

## MEANINGFUL CONNECTIONS: ENGAGING COMMUNITIES TO PROMOTE RECOVERY

Good afternoon everyone and welcome to today's Recovery to Practice (RTP) webinar, titled Meaningful Connections: Engaging Communities to Promote Recovery. My name is Elizabeth Whitney and I am your host today. After housekeeping and a short introduction, we will begin the presentation. On behalf of the Substance Abuse and Mental Health Services Administration and the Recovery Practice Team, we would like to welcome you all and thank you for joining us. We have over 100 people who have already joined us and we expect that that number will grow and I've seen from the lobby and from our math that we have people from all over the country so that's very exciting. I would also like to thank our presenters, Susan Manzo and Bruce Anderson for sharing their knowledge and experience with us today. Some housekeeping, at the bottom of your screen you will see a download materials box where you can download our presenter's biographies as well as a PDF of the presentation slides at any point during the presentation. At the end of the session, you will be able to download a certificate of attendance that you can use to apply for continuing education credits with your professional association. This webinar has been preapproved for continuing education by NAADAC, the Addiction Professionals' Association. To qualify for these education hours, you must attend the full webinar and you will need to complete a brief quiz at the end and an evaluation. We will give you some more information about this at the end. Everyone will be given an opportunity to provide us with feedback and we really value that so please take a few moments to complete that survey. Finally, if you have registered the webinar you will be emailed a link to view the archive recording and this link will also be available on the RTP website.

This webinar series is hosted by SAMSHA's Recovery to Practice. The overarching goal of this initiative is to improve the knowledge and the ability of the behavioral health work force to use the recovery oriented practices every day. In 2011, SAMSHA released a working definition of recovery and a set of guiding principles that incorporate aspects of recovery from both substances abuse and mental health issues. SAMHSA's definition of recovery and behavioral health is "a process of change through which individuals improve their health and wellness with a self-directed life and strive to reach their whole potential". The ten principles of recovery shown on this slide along with the four dimensions of recovery which are Home, Health, Community, Purpose form a solid foundation for developing recovery oriented lives and for building recovery oriented services and systems that are necessary to support them. SAMSHA's Recovery to Practice initiative helps you to turn these principles into workplace practices. RTP offers a set of discipline based curricula to promote understanding the uptake of recovery principles and practices. Developed by these six professional disciplines for educating their membership about recovery and behavioral health, these materials are adaptable for use by other disciplines in organizations seeking to build a recovery oriented work force. Links to these are available at SAM's RTP website. And now RTP is expanding its disciplined focus to embrace multi-disciplinary settings and integrated settings. Those of us working in behavioral health or

integrated health care organizations we have an opportunity every day to promote wellness and recovery. We can powerfully communicate hope for recovery and self-care and wellness in how we approach our work. RTP can help you strengthen recovery oriented your practice through free webinars, training assistance. Today's webinar will provide information on the value of hoping to build welcoming places in communities, and who benefit the both individuals in recovery and communities at large.

I would like to introduce our speakers for today. Susan Manzo is the executive director for Youth in Mind, a California based, non-profit organization, founded and steered by youth in the mental health system. As an advocate, educator and organizer she speaks to the injustices affecting vulnerable families and young people within systems of care. She dreams of a day where neighborhoods can share resources, restore justice and speak peace to one another, striving to keep people out of systems and thriving in communities. Her experiences as also a third generation foster care survivor and a psychiatric driver, have empowered her to develop and deliver approaches for systems change in both mental health and child welfare. Recently attending the Harvard Kennedy School of Government as a fellow, with the new organizing institute, Miss Manzo studied under Professor Marshall Mann. Grappling with the of front line communities upholding social wellness as a core value in social justice and liberation. As an artist miss Manzo strives to bring holistic healing and creative art into her work.

Bruce Anderson is managing partner in Community Activators and lead trainer. Community Activators mission is to implement innovative social service education and community development practices across the United States and Canada. In addition to rehabilitation administration, Bruce brings a unique experience, including being mayor of a town, teacher, manager of social service agencies and a commercial fisherman. He is known for bringing intriguing ideas from other cultures and times, personal stories and practical ideas into the workshops he leads. He is the author of the *Teacher's Gift* and two other CD's...*Hope at Work*, *Leading Positive Resilient Organizations* and *Our Door is Open*, creating welcoming cultures and helping organizations.

Without further ado, I'd like to turn the presentation over to you.

### **Susan Manzo**

Good morning from California. It is really beautiful to see the diversity out there. I would like to thank SAMHSA, for putting this together, and helping us to be able to be reached out to, when I heard the title was about meaningful engagement. "Engaging Communities to Promote Recovery", that is not just my story wrapped up into a sentence, but is also the story of our organization.

A little bit about me, and my advocate journey, I was born into a system, multi-system impacted, I was two months when I entered the child welfare system, and I am a survivor of generational struggles with poverty, bipolar runs heavily in my family, and addictions, I was the fifth born to my biological birthmother. I want to start with her. This is the first picture, the first one I thought of my mother, I was in a pilot project at 22 years old, and family finding through child welfare was really going to kick off, and they wanted to work with advocates, who had been

working with them but did not necessarily have what they call permanency, a connection to your birth family or someone that maybe is at your community. A bit more about my story, I was adopted out of the system about for a decade before I reentered as a teenager and at the time I was adopted, it was closed adoption, so when they approached me they and wanted to engagement family finding, I was absolutely of course. But also good luck. Any of those who might be adoptees out there, it is challenging to find who you are, what your connection is, what your story really is. All I ever knew, my mother at that time was diagnosed with schizophrenia, and she couldn't take care of us, there were five of us born, I was the end of five, and we all went into child welfare. Fortunately, I did get connected, with her when I was I was 22 and I saw this picture of here. Of all five of us, I am the most that looks like here and have the same personality and the same sort of hope and drive and passion and we are still connected to this day. Unfortunately, I spent the most time in systems and experienced the most trauma out of this whole thing. On the flipside of that, I really understand what it means to have lived experiences, what it means to struggle, what it means to recover, what it means to engage in systems. My connection with my birth mother is profound. She has active episodes, she goes in and out of systems, and so we are able now that all the siblings are connected with our birth mother to be able to support her in a different way that we never have been able to.

I want to talk a bit more about my moment of change which I aged out of aftercare at 18, and had nowhere to go, I didn't have much direction at that time I had no family, no community support. However, at the time California had passed a proposition called Prop 63 which is the mental health service act and there is a lot of engagement with in systems so one of my workers, said there is this community that would be really great and I went in and I was the only young person there. It was more of an integrated setting, there were a lot of directors, there were a lot of program managers, definitely was not a place for a young person or a youth engagement.

Towards the end of the meeting, the co-chair or the chair at the time, was the director of mental health, she asked a question, let's hear from the youth, they were making all these decisions, and I was very green at the time, and I just said what your youth? I made a point we were right across the street from the largest high school in the district, I was the national organizer before I knew community organizing or engagement truly was. The director was pretty impressed with how direct and straightforward I was, and she asked me to co-chair the meetings. That started my journey and transformation. From there, a lot of community-based organizations and nonprofits reached out to me. The powerful thing is that it was really about the community and shared experiences I found in these experiences, that gave me the hope and the passion of where I am now. Which is leading with the team of very profound and dedicated and resilient young people. We call it "Youth in Mind".

And want to talk a little bit about hope because the first time I was an attempt survivor was at the age of 13, and really that was because of the lack of resources and access, and community spaces, that I felt really alone. I am a big person about having positive affirmations, or trying to remember the message of hope. This is something that is near and dear to my heart, and I think that sometimes I feel sometimes in the dark spaces, we do not always remember that we have something the world needs. When we are in dark spaces, whether it is you yourself or you are helping someone who has an addiction and you're trying to lead them to a transformation, even when it rains, look for rainbows, when it is dark look for stars. I also want to refer to a powerful

resource, that you will get out in your email, if you do not necessarily get it now, and you want to look at it now it is on the SAMHSA website, it is called a “Journey Towards Health and Hope”. It is a handbook that has been made by attempt survivors, very powerful, it is a very work bookie, has personal stories by other attempt survivor's. They have different questions and guides that are really about how to ask those courageous questions, or how those questions can be asked of you if you're just out of the hospital, what you may be able to prepare for yourself for a while. What you may be able to prepare yourself, while starting back on that recovery journey.

Who are we. A little bit about who the organization is and an introduction: We are a grass roots nonprofit, steered by young people ages 12-28, our young people are engaged from everything up from program development, to even our governance. We make all of our decisions with the young people, even as far as writing grants, we have a big emphasis on education and skill building, so that young people can be able to have the skills and the confidence to be able to engage when we are making a strategic direction and this comes from the fact that we started out as a grass roots coalition.

This comes from the fact, we started out as a grass roots coalition, and there were literally 12 of us in the room with the youngest age 12 and the oldest 28 -- and from the community where there was a need of having that cross generational mentorship. Our mission is to transform the lives impacted by the mental health systems in California through education, advocacy, and collaboration, most of our work is around empowerment education, to build the skills so that we have effective advocates that are making partnerships and key decision-makers.

Check out our website here yet://yimcal.org. I have talked a lot right now; I want to take a break. I would love to know how much you all are engaging your constituents, or any decisions that impact policies. I want to get a temperature feel.

#### POLL QUESTION

Few more responses coming in. There is a bit of a range still happening, however anywhere from 55% to 65% of you say yes. There is about a fifth of you, about 20% say no. And then maybe 15% saying not really sure. I'm really excited that there are some folks out there about 60% of you, that are engaging your constituents, into direct decisions, and about 35% to 45% of you, that are really not very sure, or have not taken that step yet. This whole presentation is talking about how we engage young people. Really about wellness, building themselves holistically, and really starting to understand how to be able to direct us organizationally.

I talked a bit about leadership development and systems transformation. That is sort of our tagline, that is our niche, mainly through collaborating and partnering with other organizations. Building advocacy skills and educational skills is the core of our programs.

I would love to give some of the faces, this is statewide audience at one of our conferences, we do a lot of workshops in the leadership, this is really the heart of what our people do, to connect with others, who are in Stigma free spaces, everything we do is about parallel process.

This is meaning that we are learning as we are doing, everything that we learn we put into practice, our framework is really about having holistic transformation change, and we look at that individually, collectively as a community, and on the systems level.

So the first thing I really want to talk about is learning organization, really it is about a theory. I will give you sort of a theory that access, then real-life examples of what this looks like.

Learning organizational theory, in simple terms really means, that you are an all learning, and an all-purpose healing organization, thinking about individuals and participants, that get engaged, and also thinking about the community, and your mission impact, and you are also thinking about systems change both internally and within the organization and externally. What this means in terms of working with young people, we start with the very core of getting to know them, building relationships, having new wellness planning, even teaching them. Often times our young people are coming from communities that don't necessarily talk about wellness, and do not uphold it. We break down about what is wellness, what is resiliently, what is trauma and what is grief. We start there and start to build personal or professional goals they might have. We provide executive coaching for young people. We try to put support networks around them thinking holistically about how to wrap education, support, and knowledge and skills around those that you are working with to effectively give them the personal mastery and engage them in the shared vision of making decisions. Starting to get them to think about what type of shifts need to happen. I talked a bit about resilience, if some of you have never heard the term, simply it is about never giving up, being able to bounce back from hardship. Here are some domains, to think about resilience from whether it is around social, education, friendship, your community, directing young people based on their talents, interests and their positive values. Here is a great image. These will really be visual oriented, we do these trainings with young people to start to think about behavioral health, and really about trauma and grief, resilience and their own way. We do not necessarily think of loss, grief, in linear way, but a circular way. This is a great wheel in case anybody has not seen this before, talks about when you are not processing your loss. You might be going in this circle, to the right hand side, there is a deterioration, what that looks like, not sleeping at night unable to eat, maybe you are crying, loss of appetite, some of those ways when we are starting to get escalated in how it impacts our body. Really this image talks about when you are able to process it. How you are able to start moving towards the recovery process.

Recovery comes from mechanical engineering, when people are building infrastructure or builds bridges, when it is starting to break, the point when a structure is about to break and so psychology adopted that and putting it toward human development and our ability to recover. That really brings me to Maslow's law. We talk about the pyramid of human needs. Often times we need to build pathways of leadership for our young people especially around wellness, some people may be homeless, and maybe experiencing poverty. They may be in different parts of their development. We even talk about Maslow's law, to talk about physiological needs met, and what it looks like, housing, food, water, how you need to fill a secure environment, we are trying to make goals along the journey, making sure domains are effectively taking care of, so that we are getting to the self-actualization of the pyramid of human needs.

I just want to refer you to the eight dimensions of wellness, we have a lot of activities that break down and most of the way we are able to take this from educational based, we make it are based,

incremental stages. There are a lot of activities, and some of the instructions that are incorporating art into this. I have about two minutes left, and then I will pass it on to my co-presenter, I will briefly talk about stakeholder theory, this is a good image to talk about having organizations think about who are the stakeholders. Main stakeholders are the young people that we work with, and then we have a lot of secondary stakeholders, we use this to think about how to structure within our membership so that whenever we are making critical decisions, resources that we are getting, communities we should be focusing on, areas we should be doing. We have a team of young people across the state that work with us to direct those decisions. I am almost done on time, but I want to briefly talk about interdependence, building organizational structures for well-being, I will go through this very speedily, part of my learning, and my bio, I have this common form of leadership, also I call it Lone Ranger leadership, or the identified leader. There is just one leader making all of the decisions. We are all leaders.

We always have minimum of two people or more, even when we are in our think tank, planning an event, conferences or things, or maybe the person that has an idea, forming a team around them and based on their strengths and interests, they may have a domain of the planning or programming, decision-making, then building teams. This is an illustration, to that interdependent leadership.

Without further ado, I can answer more questions, but I would like to pass it over to Bruce Anderson, I will give him just a moment of tech time to come on stream and un-mute.

**Bruce Anderson:**

Hi, I'm here good morning and good afternoon to everyone depending on where you live, thank you Susan that was really great.

I want to spend 20 minutes or so, from a little different perspective.

My recovery comes from someone does not have the experience of being in recovery, but the most important underlined yearning in all people in recovery, that is to lead a whole healthy, healed life.

Walked off the fishing boat 25 years of my and unsure of what I would do with the rest of my life, and walked into an agency to volunteer, through a set of circumstances -- I became director of that organization, and things were going along fine, but I was falling asleep at my desk, I made a series of trips from Alaska, where I was working in that organization down to a neurology department, after three trips, no one could find out what was wrong with me. Until I went to a therapist, it took the therapist less than one half hour to figure out what was wrong with me. I was working in an organization that was supporting people, who were at serious forks in the road in their life, for many different reasons, to change their life and to be a healing part of our community.

It was triggering my own stress and my own PTSD around my own story. I didn't know that was happening. I was blessed to sit with someone to help me understand that, I was really sick in my teen years, out of school a lot, lost all of my relationships and friends, I became very alone in the

world, for me. I tried to move past that, of course until you deal with the story, you cannot move past it. Working in that organization with people who were trying to belong, triggered my own story of not belonging. Until I figured it out in my life, things did not get better.

Our organization called “Community Activators”, is about belonging and we work with all different types of individuals and groups, who are trying to make a community welcoming for everyone. About a third of our work is in the mental health movement, is now called recovery movement. I come from it in that perspective, recovery may be, recovery may not be enough. Maybe there is something else after recovery? I want you to read the statement and tell me your response, just in one word to that statement.

Adopted by many individuals it is a very good thing, but it will not and will not be able to get us to the goal of full participation of recovery in their communities. What is a one-word response you have to that statement?

Interesting. A lot of positive statements and agreements to the statements and a lot of supportive words around the idea of community building and empowerment. Success, the largest two words are “true” and “agree”.

The group around recovery not being the end of the road, comes from a bone language that all of us have, in the end we have need each other, in the end it is not about individual healing, in the end it is about the community. Going back to a full screen here. A farmer from Kentucky, a wise man named Wendell Berry, I believe a place that the community in the fullest sense, a place and all of its creatures, is the smallest unit of health, and to speak of the health of an isolated individual is a contradiction in terms.

We have to work with ourselves and be with each other, community builders think of it like this, two basic ways to move forward, one, a personal preparation model, where one does things to prepare and activate themselves to be a part of a group or relationship, a community. They may go to school and learn a trade, join a recovery group, they may seek out active friendships. Everything they do is to prepare themselves to join a group.

There is an exact opposition force, going in the exact opposition, and we call that community focused welcoming and it's when a group reaches out to include people. The people do not have to do anything, does not have to prepare, doesn't have to be better in any way, the group says here, come be a part of us. That has a different ring and feel to it, the idea is, both the top and the bottom are necessary.

The example of community focus welcoming, maybe a school to eliminate special education classrooms, to have all students in the same classroom, it may be a church that decides to welcome everyone, it may be a workplace that decides to be beyond the surface level of diversity and to talk about what it means to share power and decision-making out of both fair and productive level in an organization.

If the recovery movement is going to expand, one of the ways to think about it, we have to get in nowhere near are we there, but we have to focus more on the community focused welcoming model.

There are two ways to do that. One, to approach the community through recovery initiated focuses. Those might be starting recovery groups, starting more recovering groups, creating more groups for people in recovery, or the focus could be on people being a part of the community.

The other way to approach community focused welcoming, is to have no focus on the recovery group, then to say what would it make, what would it take to make it better for everyone? Increased transportation? Churches opening their doors more fully, joining different coalitions, for improving parks are general well-being in a community. We need to get the word out for recovery, and we do not need to speak of recovery, but actively engaged in things residents of communities without a focus on recovery.

There are couple of things I could think of to do that, it sends a message, everyone in the community needs to belong. It doesn't pit one group against another for resources, I work and a lot of communities where youth are fighting for dollars with other groups.

Also people hidden from your cause, increasing problem solving, we can walk down the street, and we can ask the first 10 people, who is responsible for people who don't have a place to sleep tonight. Likely most everyone you ask, the social service agencies, or the city government.

It is not until people in residence and communities take back the responsibility, and feel they are part of this welcoming community, that you get this community action going.

Want to do a poll based on the slide that we just showed you, I am what -- Wondering, which one of the four is most useful to you as you look at them and vote? We have a trend going here. In the top one, everyone needs to belong.

This taps into the wisdom, bone level wisdom, this cannot be just about recovery, we cannot get there without focusing on the whole community. This is great. I want to quickly give five examples of the other side of the fence, when we switched the idea, that we can work on community issues, and at the same time, benefit people in recovery who are included in those initiatives. Quickly five things.

The first one I mentioned already, approaching schools not from creating higher-quality plans, or people in behavioral health classrooms for instance, but a more welcoming higher quality school in general? I was part of a group outside Ottawa Canada, a school district that was being sued for discrimination on a lot of different levels, including the way their behavioral classrooms were set up, and the way that recent immigrants at that school district were being treated and rather than trying to identify each issue, they got some coalition community movement, from a wide span of interest from 90 students 15 from six different schools, together they spent the date to talk about how to make the whole school more welcoming, there were students from behavioral classrooms, all different kinds of students mixing it up, solving the problem to create a more

welcoming school. Each school decided on three things that they were going to do. The 15 students that had come representing their school, took responsibility as an action group, to get that going.

We also think about schools from six different perspectives, it is a lot of people, more than just people saying hi to come you can do those areas, that will make the culture of the school more welcoming. The second example has to do with the Chamber of Commerce, 60 or 70 social service agencies, including mental health agencies, in Tahoe Valley in California, they were trying to engage more with the business community, who up until that time, the basic relationship was asking the business community to participate for donations and participate in raffles. The human service agencies wanted more of a connection. The head of the human services coalition sat down with the chamber of commerce president and they tried to come up with one word to join their interest. The one word was welcome.

That spawned Tahoe Valley We're a Welcoming Place initiative, every business can use this tool, it was self-administered, if you scored above a certain number, you got a giant decal, to stick in the front of your business, if you are walking through a community, and you would walk door-to-door, you would see this decal in the door of businesses, they were trying to build a culture of welcoming.

In the human service agencies, to get the help of the business community to mutually work on issues, that were of interest to both social service agencies, and the business community, one of them was not to rely on the social service agencies and the police downtown. Particularly on homelessness.

They have two antidotal stories, working on a better relationship and a working culture and their communities, many times business people were taken it upon themselves, to help people, and not just calling on human service agencies. The third idea was to expand beyond the strength-based and recovery model to a gift-based model. Systems are fond of strengths; they are a good thing. As systems and government change from talking about what is wrong with the person and what needs to be fixed, they made lists and categorize things as to what was working, it is a really powerful thing, this only gets us halfway there. When people are at serious forks in their lives, they tend to not just use their strengths, but their attributes called gifts.

There are three different types of gifts, gifts of wisdom which are gifts information from outside of us that can change the course of our lives including other people and spirituality, gifts from passages, which are the strengths we get from going through difficult times in our lives, and gifts of talent, which are genetic gifts, our bodies and minds are set up to do other things better than other people. There are tools available and if you email me, I can send you some. There is a wealth of information on a website about this idea.

Switching from a strength model to a gift model is a powerful way to send message of hope and capacity to someone who is at a fork in the road of their lives. Interestingly enough, it matters for the same reasons that we say recovery matters. Gifts matter because of hope, because of authority, because of belonging, and because of wellness. The second thing is to start a welcoming action group. A man in our town was interested in creating opportunity for students

in special education, instead of doing that, he asked a question, what about creating a community for everyone in our town? At the end of every event, at the end of every event, who is the most welcoming person you know? He collected 17 people, all of whom had an interest in welcoming, and we started what we call the welcome Vashon initiative, in our town, we held a welcoming even in our town, we didn't know if anybody would show up or not, out of the 165 people showed up, 24 projects came, 19 were completed, if you are doing community organizing, you know these are really good odds, we all moved on to different initiatives, the welcoming community initiative lasted , you can find out more information at WelcomeVashon.net, you can peruse that website.

You can look at all of the slides and download.

The fifth thing, leave to learn, one of the things to innovate you have to get out of your own bubble, you will find these websites all of the information when we create whole welcoming communities, where do we start and how do we do it?

I want to close down. Before I do that I want to refer to someone who has been in the teacher of mine, Parker Palmer, who has said the basic questions we need to answer in our lives, as individuals. How are we going to live divided no more? I appreciate your questions.

**Elizabeth Whitney:**

Bruce First thank you for your presentation, thank you Susan, -- For such rich material.

Then going beyond thinking about working with individuals to addressing communities, and organizations in communities, you're both personal stories, both of your personal stories and material spoke eloquently about the critical value of belonging in the community, creating hope and sustaining hope thank you for that.

I would like to take a few moments to ask you a few questions, Susan I will like to start with you. You described some very clear aspects of how your group approaches your work and it sounds like a very well-developed culture, you also talk about your work being collaboration with other agencies, I'm curious on how you do that, how do preserve the culture of your organization and, engaging with organizations that you are collaborating with?

**Susan:** In a very similar approach that we work with our young people. We do the same people within the agency that wants to partner with us and we never take away from the visioning part which I think is awesome once often when we get higher up to leadership, maybe we start to lose that grassroots driven culture, you go into a meeting, and you talk about loosely what the vision is and what numbers might be, we stop people there. We actually engaged with them, to work with a team of young people. We make it very think tank like, Bruce talked about the gift buckets, really like what gifts does your organization has? Then once we get clear on what that is, we actually start getting into more of, how do we be real with developing youth contracts, and how we will share this? Going into grant writing, or as simple as program sharing. As we start getting into the MOU's, or contracts and sharing grants, that is talking more about resource sharing, or partnering, or program ego, can get in the way. We just talk really upfront and

honestly. Being transparent, and really the key part is not letting that visioning aspect go, not making decisions without those most impacted.

**Elizabeth:** It sounds like you live your values. Can you give an example of the types of collaborations and partnerships? Some concrete examples of this?

**Susan:** Sure. There is one county that we work with that is great in Northern California, very close to the Oregon border, Humble County. Perhaps because they are small, they are able to move things quickly, it is very relationship-based, and it is a part of illustration of their values, they always bring people to the table, integrated services, and they have this huge in every part of their aspect. Nothing, even if it is a revision of a contract, they still review it and give feedback. We do a lot of workshop building with them, what is common contract language, so that we can be effective at the table. Really it is all about their voices, and what their local community's needs.

**Elizabeth:** That's great, that reminds me, you stated you had a hard time following the chat, people were responding to this notion of what we mean about involvement and constituents and that is what you describing.

Bruce, a couple of questions for you as well. The first one has to do with advocacy work, when you are talking about community welcoming, there are so many possibilities. So many options. How do you know where to start?

**Bruce:** I think there are a couple of ways to start, we have had great success just by a man named Dan Kaufman in our community, creating opportunity for kids in high school to have more to do after school, they were very isolated and he decided to switch to thinking about how can we create more things for everyone in our town to do. He said who is the most welcoming person you know? Then Dan contacted that person, in a very short period of time he collected 17 people from all walks of life, all of whom had interest in welcoming, we met monthly over soup, and after a couple of months, we decided to see if anyone else was interested in our town, we thought maybe no one would show up on a Saturday morning. 165 people showed up. All of whom wanted to do something to make our community more welcoming. It was the zero money. Very little effort. And 24 ideas, workable ideas of things to do. What I didn't say, that I want to say, one of the dilemmas we get in when you try to measure this community action, someone would say how many people in recovery were involved in those things? What I can tell you there were a lot of people in recovery involved, the beautiful thing about it they were participating in a general way, to make our community better.

It also goes to the end result we are looking for this whole healthy community.

**Elizabeth:** That makes a lot of sense. Have you had experience of people in recovery, working on their recovery, as promoters or instigators of ideas? Of community ideas?

**Bruce:** As long as they make the shift from this being about recovery to this being about belonging. When people hang on to this being an on belonging, you cannot do the community stuff, it is always the point they want to make about recovery, you have to give up the need and

the constant need to talk about that, to switch gears, and get into maybe I am part of something bigger in my town, maybe about full communities. Both are important, but involve a different set of gears to work with.

**Elizabeth:** A mind shift really, contributing to the wellness of the community and the belonging of the community creates a space for recovery is what I'm hearing you say.

**Bruce:** Yes. It is a mind shift.

**Elizabeth:** Getting back to the notion of wellness, you talk about the work you do with wellness and following Maslow's hierarchy, can you give some examples of how that works, on the ground work that you have done, any differences that come up with different groups you are working with?

**Susan:** Often times, if we are just meeting a group, and they need to have more of an introduction, with us, we integrate art and creativity a lot, we talk about wellness in general, and why it is important that is gaining from that group and why it is important to them. We have an activity based on the eight dimensions of wellness, where you're thinking of one-three activities that you are considering. Even thinking on a higher level, and what that might it look like in an organization or community level. That may be your first introduction. We had a project where we worked with young people in three different areas, one in Humboldt, Sacramento, and Alameda County, to think about sharing across geographic areas, and talk about stigma we might face. To promote community healing and wellness, they came up with great ideas. We would have barbecues and community picnics. They created wellness packages. We would really hit the streets. Allow people to have resource packages and an engaged in so much conversation, we would have 50+ people coming out, people we don't normally traditionally engage.

**Elizabeth:** Beautiful thank you. Perfect way to connect the work that you are talking about. So I really think you both so much, we are coming to the top of the hour, and we will have to wrap up for the time being.

Here is contact information for both Bruce and Susan. Again thank you so much from the Recovery to Practice team, for sharing your wisdom with us today. Hopefully sparking some interest, thinking about communities. Thinking about engaging community, and going out to find out who are the welcomes in each of our communities -- those who welcome people in each of our communities.

Please email us with any feedback on this or upcoming webinars that we can do. The upcoming webinars: we have the third on community next week: "Creating Recovery Oriented Person Centered Plans". Then following that will be a webinar on diverse families and the cultural formation interview. These should prove to be very interesting, please join us for them. If you are not able to join us, you will find the archives in the recovery to practice website.

Finally, if you're interested in receiving continuing education hours, click on the link on the sly, this will take you to live link for the quiz, that will allow you to complete your certificate, download your certificate below, and do take time to give us feedback when the feedback link

comes up on behalf of SAMHSA, I want to thank you all for joining today's webinar, we appreciate your interest, thank you so much Susan and Bruce. This concludes the webinar.

Thank you.