

Adolescent and Family Recovery Capital 101 for JDTCs and FDTCs: Part 1

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**We'd like to learn about you.
What treatment court(s) are
you connected with?**

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What is your role on the treatment court?

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What will we cover in Part 1?

- Definitions of recovery capital
- Research on recovery capital
- The role of the treatment court in building recovery capital
- Recovery capital elements as they apply to JDTCs and FDTCs
- Recommended practice for treatment court teams:
 - assessment
 - case planning
 - community resource connections
 - case staffing



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**What does "recovery" mean to
you?**

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Recovery

Betty Ford Institute Consensus Panel (2007, p. 222) recovery is “a voluntarily maintained lifestyle characterized by sobriety, personal health, and citizenship”

SAMHSA: “A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential. “

SAMHSA 4 Major Dimensions



Health



Home



Purpose



Community



Different Pathways of Recovery

Research on “natural recovery”
Recovery capital

Average Progression of Recovery (for adults)

Duration of Abstinence

1–12 Months

- ✓ More sober friends
- ✓ Less illegal activity and incarceration
- ✓ Less homelessness, violence, and victimization
- ✓ Less use by others at home, work, and by social peers

1–3 Years

- ✓ Virtual elimination of illegal activity and illegal income
- ✓ Better housing and living situations
- ✓ Increasing employment and income

4–7 Years

- ✓ More social and spiritual support
- ✓ Better mental health
- ✓ Housing and living situations continue to improve
- ✓ Dramatic rise in employment and income
- ✓ Dramatic drop in people living below the poverty line

Dennis, M.L., Foss, M.A., & Scott, C.K (2007). An eight-year perspective on the relationship between the duration of abstinence and other aspects of recovery. *Evaluation Review*, 31(6), 585-612.

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Do you think recovery means something different for adults in a family treatment court than for youth in a juvenile drug treatment court?

Why or why not?



JUVENILE
TREATMENT
COURT PROJECT

Recovery Capital



Understanding Recovery Capital

All the personal and tangible resources a person has and needs in order to initiate and sustain recovery (Granfield & Cloud, 1999; Laudet and Best, 2010; White & White, 2008).

Research is varied, but generally, three to six elements of recovery capital:

- Human
- Financial
- Social
- Community



Personal Capital

Divided into both human and financial capital

Human capital includes:

- Values
- Knowledge
- Skills
- Self-esteem
- Risk management

Financial includes:

- Transportation
- Shelter
- Jobs/Careers



Social Capital

Relationships

- Family
- Friends
- Supportive social relationships that are centered around recovery
- Relational connections



Community Capital

Full continuum of treatment resources

Accessibility of resources that are diverse

Local recovery efforts and supports

Supported pathways of recovery

Recovery norms are valued in the community



Life Phase Considerations for Recovery Capital

Adolescence

- Semi-dependent
- Social emotional learning in process (SEL)
- Neuro development/Self-regulation (Prefrontal Cortex -Amygdala Connections) in process
- Peer influence is strong
- Attraction to risks, excitement, and learning and doing new things
- Fluid, dynamic

Adulthood

- Independent
- Full agency/responsibility for self and others
- Cognitive wiring “completed”
- Balance risks and rewards
- Lifestyle/track record

Deeper Dive into Recovery Capital for Adolescents

Human

- Self-efficacy
- Motivation
- Mental/cognitive health
- Physical health
- Education/academic connections and success
- Spirituality

Financial

- Income/part-time job/employment preparation
- Resources for basic needs
- Access to transportation
- Access to treatment

Social

- Supportive/pro-social oriented peers
- Supportive family/caregivers (extended kin)
- Supportive adult figures/role models/Mentors
- Access to social /recreational activities

Community

- Connections to youth-oriented recovery groups/high school
- Connections to community-based supports for positive identity development and pro-social norms including sobriety



The Role of Treatment Court in Recovery Capital

*Q: How can we, as a
treatment court team,
support our clients in
building up their
recovery capital?*



Treatment Court Focus/Goals

JDTCs

FDTCs

Assumption: Youth's substance use is causal factor for their illegal behavior and juvenile justice system involvement

JDTC Court Goals:

- Reduce youth's substance use
- Reduce youth's illegal behavior
- Increase youth's pro-social behavior, activities, attitudes, and associations ("people web")

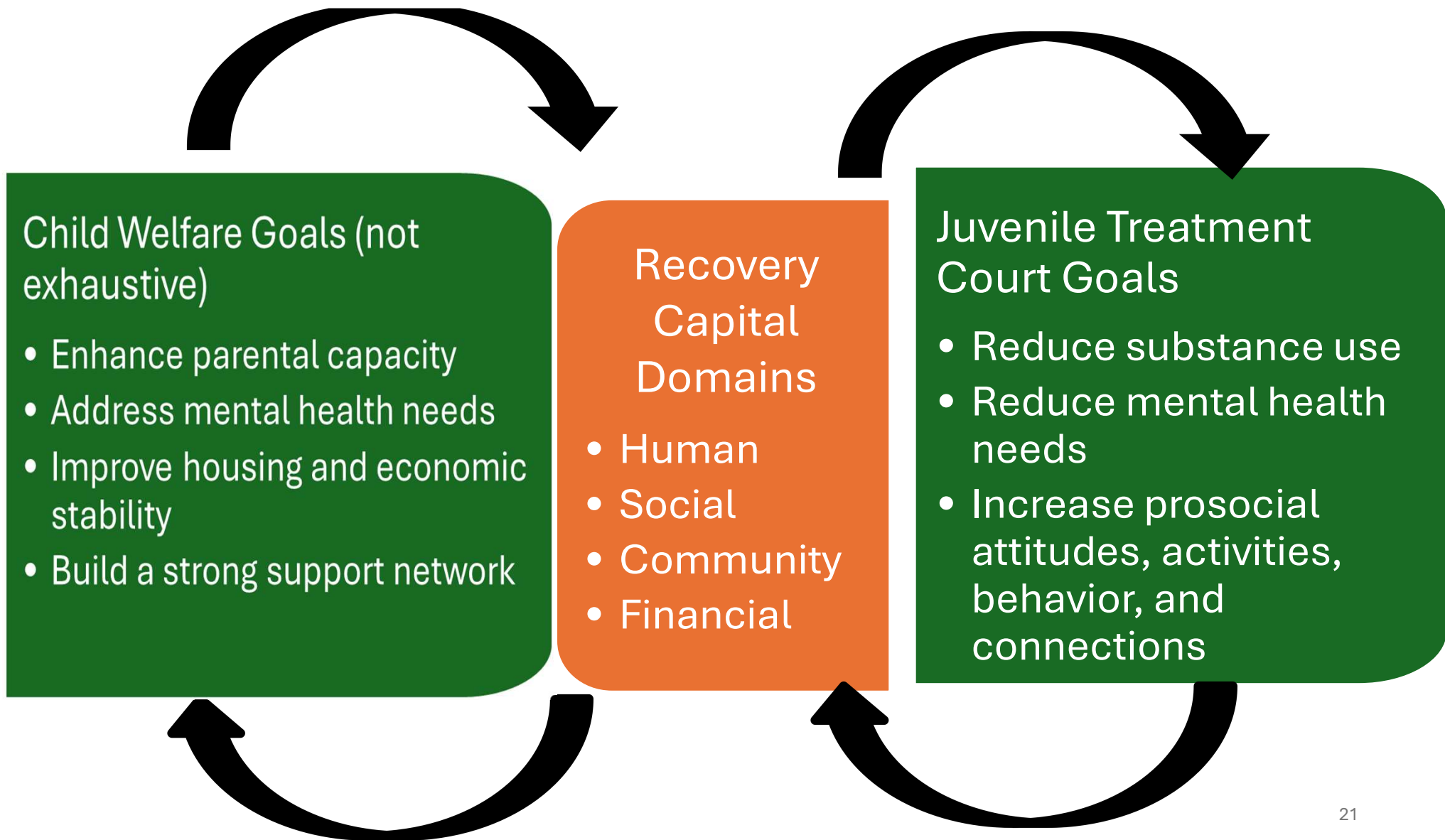
Assumption: Parental substance use is casual factor for maltreatment of their child(ren) and child welfare system involvement

FTC Court Goals:

- Enhance parental capacity
- Address mental health needs
- Improve housing and economic stability
- Build a strong support network



**Building client RECOVERY
CAPITAL/RESOURCES helps
treatment teams achieve their
goals ...**



Treatment court tools and strategies for helping clients build recovery capital



**1. Assess incoming individual
recovery capital**

**2. Develop individualized case
plans with relevant recovery
capital building goals**

**3. Identify existing community-
based supports; collaborate to
develop needed resources**

**4. Monitor progress and address
barriers to building recovery
capital**



1) Assessment-Adults

REC-CAP:

<https://www.recoveryoutcomes.com/rec-cap/>

Advanced Recovery Management Systems (ARMS)

Brief screeners

- Recovery capital scale:

<https://www.chestnut.org/resources/4c4bb112-3d59-4984-98cb-3b637378965a/Recovery-Capital-Scale.pdf>

- Brief Assessment of Recovery Capital (BARC-10)

<http://shura.shu.ac.uk/15835/2/Best%20Development%20and%20validation%20of%20a%20Brief%20Assessment%20of%20Recovery%20Capital%20%28BARC-10%29%20%28Scale%29.pdf>

- Conducted by treatment provider, probation or case manager
- Baseline/Ongoing

Recovery Capital (Adults) Sample Questions (agree...disagree)

- I have the financial resources to provide for myself and my family.
- I have personal transportation or access to public transportation.
- I live in a home and neighborhood that is safe and secure.
- I live in an environment free from alcohol and other drugs.
- I have family members who are supportive of my recovery process.
- I have friends who are supportive of my recovery process.
- I have a stable job that I enjoy and that provides for my basic necessities.
- I have an education or work environment that is conducive to my long-term recovery.
- I have a primary care physician who attends to my health problems.
- I am now in reasonably good health.



1) Assessment- Youth

- **Criminogenic risk needs assessment tool (e.g., PACT, YLS)**
 - for program eligibility (assessed as having moderate to high risk and needs)
 - for case planning
- **Recovery Capital assessment tool (in development)**
- **ASAM SUD assessment and treatment plan**
- **Mental Health screening and assessment (MAYSI)**
- **Completed by treatment provider, probation or case manager**
- **Baseline/Ongoing**

RCAM-A (Adolescents) Sample Questions

(agree...disagree)

Positive Youth Development-specific

- I receive a lot of encouragement at my school
- I am a useful and important member of my family
- I feel like an important member of my local community
- I feel my friends are good friends

Recovery Capital-specific

- I find it hard to have fun without substances.
- I have a hard time getting good sleep.
- I am struggling with guilt or shame.
- I am experiencing a lot of stress, depression, or anxiety.
- My experience and education have prepared me to handle life's challenges.
- I have problems with my mental health.

Denver Youth and Family Treatment Court (YFTC): Adolescent Recovery Capital Assessment Pilot



2) Case Planning

Case plans are informed by

“Risk/Need/Responsivity” (RNR) principles and tools that assess risk and need

- “risk” to re-offend
- “need” - behavior to address to reduce risk
- “responsivity” – intervention for addressing need fits youth ability, circumstances, build on strengths

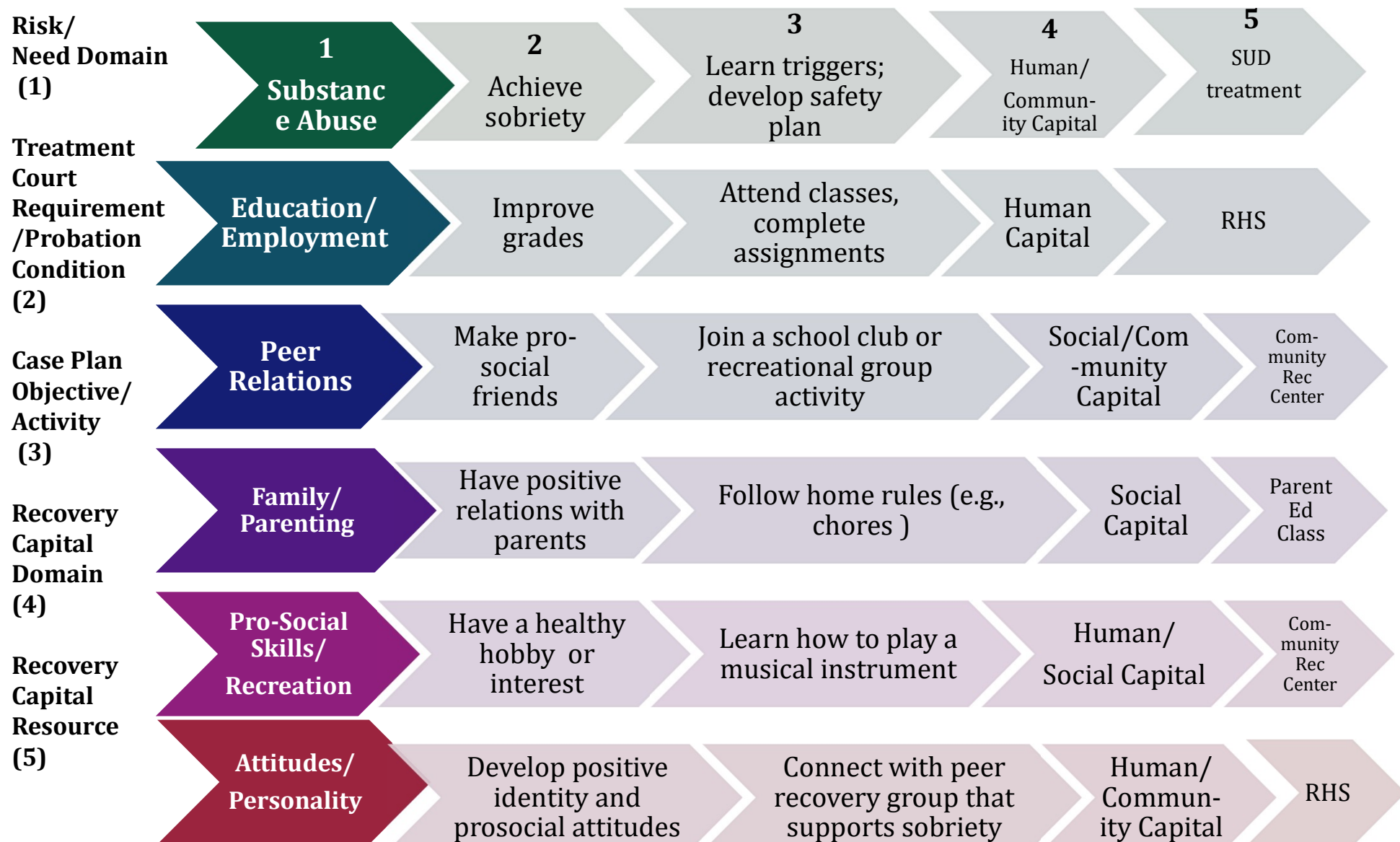
Case plans are individualized, goal-oriented for each client to:

- reduce risks
- address needs (build recovery capital)
- strengthen protective factors and resources (build recovery capital)

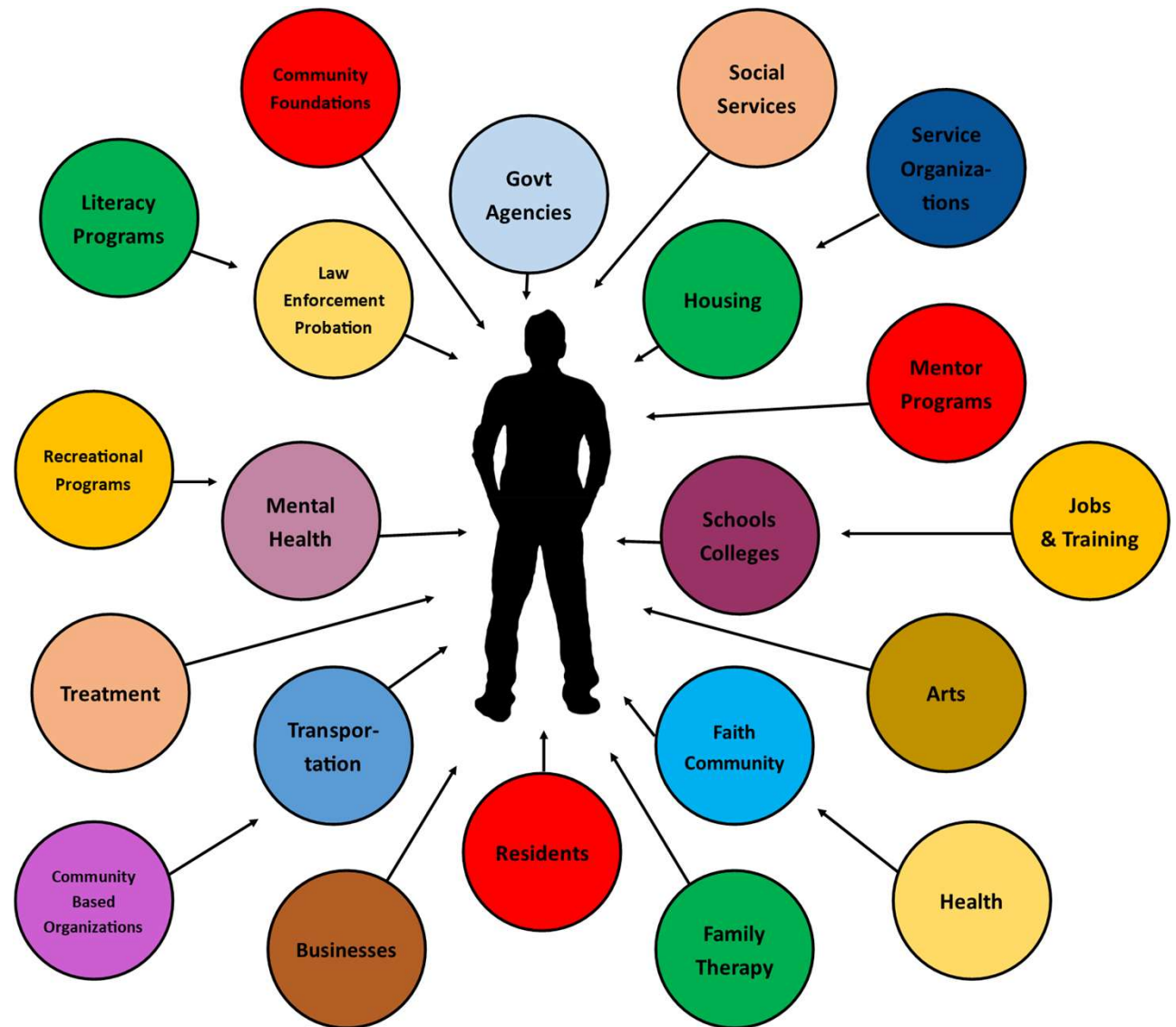
Case plan goals are SMART:

- Specific, Measurable, Attainable, Relevant, Timebound





3) Community- Based supports to help achieve goals



4) Case Staffing/ Monitoring

- Focus case staffing discussions on recovery capital strengths, progress, barriers, ongoing needs

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Individual, Goal- and Progress-Focused Staffing Discussion

- *Probation* – **identify risk/need domain** working with client on addressing and a related **individual goal/objective** underway (to decrease risk/meet need)
- *Treatment* – **identify treatment goal** (within appropriate boundaries of confidentiality)
- **Both: SMART goal update/progress report** (specific behavior that client engaged in to achieve goal, e.g., # TX sessions attended, #/topic of workbook activities completed, # job applications submitted)
- **Both:** Report on human, social, or community **resources or connections** that probation/treatment are working with client on for building recovery capital
- **Both: Barrier(s)** client encountered to achieve goal and actions to help **address barrier(s)**
- **Both:** Recommended **team response-** incentive, sanction, therapeutic adjustment
- **Both:** Next steps (SMART goal plan – e.g., specific activity, timebound) between now and the next case staffing/court hearing

GOALS PHASE ____ Review in ____ Days	Treatment Objectives (include responsivity factors to address)	Probation Objectives (include responsivity factors to address)
Area of Focus: GOAL: Recovery capital element:		
Area of Focus: GOAL: Recovery capital element:		
Area of Focus: GOAL: Recovery capital element:		

GOALS PHASE ____ Review in ____ Days	Treatment Objectives (include responsivity factors to address)	Treatment Court/Probation Objectives (include responsivity factors to address)
<p>Area of Focus: <i>Peers</i></p> <p>GOAL: Spend time with sober people that are my age.</p> <p>Recovery capital element: Social & Personal</p>	<p>John will increase his involvement in the recovery community by attending 2 pre-approved pro-social events by October 15th.</p> <p>John will complete a decisional balance sheet on how his peers affect his life in recovery and share it with treatment. TX and John will create a plan to address the negative peers that he hangs out with at school. John will share the plan with probation. Completed by 10/1.</p>	<p>John will complete a decision balance sheet on how his peers affect his life in recovery and share with this probation by 10/3.</p> <p>With his probation officer John will role play having a difficult conversation to prepare for the conversation with his peers. During this meeting, John will set a plan to when he will have this discussion with his peers. To be completed prior to the next court date on 10/15.</p>
<p>Area of Focus: <i>Substance Use</i></p> <p>GOAL: I want to make recovery work this time</p> <p>Recovery capital element: Personal</p>	<p>John will write a list of triggers and high-risk situations that have led to a return to use in the past year by ____.</p> <p>Clinician to explore ambivalence using MI and CBT.</p>	<p>John will complete a Behavior Offense Chain with his probation officer when the last time he used and committed a new offense. John will identify any triggering behaviors, emotions, or thoughts that led to use and criminal activity. Will be completed by ____.</p>

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Of the tools we covered for building recovery capital, which one are you most interested in?

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In Summary:

In focusing on building recovery capital, recommended practice is to

- **use the treatment court structure and resources to build client strengths and create meaningful pathways of social and community connectedness (that last beyond court)**
- **shift from thinking about what the treatment court “manages” to what the court assists clients to add to /strengthen in their lives.**

Come back for Part 2!

