**Working Definition of Recovery**

*Recovery from alcohol and drug problems is a process of change through which an individual achieves abstinence and improved health, wellness and quality of life.*

**Guiding Principles of Recovery:**

**There are many pathways to recovery.** Individuals are unique with specific needs, strengths, goals, health attitudes, behaviors and expectations for recovery. Pathways to recovery are highly personal, and generally involve a redefinition of identity in the face of crisis or a process of progressive change. Furthermore, pathways are often social, grounded in cultural beliefs or traditions and involve informal community resources, which provide support for sobriety. The pathway to recovery may include one or more episodes of psychosocial and/or pharmacological treatment. For some, recovery involves neither treatment nor involvement with mutual aid groups. Recovery is a process of change that permits an individual to make healthy choices and improve the quality of his or her life.

**Recovery is self-directed and empowering.** While the pathway to recovery may involve one or more periods of time when activities are directed or guided to a substantial degree by others, recovery is fundamentally a self-directed process. The person in recovery is the “agent of recovery” and has the authority to exercise choices and make decisions based on his or her recovery goals that have an impact on the process. The process of recovery leads individuals toward the highest level of autonomy of which they are capable. Through self-empowerment, individuals become optimistic about life goals.

**Recovery involves a personal recognition of the need for change and transformation.** Individuals must accept that a problem exists and be willing to take steps to address it; these steps usually involve seeking help for a substance use disorder. The process of change can involve physical, emotional, intellectual and spiritual aspects of the person’s life.

**Recovery is holistic.** Recovery is a process through which one gradually achieves greater balance of mind, body and spirit in relation to other aspects of one’s life, including family, work and community.

**Recovery has cultural dimensions.** Each person’s recovery process is unique and impacted by cultural beliefs and traditions. A person’s cultural experience often shapes the recovery path that is right for him or her.

**Recovery exists on a continuum of improved health and wellness.** Recovery is not a linear process. It is based on continual growth and improved functioning. It may involve relapse and other setbacks, which are a natural part of the continuum but not inevitable outcomes. Wellness is the result of improved care and balance of mind, body and spirit. It is a product of the recovery process.

**Recovery emerges from hope and gratitude.** Individuals in or seeking recovery often gain hope from those who share their search for or experience of recovery. They see that people can and do overcome the obstacles that confront them and they cultivate gratitude for the opportunities that each day of recovery offers.

**Recovery involves a process of healing and self-redefinition.** Recovery is a holistic healing process in which one develops a positive and meaningful sense of identity.

**Recovery involves addressing discrimination and transcending shame and stigma.** Recovery is a process by which people confront and strive to overcome stigma.

**Recovery is supported by peers and allies.** A common denominator in the recovery process is the presence and involvement of people who contribute hope and support and suggest strategies and resources for change. Peers, as well as family members and other allies, form vital support networks for people in recovery. Providing service to others and experiencing mutual healing help create a community of support among those in recovery.

**Recovery involves (re)joining and (re)building a life in the community.** Recovery involves a process of building or rebuilding what a person has lost or never had due to his or her condition and its consequences. Recovery involves creating a life within the limitation imposed by that condition. Recovery is building or rebuilding healthy family, social and personal relationships. Those in recovery often achieve improvements in the quality of their life, such as obtaining education, employment and housing. They also increasingly become involved in constructive roles in the community through helping others, productive acts and other contributions.

**Recovery is a reality.** It can, will, and does happen.
Description of Systems of Care Elements

Recovery-oriented systems support person-centered and self-directed approaches to care that build on the strengths and resilience of individuals, families, and communities to take responsibility for their sustained health, wellness and recovery from alcohol and drug problems.

Systems of Care Elements

**Person-centered.** Recovery-oriented systems of care will be person-centered. Individuals will have a menu of stage-appropriate choices that fit their needs throughout the recovery process. Choices can include spiritual supports that fit with the individual’s recovery needs.

**Family and other ally involvement.** Recovery-oriented systems of care will acknowledge the important role that families and other allies can play. Family and other allies will be incorporated, when appropriate, in the recovery planning and support process. They can constitute a source of support to assist individuals in entering and maintaining recovery. Additionally, systems need to address the treatment, recovery and other support needs of families and other allies.

**Individualized and comprehensive services across the lifespan.** Recovery-oriented systems of care will be individualized, comprehensive, stage-appropriate, and flexible. Systems will adapt to the needs of individuals, rather than requiring individuals to adapt to them. They will be designed to support recovery across the lifespan. The approach to substance use disorders will change from an acute-based model to one that manages chronic disorders over a lifetime.

**Systems anchored in the community.** Recovery-oriented systems of care will be nested in the community for the purpose of enhancing the availability and support capacities of families, intimate social networks, community-based institutions and other people in recovery.

**Continuity of care.** Recovery-oriented systems of care will offer a continuum of care, including pretreatment, treatment, continuing care and support throughout recovery. Individuals will have a full range of stage-appropriate services from which to choose at any point in the recovery process.

**Partnership-consultant relationships.** Recovery-oriented systems of care will be patterned after a partnership-consultant model that focuses more on collaboration and less on hierarchy. Systems will be designed so that individuals feel empowered to direct their own recovery.

**Strength-based.** Recovery-oriented systems of care will emphasize individual strengths, assets and resiliencies.

**Culturally responsive.** Recovery-oriented systems of care will be culturally sensitive, competent and responsive. There will be recognition that beliefs and customs are diverse and can impact the outcomes of recovery efforts. In addition, the cultures of those who support the recovering individual affect the recovery process.

**Responsiveness to personal belief systems.** Recovery-oriented systems of care will respect the spiritual, religious and/or secular beliefs of those they serve and provide linkages to an array of recovery options that are consistent with these beliefs.

**Commitment to peer recovery support services.** Recovery-oriented systems of care will include peer recovery support services. Individuals with personal experience of recovery will provide these valuable services.

**Inclusion of the voices and experiences of recovering individuals and their families.** The voices and experiences of people in recovery and their family members will contribute to the design and implementation of recovery-oriented systems of care. People in recovery and their family members will be included among decision-makers and have oversight responsibilities for service provision. Recovering individuals and family members will be prominently and authentically represented on advisory councils, boards, task forces and committees at the Federal, State and local levels.

**Integrated services.** Recovery-oriented systems of care will coordinate and/or integrate efforts across service systems to achieve an integrated process that responds effectively to the individual’s unique constellation of strengths, desires and needs.

**System-wide education and training.** Recovery-oriented systems of care will ensure that concepts of recovery and wellness are foundational elements of curricula, certification, licensure, accreditation and testing mechanisms. The workforce also requires continual training, at every level, to reinforce the tenets of recovery-oriented systems of care.

**Ongoing monitoring and outreach.** Recovery-oriented systems of care will provide ongoing monitoring and feedback with assertive outreach efforts to promote continual participation, re-motivation and reengagement.

**Outcomes-driven.** Recovery-oriented systems of care will be guided by recovery-based process and outcome measures. These measures will be developed in collaboration with individuals in recovery. Outcome measures will reflect the long-term global effects of the recovery process on the individual, family and community, not just remission of biomedical symptoms. Outcomes will be measurable and include benchmarks of quality-of-life changes.

**Research-based.** Recovery-oriented systems of care will be informed by research. Additional research on individuals in recovery, recovery venues and the processes of recovery, including cultural and spiritual aspects, is essential. Research will be supplemented by the experiences of people in recovery.

**Adequately and flexibly financed.** Recovery-oriented systems of care will be adequately financed to permit access to a full continuum of services, ranging from detoxification and treatment to continuing care and recovery support. In addition, funding will be sufficiently flexible to permit unbundling of services, enabling the establishment of a customized array of services that can evolve over time in support of an individual’s recovery.