SAMHSA GUIDING PRINCIPLES & RECOVERY ORIENTED CARE

Recovery-oriented care is a holistic, person-centered approach that recognizes each client's inherent potential for healing, growth, and personal fulfillment. Unlike older models of mental health treatment that often focused primarily on symptom reduction, recovery-oriented care emphasizes hope, empowerment, and shared decision-making. In this approach, the therapist partners with the client to identify their strengths, personal goals, and values, so that the therapy process becomes collaborative and tailored to the client's unique journey. By recognizing that an individual possesses the capacity to recover in ways meaningful to them, recovery-oriented care acknowledges the importance of autonomy, resilience, and the client's own expertise in their life experiences.

In practical terms, this means the clinician will support the client in defining what "recovery" looks like for them—whether it involves strengthening relationships, returning to work or school, finding purpose in everyday routines, or discovering new hobbies and interests. The central aim is to uphold the dignity, choice, and self-determination of the client, ensuring they feel safe to explore challenges while nurturing a sense of hope for the future.

Recovery-oriented care is therefore not just about eliminating problems; it is about seeing the person as a whole person, with inherent worth, potential, and the ability to participate meaningfully in the wider community. Services and supports provided might include therapy, medication management, community resources, peer support, and other interventions, all woven together with the client's specific hopes and goals in mind.

Research supports the effectiveness of a recovery-oriented approach in improving quality of life and promoting sustained well-being. By focusing on strengths, collaboration, and empowerment, it aligns with progressive theories that view mental health treatment as both a medical and social endeavor aimed at helping individuals thrive in the context of their communities. Over time, this approach helps the client build resilience and self-advocacy skills, creating a foundation for ongoing self-discovery and personal growth.

Guiding Principles of Recovery

SAMHSA, the Substance Abuse and Mental Health Services Administration is a part of the U.S. Department of Health and Human Services, and its main role is to improve access to quality mental health and substance use treatment services. In simpler terms, SAMHSA sets standards, provides information, and funds programs designed to help people recover from mental health challenges and substance use disorders. The guidance and research that come from SAMHSA influence how we, as clinicians, shape our treatment approaches and ensure we're using proven, effective methods to support your healing.

I'm bringing up SAMHSA because it offers a roadmap for what effective recovery looks like—something that we can use to guide our work together. By understanding the principles that SAMHSA promotes, you can gain insight into the "why" behind some of the strategies we use in therapy. It also helps you understand that you're not just working from my suggestions or the practice's policies; you're working within a framework that's been informed by national standards, research, and the experiences of thousands of individuals who have walked a similar path of recovery.

These principles guide how I structure and approach your treatment.

Setting Goals Together: Because recovery is person-driven, we'll work on identifying the goals that feel most important and meaningful to you. This might mean focusing on improving mood, reducing stress, changing your relationship with substances, or enhancing your family life.

Multiple Tools, Many Paths: If one approach isn't working, we'll explore others—maybe try a new coping skill, incorporate a peer support group, or discuss medication options if that feels right to you. We have flexibility because we understand recovery isn't linear.

Holistic Care: We won't only talk about symptoms; we'll also check in on your overall well-being. This might involve discussing nutrition, exercise, sleep habits, job stress, or your spiritual or cultural practices, all of which can influence your recovery.

Building Your Support Network: We'll look at who you trust and who can support you—family, friends, support groups, or community resources—and integrate them into your recovery plan.

Respecting Your Story and Culture: We'll consider how your cultural background, personal history, and any past traumas shape what you need from therapy. Together, we'll find strategies that feel authentic and respectful of who you are.

I encourage you to complete the therapy portal actiivty/lesson (supplemental support document) and watch my YouTube video about the recovery model and the differences between a harm reduction theory versus an abstinence only theory of addiction and recovery.

The following objectives and interventions were created around the 10 Core Principles developed by a multidisciplinary panel at the 2004 National Consensus Conference on Mental Health Recovery and Mental Health Systems Transformation convened by the Substance Abuse and Mental Health Services Administration (SAMHSA, 2004):

Self-direction: The client leads, controls, exercises choice over, and determine their own path of recovery by optimizing autonomy, independence, and control of resources to achieve a self-determined life. By definition, the recovery process must be self-directed by the individual, who defines his or her own life goals and designs a unique path toward those goals.

Individualized and person-centered: There are multiple pathways to recovery based on an individual's unique strengths and resiliencies as well as his or her needs, preferences, experiences (including past trauma), and cultural background in all of its diverse representations. Individuals also identify recovery as being an ongoing journey and an end result as well as an overall paradigm for achieving wellness and optimal mental health.

Empowerment: The client has the authority to choose from a range of options and to participate in all decisions (including the allocation of resources) that will affect their lives and are educated and supported in so doing. They have the ability to join with other consumers to collectively and effectively speak for themselves about their needs, wants, desires, and aspirations. Through empowerment, an individual gains control of his or her own destiny and influences the organizational and societal structures in his or her life.

Holistic: Recovery encompasses an individual's whole life, including mind, body, spirit, and community. Recovery embraces all aspects of life, including housing, employment, education, mental health and health care treatment and services, complementary and naturalistic services, addictions treatment, spirituality, creativity, social networks, community participation, and family supports as determined by the person. Families, providers, organizations, systems, communities, and society play crucial roles in creating and maintaining meaningful opportunities for consumer access to these supports.

Nonlinear: Recovery is not a step-by-step process but one based on continual growth, occasional setbacks, and learning from experience. Recovery begins with an initial stage of awareness in which a person recognizes that positive change is possible. This awareness enables the consumer to move on to fully engage in the work of recovery.

Strengths-based: Recovery focuses on valuing and building on the multiple capacities, resiliencies, talents, coping abilities, and inherent worth of individuals. By building on these strengths, consumers leave stymied life roles behind and engage in new life roles (e.g., partner, caregiver, friend, student, employee). The process of recovery moves forward through interaction with others in supportive, trust-based relationships.

Peer support: Mutual support (including the sharing of experiential knowledge and skills and social learning) plays an invaluable role in recovery. Consumers encourage and engage other consumers in recovery and provide each other with a sense of belonging, supportive relationships, valued roles, and community.

Respect: Community, systems, and societal acceptance and appreciation of consumers (including protecting their rights and eliminating discrimination and stigma) are crucial in achieving recovery. Self-acceptance and regaining belief in one's self are particularly vital. Respect ensures the inclusion and full participation of consumers in all aspects of their lives.

Responsibility: The client has a personal responsibility for their own self-care and journeys of recovery. Taking steps toward their goals may require great courage. Consumers must strive to understand and give meaning to their experiences and identify coping strategies and healing processes to promote their own wellness.

Hope: Recovery provides the essential and motivating message of a better future (that people can overcome the barriers and obstacles that confront them). Hope is internalized, but can be fostered by peers, families, friends, providers, and others. Hope is the catalyst of the recovery process.

Mental health recovery not only benefits individuals with mental health disabilities by focusing on their abilities to live, work, learn, and fully participate in our society, but also enriches the texture of American community life. America reaps the benefits of the contributions individuals with mental disabilities can make, ultimately becoming a stronger and healthier Nation.

The objectives are written to capture the essential theme of the associated core principle. The clinician may select any or all of the objectives and intervention statements to include in the client's treatment plan. One generic long-term goal statement is offered should the clinician desire to emphasize a recovery model orientation in the client's treatment plan.

Long-Term Goals

- To live a meaningful life in a self-selected community while striving to achieve full potential during the recovery journey of healing and transformation.

The client will make it clear to the therapist, family, and friends what path to recovery is preferred.

- The clinician will explore the client's thoughts, needs, and preferences regarding their desired pathway to recovery from (depression, bipolar disorder, posttraumatic stress disorder [PTSD], etc.).
- The clinician will discuss with the client the alternative treatment interventions and community support resources that might facilitate his/her/their recovery.
- The clinician will solicit from the client his/her/their preferences regarding the direction treatment will take; allow for these preferences to be communicated to family and significant others.
- The clinician will discuss and process with the client the possible outcomes that may result from his/her/their decisions.

The client will specify any unique needs and cultural preferences that must be taken under consideration during the treatment process.

- The clinician will explore with the client any cultural considerations, experiences, or other needs that must be considered in formulating a mutually agreed-upon treatment plan.
- The clinician will modify treatment planning to accommodate the client's cultural and experiential background and preferences.

The client will verbalize an understanding that decision-making throughout the treatment process is self-controlled.

- The clinician will clarify with the client that he/she/they have the right to choose and select among options and participate in all decisions that affect him/her/them during treatment.
- The clinician will continuously offer and explain options to the client as treatment progresses in support of his/her/their sense of empowerment, encouraging and reinforcing the client's participation in treatment decision-making.

The client will express mental, physical, spiritual, and community needs and desires that should be integrated into the treatment process.

- The clinician will assess the client's personal, interpersonal, medical, spiritual, and community strengths and weaknesses.
- The clinician will maintain a holistic approach to treatment planning by integrating the client's unique mental, physical, spiritual, and community needs and assets into the plan
- The clinician will arrive at an agreement with the client as to how these integrations will be made.

The client will verbalize an understanding that during the treatment process there will be successes and failures, progress and setbacks.

- The clinician will facilitate realistic expectations and hope in the client that positive change is possible, but does not occur in a linear process of straight-line successes
- The clinician will emphasize a recovery process involving growth, learning from advances as well as setbacks, and staying this course toward recovery.
- The clinician will convey to the client that you will stay the course with him/her/them through the difficult times of lapses and setbacks.

Cooperate with an assessment of personal strengths and assets brought to the treatment process.

- The clinician will administer to the client the Behavioral and Emotional Rating Scale (BERS): A Strength-Based Approach to Assessment.
- The clinician will identify the client's strengths through a thorough assessment involving social, cognitive, relational, and spiritual aspects of the client's life
- The clinician will assist the client in identifying what coping skills have worked well in the past to overcome problems and what talents and abilities characterize his/her/their daily life.

- The clinician will provide feedback to the client of his/her/their identified strengths and how these strengths can be integrated into short-term and long-term recovery planning.

The client will verbalize an understanding of the benefits of peer support during the recovery process.

- The clinician will discuss with the client the benefits of peer support (e.g., sharing common problems, receiving advice regarding successful coping skills, getting encouragement, learning of helpful community resources, etc.) toward the client's agreement to engage in peer activity.
- The clinician will refer the client to peer support groups of his/her/their choice in the community and process his/her/their experience with follow-through.
- The clinician will build and reinforce the client's sense of belonging, supportive relationship building, social value, and community integration by processing the gains and problem-solving the obstacles encountered through the client's social activities.

The client will agree to reveal when any occasion arises that respect is not felt from the treatment staff, family, self, or the community.

- The clinician will discuss with the client the crucial role that respect plays in recovery, reviewing subtle and obvious ways in which disrespect may be shown to or experienced by the client.
- The clinician will review ways in which the client has felt disrespected in the past, identifying sources of that disrespect.
- The clinician will encourage and reinforce the client's self-concept as a person deserving of respect
- The clinician will advocate for the client to increase incidents of respectful treatment within the community and/or family system.

The client will verbalize acceptance of responsibility for self-care and participation in decisions during the treatment process.

- The clinician will develop, encourage, support, and reinforce the client's role as the person in control of his/her/their treatment and responsible for its application to his/her/their daily life
- The clinician will adopt a supportive role as a resource person to assist in the recovery process.

The client will express hope that better functioning in the future can be attained.

- The clinician will discuss with the client potential role models who have achieved a more satisfying life by using their personal strengths, skills, and social support to live, work, learn, and fully participate in society toward building hope and incentive motivation.
- The clinician will discuss and enhance the internalization of the client's self-concept as a person capable of overcoming obstacles and achieving satisfaction in living
- The clinician will continuously build and reinforce this self-concept using past and present examples supporting it.

References:

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