skills
- Strive for consensus
- Confidentiality
- Other agreements that the group feels are important

Here are some other tips for a successful meeting:

1. Always designate someone to chair the meeting and someone to take notes
2. Always have an agenda that is sent out to all participants a few days before the meeting
3. At the beginning of the meeting, ask for additions or changes to the agenda
4. Have a set amount of time for the meeting and agenda items.
5. Report on what happened and who will take responsibility for next steps by sending out meeting notes.
Developing a Shared Vision

There are many ways to find out what’s on the minds of the recovery community and make sure that your organization reflects the priorities of people in the community. It’s important to gather divergent views and ideas and encourage ongoing involvement in your organization. One way is by holding Community Listening Forums and Town Hall meetings to gather input from people and take a community pulse on current issues. Another way is to use online or mailed surveys. Whatever the format, the process of listening is critical to an organization’s ability to thrive. It’s a process that should be ongoing to make sure that the organization prioritizes its programs to reflect the views of the recovery community and attract recovery community membership and participation in its activities. Of course, it’s impossible for a new organization to do everything that needs to be done at once. This process of touching base with the community will help to determine priorities, build relationships, develop programs, and set your agenda.

Creating Mission and Vision Statements

A mission statement will be your organization’s compass, outlining your fundamental purpose or “mission.” It is the path you will take to realize your vision or dream. With it, anyone in the organization can always judge if you’re moving in the right direction, serving as a check point to help with decision making about specific projects and policies. Mission statements tell us who we serve, what needs we are trying to satisfy, and how we will serve our constituents. It must express an organization’s purpose in such a way that inspires involvement, commitment, and loyalty. Face It Sioux Falls’ mission statement is, “Dramatically increase both the number of individuals and families in recovery and the quality and accessibility of services by creating a Recovery-Oriented System of Care.”

Creating mission and vision statements is a process that will help clarify what you are doing and bring together the group of people you are working with. They are not set in stone, however. At some point down the road, your organization may want to refine or change your mission and/or vision statements, especially if they were developed by a smaller group of key leaders/founders in the early stages of your organization’s life.

A vision statement offers the hope of the future, the end point of the organization’s successful outcome. Vision statements are usually short, to the point, and easy to remember. For example, Minnesota Recovery Connection envisions “a world where recovery from addiction to alcohol and other drugs is understood, promoted, embraced, and enjoyed and where all who seek it have access to the support, care, and resources they need to achieve long-term recovery.”

Building an Organizational Structure

It takes time, resources, and energy to build a strong organizational infrastructure that will support your organization. A solid organizational infrastructure defines governance roles and processes and establishes authority and decision making procedures that help recovery community organizations be accountable to the community and funders.
One of the first decisions will be about whether or not you want to incorporate as a legal entity or get started as a campaign or project of another organization before tackling incorporation as a 501 (c)(3) organization. There are numerous sources of information and assistance about the process of applying for not-for-profit status and in many communities; attorneys have provided pro-bono assistance in making the applications. Some of the issues that you will need to address include membership and how your Board of Directors will be set up and operate, including representation from the recovery community, officers, and Board committees. If you decide to incorporate, you will need to draft by-laws and set up a formal organizational structure. See the Resources Section for examples of by-laws from a few recovery community organizations.

If you don’t incorporate, you will still need to set up a structure for your organization and formalize a relationship with the organization that will serve as your fiscal agent. Faces & Voices of Recovery operated as a project of the Legal Action Center for the first six years of its existence before becoming a 501 (c)(3).

Whether or not you incorporate, your organization will also want to develop a business plan, establish a budget and system for keeping financial records and writing reports to funding agencies. The business plan should include the development of informational materials and resources, setting up an office, web site, communications and other systems.

Funding will be necessary to open an office, hire staff, and take on other expenses. Some organizations have benefitted from large grants that allowed them to have substantial budgets in their early years and develop a strong organizational infrastructure. Other organizations have followed business plans that had little initial investment in paid staff and office space and secured funding after demonstrating an ability to carry out their agenda.

Whatever the case, organizations need to inventory who their potential financial supporters are and build strong relationships with them. Recovery community organizations receive funds from a wide variety of sources. They may receive federal funding through the federal government’s Access to Recovery, Recovery Month, and reentry and other programs. In certain states that have been implementing recovery-oriented systems of care, recovery community organizations are receiving funding through the block grant. In these instances, they have able to bill for the delivery of recovery support services through the state Medicaid program or receive funds through contracts with state Departments of Correction or other state agencies.

At the community level, hundreds of businesses and local units of governments have provided support to events and activities. Private foundations have also provided financial support for particular recovery community organization-sponsored activities or special events like Faces & Voices America Honors Recovery. The Christopher D. Smithers Foundation funded the printing and North American distribution of a White Bison, Inc. book on the history of recovery among Native American tribes. The Robert Wood Johnson Foundation supported Faces & Voices early development and the Open Society Foundation is funding its support of recovery community organizations and work on health reform.
State wide recovery community organizations like People Advocating Recovery (PAR) in Kentucky have enjoyed support from health care conversion foundations like the Health Foundation of Greater Cincinnati. CCAR established its Technical Assistance Group to generate income from its trainings.

This support has not met the fiscal needs of the growing numbers of recovery community organizations. Some groups are self-funded primarily from donations of people in recovery and their circle of friends and associates. Many envision their long-term financial sustainability in terms of support from members of their local communities of recovery. This support is most often delivered through either paid memberships or donations in response to individual giving campaigns or in event sponsorship.

Some groups are developing relationships with allied organizations who can become supporters and advocates for issues of shared concern. These allies include employers, educators, people from the faith and business communities, health care providers, attorneys, and funding organizations.

**Communications**

As your organization gets up and running, you will want to be keeping track of the names and contact information of everyone you come in touch with. If you have a town hall meeting, Recovery Month event, or other activity, make sure to find out who's there so that you can build a network of advocates who you can be in touch with on a regular basis. Never miss an opportunity to have clipboards and sign-in sheets. Build and develop a database of members and supporters, making sure to ensure the confidentiality of their information.

Many organizations have developed web site or face book and other online pages to stay in contact with their members while others have weekly or monthly eNewsletters to share information and resources. Other communications tools include chat rooms, listservs and direct mail.
**Steps to Organizing the Recovery Community**

- Establish the core group
- Establish leadership and/or champion(s) for the cause
- Determine vision, mission, and purpose
- Establish working infrastructure (Board of Directors?, staff?, volunteers?)
- Recruit, engage, retain more people
- In early stages, pick one or two projects and do them extremely well to establish credibility
- Make sure these early stage projects are “right-sized” – not too small or too big
- Build on successes, strengths
- Market; promote successes with constituency, stakeholders, possible funders
- Share Be aware of opportunities as they arise, establish a system to prioritize, be conscious of what you can do and do well

**Building Your Agenda**

In the process of developing your vision and mission, your organization heard from the recovery community about its priorities. A number of organizations have conducted a community assessment for strengths and needs or have done asset mapping of community resources as part of their ongoing work to develop programs, advocacy campaigns, and assist in their strategic planning. As your group is developing, you won’t be able to take on all of the issues that have been identified at once. Instead, you will have to set priorities for programs and activities. For example, many recovery community organizations are interested in opening Recovery Community Centers (see box below). Part of that process is assessing what the opportunities are for moving a recovery agenda forward. Given your organization’s capacity, is there an issue like restoration of voting rights, that you can work on, make a name for yourself and build a broader constituency base?

Your organization’s leadership will need to decide how decisions will be made and how you are going to get things done.
Steps to Organizing the Recovery Community

Advocates in the state of Vermont pioneered developing a physical place in the community where recovery community organizations can do their work – be it putting a face and a voice on recovery, advocating for public policy changes or providing peer recovery support services.

Today a network of eleven recovery community centers across the state are organized as the Vermont Recovery Network. These public places literally bring recovery from church basements onto Main St. in Rhode Island, that state’s recovery community organization, Rhode Island CARES is housed in the Anchor Recovery Community Center in downtown Pawtucket, Rhode Island. Pennsylvania Recovery Organization – Achieving Community Together (PRO-ACT) operates three recovery community centers. There’s a growing network of these physical locations where the recovery community is organizing the ability to care. Connecticut Community for Addiction Recovery (CCAR) developed a list of the core elements of a recovery community center. The list below is based on that list.

Recovery Community Centers are:

• A recovery-oriented sanctuary anchored in the heart of the community;
• A visible, physical location where recovery community organizations can organize the local recovery community’s ability to care, by providing a variety of recovery support services and putting a face on recovery;
• A recovery resource for the local community, serving as a place where people still struggling with addiction and family members can enter and receive help in navigating the systems and services to get the help they need; and
• A recovery resource offering a structured schedule of recovery-related workshops, trainings, meetings, services and social events.

Recovery community centers are places where people actively work on their recovery, or help others and recovery community organizations carry out their programs and activities. They are not treatment agencies because clinical services aren’t offered and they’re not 12-step clubhouses or drop-in centers.

Your recovery community organization’s success will depend on your ability to develop and nurture relationships of all kinds. The most important relationship is with the recovery community – people in recovery, family members, friends and allies. Within the community are the future leaders of the recovery movement. They are people who have retired from their professions as well as young people who can be nurtured to take on leadership positions in organizations and the community. We look forward to the day when candidates for public office are running on our “recovery agenda.”

Celebrations are an important part of sustaining the recovery movement. Publicly thanking and acknowledging volunteers who are the living proof of your organization’s commitment to recovery-related social change is one way to honor
individuals and bring forward the recovery message. Celebrating addiction recovery as part of National Recovery Month is educating the public about the reality of recovery. Celebrating hard won victories is a way of educating the public about the reality of recovery and the strength of the organized recovery community.

Faces & Voices recently launched an Executive Director’s Leadership Academy and we are building a formal learning network among the leaders of recovery community organizations. As your organization develops, one of the best resources at your disposal is the organizations that have gone before you, who are ready to share their experiences as well as learn from you as your organization grows and develops.

Through the growing network of local, state, and regional organizations, we are demonstrating that helping our friends, neighbors, co-workers and loved ones who are still struggling with addiction to alcohol and other drugs benefits the entire community. We are promoting widespread understanding that long-term recovery is a process that takes time and support. Only when Americans have a sound appreciation of recovery, and fully understand the recovery process, will laws and policies be effectively changed to reduce discrimination and lower barriers to recovery.