



# Measuring and mapping recovery capital: International Impact

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## Structure of the presentation

- A debt of gratitude – NTA visit, Birmingham Treatment Effectiveness Initiative (BTEI)
- The recovery model
- Recovery capital
- Measurement and tools
- Current projects and models
- Node Link Mapping and recovery care planning!



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## Recovery facts and models

### Recovery statistics

- 58% recovery rate (SAMHSA, 2009)
- Relapse reduces to 14% in year 5 (Dennis et al, 2007)
- Addiction careers average 28 years with 4-5 episodes of treatment over 8 years
- Reasons for stopping and reasons for staying stopped not the same (Best et al, 2008)

### What enables recovery change?

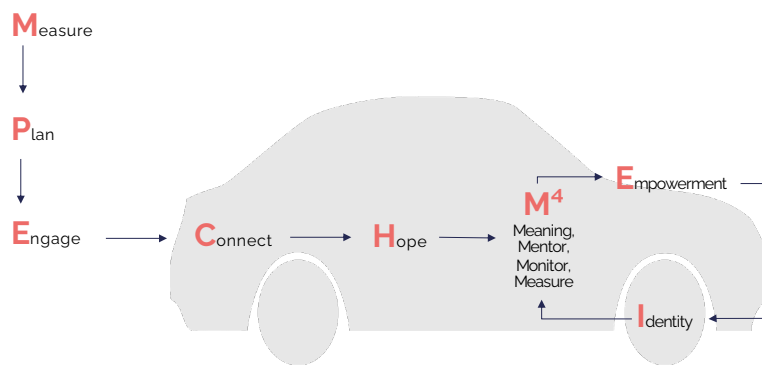
- Strength-based approaches
- Leamy et al (2011), British Journal of Psychiatry
- **CHIME**
  - **C**onnect**e**dness
  - **H**ope
  - **I**dent**i**ty
  - **M**eaning
  - **E**mpowerment



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## The Engine of Change - CHIME



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## Recovery studies in Birmingham and Glasgow – GOYA (Best et al, 2011a; Best et al, 2011b)

UK Study of recovery wellbeing –better recovery wellbeing predicted by:

1. More time spent with other people in recovery
2. More time in the last week spent:
  - Childcare
  - Engaging in community groups
  - Volunteering
  - Education or training
  - Employment



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## Best et al (2013): The role of abstinence and activity in promoting wellbeing among drug users engaged in treatment. *Journal of Substance Abuse Treatment*, 30 (4), 397-406.

The study assessed changes in meaningful activities in three English Drug Action Team areas over the course of one year  
Drug treatment participants split into four categories

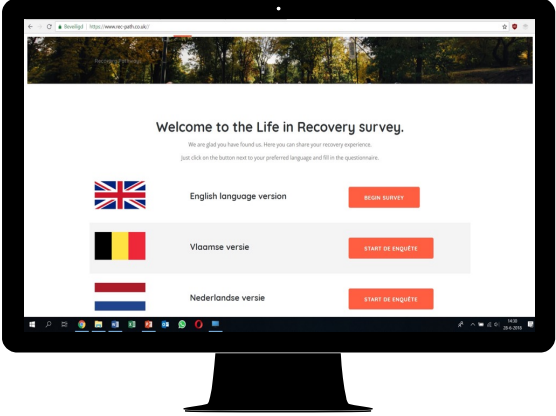
- initiated meaningful activities
- maintained meaningful activities
- stopped meaningful activities
- no meaningful activities


Quality of life and wellbeing higher (and more abstinence) in those who started or maintained meaningful activities  
Stopping associated with decreases in all three wellbeing measures



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LESSONS LEARNED FROM REC-PATH PROGRAMME OF WORK MARCH 25, 2021










**Life in Recovery Survey**


Together with people who have overcome an addiction problem, or who are working on this, we want to show that recovery from addiction is possible. We want to find out more about your recovery, because sharing your experiences can help other people with an addiction.

Go to [www.rec-path.co.uk](http://www.rec-path.co.uk) or scan the QR-code with your smartphone and complete a short survey.

Onderzoek naar welzijn, zorg & verslaving









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LESSONS LEARNED FROM REC-PATH PROGRAMME OF WORK MARCH 25, 2021

## Outcome Study Baseline and Follow-up Outcomes (n=313)

- Most domains showed strong stability from baseline to one-year follow-up, with greater stability for those at later recovery stages
- 10.4% reported problematic use of illicit or prescribed drugs at follow up: More male participants (14.4%) reported substance use at follow-up compared to females (8.2%)
- While only 1.5% of people in stable recovery reported last year use, this was the case for 17.6% of people in sustained recovery and 30% in early recovery
- There is better functioning for individuals whose recovery journey includes peer-based recovery support services
- They reported higher baseline levels of quality of life and social functioning, lower levels of justice involvement (at baseline and follow-up) and lower baseline levels of unmet need.
- Martinelli et al (2023): Relapse rates actually slightly lower in COVID and lockdown than in the previous year

Onderzoek naar welzijn, zorg & verslaving



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## Recovery Capital: The concept of capital

“Social capital, human capital, recovery capital and restorative capital are unlike financial capital in that they are not depleted through use. When you spend your money from the bank, you deplete your capital. When you trust someone, you do not deplete trust: trust tends to be reciprocated and this engenders virtuous circles of trust-building. A politics of hope is likewise redemptive as we face adversity; it is infectious”

(Braithwaite, 2022, p. 363).



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## What is Recovery Capital?

**Granfield and Cloud (2008) define recovery capital as**

*“The breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery from AOD [alcohol and other drug] problems.”*

• **White and Cloud (2008):**

*“Stable recovery best predicted on the basis of recovery assets not pathologies.”*



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**ROI**

## Best and Laudet (2010)

The diagram illustrates the Recovery Capital Model as a circular structure divided into three equal segments by a white Y-shaped line. The segments are labeled: **Personal Recovery Capital** (top-left), **Social Recovery Capital** (top-right), and **Collective Recovery Capital** (bottom). A thick red border surrounds the circle, with three red arrows pointing clockwise from the top to the right, from the right to the bottom, and from the bottom to the left, indicating a continuous cycle between the three types of capital.

TEF Gold  
Sensitivity: Internal

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## Logic of the model

- Recovery Group Participation Scale published in 2011
- Assessment of Recovery Capital published in 2012
- Too research focused, not enough clarity on how to use the answers
- REC-CAP initial paper (Cano et al, 2017) created a model that combined assessment with care planning and the recovery evidence base
- ARMS provided the platform that allowed this to be embedded in services and systems

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## Measure, Plan & Engage (MPE)




### REC-CAP EVALUATION

Measures seven (7) domains of Recovery Capital at 90-day intervals, reporting longitudinal growth over time







### RECOVERY PLANNING

Utilizes REC-CAP Results to suggest a Recovery Plan focused on resolving Barriers & Unmet Service Needs and building Recovery Strengths



### NAVIGATIONAL SUPPORT

Delivers a structured RSS where-in a Navigator mentors, monitors & measures Client's engagement in their Recovery Plan

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## REC-CAP Scales

Negative Recovery Capital <b>-62.5</b>	Positive Recovery Capital <b>50.8</b>	Recovery Capital Index <b>-11.7</b>
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Quality of Life & Satisfaction

Psychological health	10 (20%)
Physical Health	12 (20%)
Quality of Life	18 (30%)
Autonomy	14 (23%)
Support Network	7 (12%)

**53%**

Barriers to Recovery

Autonomy	
Substance Use	
Risk Taking	
Engagement with the Criminal Justice System	
Work, Training and Volunteering	


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Service Development & Needs

Involved & Satisfied	Involved & Dissatisfied	Not Involved	Not Satisfied
Drug treatment services	No	Not disclosed	No
Mental health services (Mental health services)	No	Not disclosed	No
Primary healthcare services (GP, medical services)	No	Not disclosed	No
		Alcohol treatment services	No
		Mental health services	No
		Healthy support	No
		Employment services	No
		Family relationships	No
		Other specialist help	No

Recovery Strengths

Community Capital	8 (26%)
Outside Support	18 (54%)
Commitment	22 (70%)






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## Suggested Goal Templates

- Suggested goal templates are *triggered* by client response to REC-CAP Evaluation.
- They are not prescriptive. The intent of goal templates is to facilitate an efficient recovery planning process.
- The Client/Navigator Alliance determines which goals to add to the current recovery plan and can then further modify those goals to meet the specific needs of the Client.

## Plan Goals

ADD CUSTOM GOAL    ADD MPE TEMPLATE    ADD OTHER TEMPLATE    VIEW CLIENT

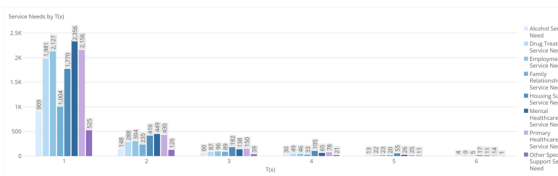
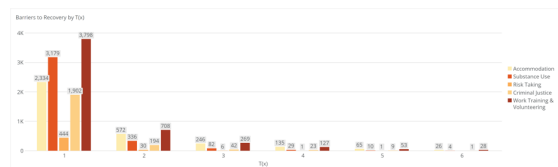
Barriers to Recovery & Unmet Needs			
REC-CAP DOMAIN	GOAL SUGGESTION	GOAL CATEGORY	ADD TO RECOVERY PLAN
Service Need	Career Development & Vocational Training	Employment Support	<input type="checkbox"/> <input type="checkbox"/>
Barrier	Acute housing problems	Accommodation	<input type="checkbox"/> <input type="checkbox"/>
Service Need	Housing Support	Housing Support	<input checked="" type="checkbox"/> <input type="checkbox"/>
Service Need	Mental Healthcare	Mental Healthcare	<input checked="" type="checkbox"/> <input type="checkbox"/>
Barrier	Higher Education	Work, Training & Volunteering	<input type="checkbox"/> <input type="checkbox"/>
Barrier	Volunteering	Work, Training & Volunteering	<input type="checkbox"/> <input type="checkbox"/>
Barrier	Employment	Work, Training & Volunteering	<input type="checkbox"/> <input type="checkbox"/>
Barrier	Ongoing Involvement with Criminal Justice	Criminal Justice Involvement	<input checked="" type="checkbox"/> <input type="checkbox"/>
Barrier	Recent Offending or Law Enforcement Involvement	Criminal Justice Involvement	<input type="checkbox"/> <input type="checkbox"/>
Barrier	Health Screening	Risk Taking	<input checked="" type="checkbox"/> <input type="checkbox"/>
Barrier	Recovery Plan Engagement	Substance Use	<input checked="" type="checkbox"/> <input type="checkbox"/>



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## Dashboards



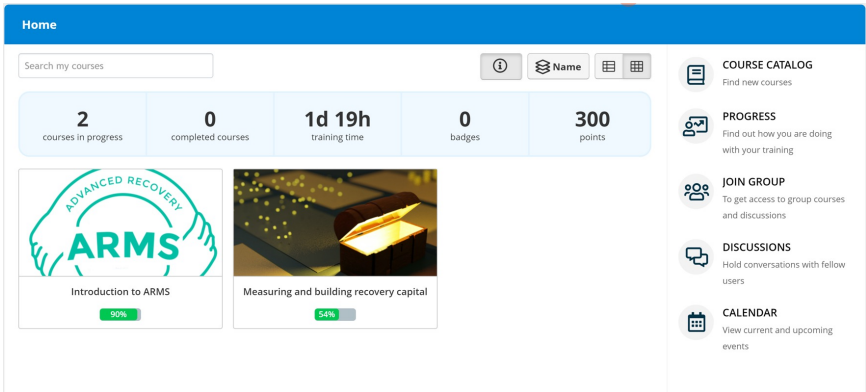
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# Learning Management System

- Access the LMS for on-demand training
- Accessible 24/7
- Courses can be accessed unlimited number of times
- Allows for consistency, scalability, and quick delivery of lessons





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## What is the point of the Engagement component?


- Identify and engage community assets
- Create pathways to prosocial groups
- Meet individual life needs and aspirations
- Build hope and strengths
- Personalised interests and activities compatible with skills and needs

## Connection to Community Resources







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## Connectors Results and Implications




21 connectors in approximately three months




134 community assets were identified




This was used to link people new to recovery into meaningful assets




To build personal capital, social and community capital, act as the scaffolding







This involves effective linkage to community groups




Using Community Connectors + Assertive Linkage + Ongoing Support












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## Manning et al (2012)

Problem	Trial Conditions	Outcomes
<p><b>Acute Assessment Unit at Maudsley Hospital:</b></p> <ol style="list-style-type: none"> <li>1. Low client meeting attendance rates while on ward</li> </ol>	<p><b>RCT with three conditions:</b></p> <ol style="list-style-type: none"> <li>1. Information only</li> <li>2. Doctor referral</li> <li>3. Peer support</li> </ol>	<p><b>Those in the assertive linkage condition:</b></p> <ol style="list-style-type: none"> <li>1. More meeting attendance on ward (AA, NA, CA)</li> <li>2. Reduced substance use in the three months after departure</li> </ol>

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**ROI**

## Community Connectors

**Who needs community engagement?**

- Those who are socially isolated and excluded
- Those whose networks are harmful to their recovery

**What steps are necessary?**

- 1 Asset Based Community Mapping
- 2 Training and developing community connectors
- 3 Preparing clients to engage with groups (and assessing their readiness)
- 4 Creating in-reach and out-reach models
- 5 Creating in-reach and out-reach models

Logos at the bottom: TEF Gold, VARR, NARR (National Alliance for Recovery Residential), UNIVERSITY OF DERBY.

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# Building an inclusive Recovery City

**Service Providers**

**Employment**

**Events & Activities**

**Education**

**Training**

**Recovery Community**

**B.R.I.M**  
Building Recovery in Middlesbrough

**S.T.E.C**  
SOUTH TEXAS EMPLOYMENT CONNECTIVITY

**YOUR RECOVERY COMMUNITY**  
A safe space to learn, share & grow

**Professional Recovery Coach Training**

**Recovery Ally Training**

**Alcohol-Free Socials**  
this September

Logos and images include: Recovery Community, S.T.E.C, B.R.I.M, Professional Recovery Coach Training, Recovery Ally Training, Alcohol-Free Socials, and a photo of a man.

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**Seed Sower**  
A 501(c)(3) Nonprofit

Nonprofit  
Social Enterprise

The Ecosystem



**FRUITS OF Labor**  
Café & Bakery  
Culinary and Agricultural Training Center

**Seed Sower**

- NARR Level III Housing
- Transportation
- REC CAP
- Recovery Support Services
- Group meetings
- Peer-Led Social Model
- 24/7 onsite Peer Recovery Support
- Pro-social networking
- Community engagement and service

**Fruits of Labor**

- American Culinary Federation certified Quality Program
- Training from 12 weeks up to Chef
- Culinary certifications
- Recovery-friendly workplace
- On-site peer recovery support
- 85% program completion rate over 10 years



Seed Sower Village — Dawson, WV  
(Women only)



**Additional support:**

- Workforce development agency (WorkForce WV)
- Rural recovery support and assistance (The Fletcher Group)
- Federal Agencies (Appalachian Regional Commission)
- Behavioral health care providers
- State Bureau for Behavioral Health
- Housing assistance organizations
- Education (WV Adult Ed)




Sensitivity: Internal







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# R1 DISCOVER

PLANNER

## Recovery Capital Plan


What am I building to sustain my recovery?


Uses the R1 Recovery Capital Model by Dr. David Best

**ACTIONABLE  
STRUCTURED  
RELEVANT**


INCLUDES:


- Recovery Capital Toolkit Overview
- Recovery Capital Plan (Sample)
- Recovery Capital Plan (Blank)






Sensitivity: Internal







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# CREATING WAYS OF CO- PRODUCING RECOVERY OUTCOMES







Sensitivity: Internal







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## Recovery Capital Dimensions

















Sensitivity: Internal







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## Future directions

- British Academy / Leverhulme Small Grant to test a recovery care planning manual using node link mapping
- This will be one of a series of manuals that are based on the principles of node link mapping to support recovery pathways
- Development of a series of instruments to test recovery engagement and readiness at the level of:
  - Client (REC-CAP)
  - Peer worker (Worker REC-CAP)
  - Manager / organisation (O-REC-CAP)
  - Affected other (H-CAP)



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## Thank you to:

Dr Dwayne Simpson  
 Dr Pat Flynn  
 Dr Don Dansereau  
 Dr Kevin Knight



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## Key concepts and conclusions

- CHIME
- Recovery Capital
- Contagion and community
- Cascades
- Collective and personal efficacy
- Redemption narratives and the overlap with desistance theory
- ROSC and community transitions



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# Thank you!

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