



Profiles of Recovery Advocacy in Action: Recovery Advocacy in Louisville, KY *An interview with Mike Barry by Pat Taylor*

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Across the state of Kentucky, recovery advocates are coming together as part of People Advocating Recovery or PAR, a state-wide recovery advocacy organization. In just 4 years PAR has put a face and a voice on recovery before the state legislature, in the media, and in communities across the state. Pat Taylor interviewed Mike Barry, one of the founders and current President of PAR and Faces & Voices board member. The interview comes a few months after a strategic planning meeting, where PAR's leadership finalized a strategic plan that calls for hiring a paid Executive Director for this extraordinary all volunteer organization.

Pat Taylor: Mike, where does your passion for recovery advocacy come from?

Mike Barry: The defining moment came about 10 years ago. I was trying to explain my recovery to some old friends I hadn't seen in a while. My recovery was really strong, but they still treated me as though I were damaged goods and always would be. They also told me I would never be better until I stopped hanging around with "those" people and quit going to those brain washing meetings. I shared that with a number of other friends in recovery and found they had experienced the same problem. It was then I realized just how little people understood and how many still were thinking of addiction as a moral problem. I also realized that was the *same way I thought* before I finally got into recovery and that false thinking....the stigma...kept me from getting the help I needed. I started searching out others like me who wanted to change that and found an overwhelming number of people who were already working on changing attitudes. I jumped on the train for the ride.

Pat: You've been involved in the Healing Place for many years; as a matter of fact you still work there. What do you see as the relationship between recovery centers and recovery advocacy?

I find it's a very important part of the recovery process for those in early recovery to know how strong the support is for them to achieve long-term recovery. I'm thankful The Healing Place, a long term recovery program in Louisville, KY, feels the same way. I think it's pretty normal for new people in recovery to be so thankful they have the addiction problem arrested that they see the world through rose colored glasses and expect the world to welcome them with open arms. When they start facing all the brick walls set up by society the frustrations and resentments start setting in which is a real deterrent to achieving long-term recovery. We have to bring down those brick walls and tackle the problems of stigma and discrimination associated with addiction and long-term recovery.

Pat: So, do you think there's a more formal linkage that we can do more to strengthen, between recovery centers like The Healing Place and recovery advocacy?

Mike: Well, that's sort of a two-pronged question. I think there should be a linkage, but can we do it better? I don't know what better is yet. I know more of, better I'm not sure what that is yet.

Pat: For people in early recovery, people in long-term recovery model the reality of long-term recovery. How we engage those folks longer term in recovery advocacy is one of the challenges of the recovery advocacy movement.

Mike: And I think a place like the Healing Place has been doing this for a long time. With Alumni Association and a yearly block party and gathering alumni together, we can gather nearly 1500 people. I think we've been doing it a long time without knowing what we were calling it.

Pat: You also were involved in developing the Angels Program, where people went into emergency rooms to help people who were in trouble with alcohol and other drugs. How did you move from that kind of one-on-one support work to recovery advocacy?

Mike: During the original process of that program we only talked with the men or women in the hospital. I saw the family members and friends outside that emergency room window wondering what in the world they were going to do. It might be the 3rd...4th...5th time they had been in the position. When I started talking with the family and explaining the recovery process I was moved by how relieved they felt when someone explained to them that there was help, hope, and healing. Talking with the friends and family members became a way of life that I carried on to others who hadn't experienced taking someone to the hospital. Of course, it was very likely that they had someone in their family or a friend with an addiction problem. I saw how strong it was for a person in long-term recovery to speak out and how I was helping remove some of the stigma for both sides. At the time I didn't realize it, but I was beginning to define myself instead of letting others define what I was. I was putting a face and voice on a person in long-term recovery.

Pat: Can you tell us a little about the history of People Advocating Recovery (PAR), your state-wide recovery community organization, and where you see the organization going?

Mike: About the same time the process was developing with the Angel Programs a wonderful man, Dr. George Perkins, came into my life. In 2004 he told me about some people who had started a little group to tackle some of the discriminatory laws facing people in recovery. Each month 4 or 5 of us would get together to talk about some ideas of what we could do. A 3-person steering committee had been guiding the group for about two years and decided to have an election to try to bring some new people into the group. I was elected to what became a one person steering committee, but the same people were still involved and highly motivated as they are still today. 4 years later we now have a full 15 member board, have over 500 members, six chapters across the state and have been instrumental in passing some much needed legislation. I see PAR as continuing to become the voice for people in recovery, their family and friends, and making a real difference in tackling the stigma and discrimination faced by all of us.

Pat: And in terms of where PAR is today, can you talk a little bit about the fact that you now have chapters and you're looking to hire an executive director for the first time?

Mike: Well, the chapters are still developing, so we have 6 now, it looks like 2 more are coming soon so our goal for this year was to develop a working board and some structure with the intent of being able to hire a staff because this has all been done 100% up until now with volunteers. And yes, we're still volunteering we've got the grant to help with board development which involves training and organizing and some retreats to get to know each other better and decide what our structure should be, where it should go, and that's eventually the goal so that we can become more organized and have somebody devoted to doing it on a fulltime basis.

Pat: Sounds great. It is so interesting, the various models for how recovery community organizations are growing in different states. Some have grown state-wide networks, some with stronger local groups and then coming together to set up a state-wide organization at the same time. It sounds like in Kentucky you are doing all of it at once.

Mike: I'm not sure exactly how it spread out so quickly. I think it was because during the legislative sessions when a small group of us were advocating for some changes, people from other parts of the state obviously were there for the session and I think it was the old thing, wow, somebody like us speaking out and that's what we want to do and let's pool our resources.

Pat: And you've really engaged family members in PAR as well. Is that an important part of your organizational strategy?

Mike: Oh definitely, because family members are obviously impacted as well and when the family members can speak about the benefits of long-term recovery it gets beyond the usual audience.

Pat: The state of Kentucky's Drug Czar and single state agency have been strong supporters of PAR. How has that relationship helped PAR's development and can you see any downsides?

We are very fortunate to have that strong support. As a matter of fact the initial push to form an advocacy group came from within the state agencies. Some very broad-minded people saw the need for the "consumer" to let the government know what they needed. There are just so many things a government can supply and we know how strong peer to peer support can be. As persons receiving services we can tell the government what works and what doesn't. It goes back to my premise that as a person in long-term recovery I need to define myself and not let someone else define me. As a person who's been there...on the front lines...I can tell them what works and what doesn't work. I'm sure there might be some downsides to the relationships, but I sure haven't seen any.

Pat: PAR's been working with a broad coalition of organizations on some key advocacy campaigns and has had a high profile in recent efforts to restore voting rights to individuals with prior drug convictions. How have those relationships come about and what's it been like to manage those relationships?

We are currently working with a very wide coalition to restore the voting rights of convicted felons. Our contribution has been PAR's organization and support of people in long-term recovery.....many that have been previously incarcerated and had felony convictions. PAR saw many other organizations working toward the same goal and started inviting them to our meetings and they invited us to theirs. One thing lead to another and we agreed to start working on this one effort while maintaining our own agenda on other issues. I won't say it's been difficult to maintain the relationship, but it's been challenging in some ways. We maintain our focus and our message.....which is to eliminate barriers to long-term recovery. I think we have really helped bring about some tremendous understanding of people in long-term recovery. I know that personally I have certainly changed some attitudes on what a person in long term recovery looks like!!!! More than a few times I've been hit with the old...."Wow I didn't know you were one of those people who have a problem. You sure don't look like it." I don't go into all the details, but I do let them know that *I was once one* of "those people" under the bridge who thankfully made it to a homeless shelter where someone reached out a hand to me.

Pat: You're a former TV announcer, so you have lots of media experience. PAR has been very successful in obtaining print and TV coverage of its activities. Do you have any tips for people about how to build and manage those relationships?

Obviously the skills and experience as a reporter and TV news anchor and producer have been beneficial in opening doors, but nothing works better than passion. We have members with no media experience at all, but who have a driving passion and personal experience. One key is identifying media people in recovery. They may not want to speak out, but they will certainly listen and can help identify others in the media. When a PAR member shares that heartfelt problem or experience with a reporter it's a great human interest story. Providing reporters with good stories helps establish credibility. That's one key. Another is letting the media know we are an expert resource regarding anything to do with recovery. We might not have the person they need or the answer they need, but we can find a source for them. When I see a story about anything in our area that involves recovery and doesn't have a connection to PAR I contact that reporter and introduce our organization and let them know we are available to help at anytime. And most important to me, being a former reporter, I never want to lead them on a wild goose chase, ask them to cover a non-story, or give them any false information. It's important to stay on message and stick with the facts and maintain credibility. If a news story has incorrect information it's important to give the reporter the correct information without jumping down their throats. If they don't want to listen there's nothing wrong with calling on another reporter and giving them a story.

Pat: You've been a Faces & Voices trainer for our message and media trainings. Thanks so much for the trainings that you've done in Louisville, Los Angeles, Dallas, Chicago and Detroit now. How do you think the trainings are going and why do you think they're important? After all, you've devoted countless hours of time volunteering as a trainer!

Thank you Pat. Faces & Voices of Recovery has a dynamite message. I know when I started using the message it made a tremendous difference in the way I felt about talking about my long-term recovery. I love doing the training for a number of reasons. First of all I love to see the light come on when someone learns how to express what they've been feeling all along and just

didn't know how to put into words. That was me 5 years ago. Second...it's watching the collective energy in a room come together and knowing what a force it will be when it leaves that room. People in our trainings are biting at the bullet to go out into their communities and share what they just learned with other people in recovery. That force is putting a Face and Voice on recovery as we begin to define ourselves, families, and friends. We are speaking with one voice...a very loud and strong voice.

Pat: What do you see as the future for recovery advocacy in Kentucky?

There is no doubt in my mind that we are becoming a very strong voice that will only lead to better circumstances for those in long-term recovery and those seeking recovery. I know we can remove many of the barriers over time. We already are. State Agencies and legislators seek our opinions and ask for our support. By speaking out and defining ourselves the general public is seeing people in long-term recovery at work. They are seeing us working in the solution rather than the problem.

Pat: You also serve on the board of directors of Faces & Voices of Recovery. Why do you think it's important to link our local, state and national recovery advocacy work?

By linking the all the organizations we can start speaking with one voice. We can learn from each other what has been successful in our respective communities and draw on the resources and talents of each other. In recovery we know that a lot of our strength comes from knowing that we are not alone. There is so much going on, so much to learn...we need each other. Recovery is not something I can do alone and advocacy is not something I can do alone.

Pat: Is there anything else you'd like to tell us?

Mike: I urge everyone in recovery, their families, and friends to get involved the best way that they can with this rapidly growing recovery movement. We are bringing long-term recovery and its benefits out into the open in an exciting movement. I have a realistic outlook on the problems and at the same time have a positive attitude that we can be a force to break down barriers. I know when I speak to people about my recovery they are impressed with what I've overcome, but what really gets to them is when they see I'm just one of millions doing the same thing. We are alive and well and everywhere. Speaking publicly is not for everyone, but there is a place for everyone in this movement. Find way to get involved. Call your local recovery center, treatment center ask about an advocacy group in your area. Contact me at peopleadvocatingrecovery.org. Visit the Faces and Voices web site to find one. Together as one voice we can make a difference...a huge difference just by letting another person know that somewhere there is help, hope, and healing. There are some real pioneers who started this movement many years ago. They had the courage to speak out for all of us when it wasn't the "proper thing to do." And it's my responsibility to "give back" and to carry on what they were brave enough to start. A friend of mine always says about his recovery....."Alone I'll die. Together we live." That applies to our advocacy movement as well.

Pat: Thanks so much for all that you do.