Social movements, particularly those rising from historically stigmatized groups, are by their very nature turbulent. Leadership roles in such movements offer a rich menu of risks as well as opportunities. Faces & Voices of Recovery grew out of the historic 2001 Recovery Summit in St. Paul, Minnesota. It rose as an organizational manifestation of a new recovery advocacy movement in the United States. In the years since, Pat Taylor has brought great passion, skill and creativity to her leadership of Faces & Voices. She is by temperament and choice an advocate. She and her small staff have nurtured the growing network of recovery community organizations around the country, and she has represented our diverse communities of recovery at key policymaking tables. Most importantly, she has maintained faith with the vision and principles forged at the 2001 Recovery Summit. She has helped make that vision a vibrant reality. In recent months I interviewed Pat about the state of the new recovery advocacy movement that she has so ably represented and about the activities of Faces & Voices. Please join us in this reflective conversation.

Bill White: Could you share some of the life experiences that led to your involvement with Faces & Voices of Recovery?

Pat Taylor: I’d be happy to do that. My first encounter with the recovery community really plays into that. In the early 1990s, I was the director of the Alcohol Policies Project at the Center for Science in the Public Interest (CSPI). We had a coalition of organizations, including the National Council on Alcoholism and Drug Dependence and the National Association of State Alcohol and Drug Abuse Directors that worked on policy issues here in Washington, D.C. We were successful in getting warning labels on alcoholic beverage containers and the most recent, but too long ago, increase on the federal beer tax in 1991. People in recovery were witnesses at a number of Congressional hearings during those battles. That experience was all about mobilizing grassroots constituencies to influence federal policymaking. I’ve worked as a field organizer and scheduler on a US Senate campaign in
Vermont and organized local food coop and artisans’ coops there. And going way back, when I first came to Washington after graduating from the University of Michigan, it was for Earth Day. My whole work life has really revolved around how do you raise the issues that are important to people in communities to affect public policy change and also how do you work to establish groups in communities across the country that can be engaged locally, statewide and nationally?

**Bill White:** What motivations led to your initial interest in the leadership of Faces & Voices?

**Pat Taylor:** Well, when I heard about the opening at Faces & Voices, I thought “Oh boy; this is an opportunity for me to really apply all of the different things I have been doing in my life.” It combined all of the local organizing skills that I’d developed, experiences doing communications around various issues, and public policy. I was looking for an organization or an opportunity where I could continue to build on my belief in the power of organized constituencies, not only to change public policy, but the kind of transformation that happens when people are engaged in our nation’s civic life. I was brought up in a family that was very involved. I remember stuffing envelopes when my dad was running for school board when I was in the second grade. Being part of your community, I guess was imbued within me at a very young age. I’ve been very fortunate to have lived through some major social change movements in our country, including the environmental, civil rights and women’s movements. I feel that engaging people in what’s happening in communities is really what our democracy is all about.

My professional relationship with the recovery community, people in recovery and family members, began with my work at CSPI. So, I had some relationships with national organizations and local advocates that I could bring to Faces & Voices. I had been working at Ensuring Solutions to Alcohol Problems at George Washington University and while I was there I realized that my interests were much more in the advocacy, movement building, mobilizing parts of the work that needed to be happening across our country. So it just felt like the right place at the right time.

**Bill White:** Have your motivations for this recovery advocacy work changed since you came to Faces & Voices of Recovery?

**Pat Taylor:** My motivation and commitment have just continued to grow over time. I don’t think that I really understood the power and the passion of
people in recovery and their family members when I first took the job. My motivation for this work has grown because I think it can have such a profound impact on communities and our society.

**Bill White:** Before people had a chance to get to know you there was some initial concern that a person had been hired to head Faces & Voices who was not in personal recovery from addiction. Could you describe how you established your credibility so quickly and how your status as a person not in recovery has affected your leadership of Faces and Voices of Recovery?

**Pat Taylor:** Well, one thing that I think is important is my style of leadership. It’s one of listening to people and pulling together consensus and moving forward. That is partly what has made it possible for me to establish trust, which I think is so important, and build relationships across the recovery community. When I think of Faces & Voices of Recovery and the recovery community, I’m very serious about it and totally committed. I’ve had wonderful opportunities to meet, get to know, and work with all kinds of people. In terms of my personal credibility, I think that the respect that I have for people is part of what has made that possible. I have so much respect for people who are part of our recovery advocacy movement. It’s the shared passion that we bring to this work. Passion combined with strategic thinking has made it possible to move forward and develop what is becoming an incredible movement all across our country. So I’ve learned a lot from people and I’ve been able to bring what I hear, I think, to this movement. I have also worked hard to raise the profile of people in recovery, family members, friends, and allies through Faces & Voices. I think that when people see the growing capacity of the recovery community it helps them understand what we’re doing at Faces & Voices – that it’s a broad and deep movement with Faces & Voices leadership in much of what’s happening around the country.

**Bill White:** I think the fact that you weren’t tied to any existing camp within the recovery community and your very inclusive style contributed to the success of Faces & Voices. Would you agree?

**Pat Taylor:** I would agree with that. My goal is to make it possible for anybody to find and sustain recovery in our country today. That underlying philosophy – that everyone has a right to recover – is my constant guide. The other part of it is the inclusivity in terms of family members, friends, and allies. One thing that I hope will be remembered about my leadership is the
fact that we are open to bringing in anybody who wants to make it possible for others to find long-term recovery, ending some of the isolation that has existed between “camps.”

Bill White: Pat, what would you say are some of the important historical milestones in the rise of a new recovery advocacy movement in the United States?

Pat Taylor: There are many important milestones and I’m sure that I’m leaving many of them out. More recently, I think of Operation Understanding that came out of the National Council on Alcoholism and Drug Dependence. Senator Harold Hughes was the public face of recovery as part of the Society of Americans for Recovery (SOAR). We’re very fortunate today to have other elected officials who are coming forward to speak on behalf of recovery as a person in recovery or family member. In the late 1990s, the federal government started funding recovery community organizations, what was then called the Recovery Community Support Program (RCSP). It was the first national program of its kind that supported public education and advocacy around recovery by folks in communities around the country. White Bison, Connecticut Community for Addiction Recovery, PRO-ACT, the New England Alliance for Addiction Recovery were among the first grantees. The work leading up to the 2001 St. Paul Summit was a very important milestone. National organizations came together through the Johnson Institute to say, “We don’t have the voice of people in recovery,” and so their support of developing what has become Faces & Voices of Recovery was very important. What was called the Alliance Project under the leadership of Jeff Blodgett carried out the first national survey of the recovery community to find out if people were interested in speaking out. People from all pathways to recovery spent a year planning the Summit which ended with the adoption of a Core Positioning Statement, laying out the principles for a national campaign.

Other important milestones are your writings and the writings of other people in recovery over the last 15 or 20 years. The recovery advocacy movement’s development has been fueled by people speaking out about the reality of recovery and what it means to recover in many different forums. We can’t discount the thinking and story telling that is going on in advancing recovery advocacy. Another force that has helped drive the recovery advocacy movement is the criminalization of addiction and the draconian laws that were passed at the state and national levels in the 1980s and the 1990s. Individuals and their families are experiencing the unjust
policies and driving the effort to make much needed changes in public policy. And another historic milestone is the 2008 enactment of the Wellstone-Domenici Law to begin to end insurance discrimination on facing people with addiction.

**Bill White:** What are some of the first recollections of the state of recovery advocacy when you first assumed leadership of Faces & Voices?

**Pat Taylor:** When I first came to Faces & Voices I took some time to look at the lay of the land, to find out more about what was going on all around the country and the different organizations. It was very interesting. Part of what I saw was that in many ways, we were at a very early stage. Recovery advocacy is still developing, but there has been tremendous progress. There were different pockets of individuals and organizations who were coming together—some organizations funded by the federal government’s RCSP program, but also many other independent organizations and associations like Oxford Houses and recovery schools, where people in recovery were coming together to support one another. Sometimes organizations were developing to advocate and educate, and at other times to lend support. There were these different pieces all over the country, but people hadn’t really come together to jointly strategize, to jointly advocate, and to support and learn from one another. I thought that we had a lot of potential.

Faces & Voices has carried out specific campaigns like Recovery Voices Count and Rally for Recovery! and working to remove the ban on federal financial aid to students with drug convictions. Besides these campaigns and activities, Faces & Voices has really worked hard over the last few years to think about how to talk about what the recovery experience is for the general public and policy makers. When I came to work for Faces & Voices, we had not figured out yet how to talk about recovery to the public and our messaging and media training has made a tremendous advance in that area.

**Bill White:** How would you define the goals of the recovery advocacy movement today, particularly any changes in those goals since the summit of 2001?

**Pat Taylor:** I took a minute and went back to the core positioning statement that was developed at the 2001 summit in St. Paul, Minnesota. I can’t tell you how much I wish that I had been there because I know how important it
was to so many people who are involved in recovery advocacy around the country today.

One difference is that Faces & Voices was called a campaign and I was hired as a campaign coordinator. Today, we’re a national organization with over 25,000 members and hundreds of recovery community organizations around the country. In 2001 people in St. Paul decided, “the campaign will show that helping those struggling with addiction to alcohol and other drugs benefits the entire community, and it will promote widespread understanding that long-term recovery is a process that takes time. And only when Americans have a sound appreciation of recovery and fully understand the recovery process will laws and policies be effectively changed to reduce discrimination and lower barriers to recovery services.”

There are probably a few words that might be different when we talk about what our goals are today, but I think our goals are essentially the same, which is to make it possible for people in or seeking recovery to realize and sustain their recovery and to change laws and policies that are making it difficult and discriminate against people seeking or in long-term recovery. We are working to put a face and a voice on recovery so that Americans understand the reality of recovery and to change public policies to support people so that they can get into long-term recovery. Perhaps we’ve further refined these goals, but they are essentially the same.

**Bill White:** One of the core ideas that came out of the 2001 summit was that there are multiple pathways of recovery, and all are cause for celebration. How do you see this idea embodied in the ongoing work of Faces & Voices of Recovery and local recovery advocacy groups?

**Pat Taylor:** I see it happening in many different ways, and believe that it’s one of the most exciting recent developments. Part of building a community of recovery through recovery community organizations and other activities is embracing and letting people know that there are many pathways to recovery. In other illnesses, people don’t talk about, “this is the right way to get well,” but rather there are many ways that people can and do get well. I think that’s what’s happening when it comes to addiction to alcohol and other drugs.

We’ve worked in four ways to embrace the fact that there are many pathways to recovery and we need to continue that work. One is that at events, like Recovery Month rallies and conferences and other activities, we have been working with recovery community organizations to profile the
stories of people who have found recovery through different pathways, and that also includes family members. For example, at the 2008 St. Louis Rally for Recovery! there were six recovery speakers. I think that there were two people using medication in their recovery, one person who had found his recovery without professional treatment and through a mutual aid group; one person who had professional treatment and the last individual was a family member. So the idea here being that whenever we have an opportunity that we profile people who are in long-term recovery, as many pathways as possible and the broader recovery community.

A second way this is happening is being pioneered by recovery community organizations around the country. Connecticut Community for Addiction Recovery (CCAR) has led the way in holding All Recovery meetings, where people come together to support one another in recovery regardless of their pathway of recovery, an exciting development.

The third way is working to describe the many pathways to recovery in our programs and activities like the Recovery Bill of Rights. This statement of the principle that all Americans have a right to recover from addiction focuses attention on the fact that each person should be treated with dignity and respect and that they have the right to find a pathway to recovery that works for them.

The fourth way is by having people representing all pathways to recovery in Faces & Voices leadership. So in all of the work that we’re doing, raising the fact that there are many pathways to recovery, profiling people who have found recovery through those various pathways, and using the language and messaging that we have developed so that all people talk about the fact that they are in long-term recovery and if they want, they can describe whatever pathway it was. We are working to help the public understand that people can and do recover; that there are many pathways available to them, and that if one doesn’t work, there’s another one out there. So trying to bury the idea of “my way or the highway,” by saying, “We’re going to stick with you until you find long-term recovery,” and trying to infuse that in everything that we do.

Bill White: I think it’s also important that we’ve done that across very diverse ethnic and cultural communities.

Pat Taylor: Absolutely.

Bill White: When the advocacy movement came together following the summit of 2001, lots of organizations played contributing roles in that at a
national level. We had the emergence of Faces & Voices of Recovery as an independent organization, NCADD, Johnson Institute, Legal Action Center, and possibly others. How would you characterize the complementary roles these different organizations have played?

**Pat Taylor:** Well, first, it’s so exciting. We have so many organizations that have been involved in the ongoing growth and development of the recovery advocacy movement, and they continue to be involved. As you think about the respective roles of these organizations, NCADD’s involvement goes all the way back to Marty Mann in terms of recovery advocacy. Many local NCADD affiliates, for example, the Bucks County Council on Alcoholism and Drug Dependence and the New Jersey National Council on Alcoholism and Drug Dependence were incubators, as it were, for recovery community organizations that have really grown and are playing an important role in their community. NCADD continues to play an important role through its affiliates in terms of incubating recovery advocacy and recovery community organizations around the country. The Johnson Institute under William Cope Moyers’ leadership played a critical role, first of all, by convening the Alliance Project, which was the precursor to Faces & Voices of Recovery. Under Johnny Allem and Dona Dmitrovic’s leadership, the Johnson Institute’s Recovery Ambassadors training was developed and provides important training for people who are coming together for the first time, to think about setting up a recovery community organization. I’m thinking particularly of a couple of groups, one is People Advocating Recovery in Kentucky, which is now about four years old. They have over 4,000 members, at least six chapters across the state of Kentucky and are deeply involved in advocacy to restore voting rights for people with drug convictions. The genesis for that organization coming together was a Recovery Ambassadors training organized by emerging recovery leaders with the Johnson Institute. It’s an indicator of how important these trainings are all across the country.

The Legal Action Center has played a very important role from the beginning on a couple of levels, providing guidance on federal policy issues being an example. Another of their very important contributions to the recovery advocacy movement is the Know Your Rights trainings that they’ve been doing all across the country. It’s a training that allows people to understand what their rights are in terms of legal issues that folks may face as they seek to find jobs, housing, and get their lives back on track as they’re newly in recovery. They’ve trained local recovery community organizations and others to deliver the Know Your Rights information so
that people can begin to have the information and resources they need to move forward. There have been so many organizations that have and continue to contribute to recovery advocacy around the country. We are all part of developing the capacity of recovery community organizations to lead this effort all across the country.

**Bill White:** You probably spend more time than anyone with local recovery advocates from around the country. Could you give us a little bit of flavor of the scope of activities of these local organizations?

**Pat Taylor:** Well, that’s actually the favorite part of my job. It is so incredible how much people are doing and the passion they have for this work. First and foremost, I want to honor the tremendous dedication that I see every single day. The scope of local recovery community organization activity is quite broad and it depends on what they’ve found after taking the pulse of folks in their community. We talk about the organized recovery community, people coming together to form recovery community organizations. There are a lot of different models for how that’s happening around the country. All of them have, as part of their mandate, put a face and a voice on recovery. Some recovery community organizations are providing peer and other recovery support services. Others are doing advocacy or both. So there’s a mixture in terms of the types of activities and also the size of the organization. Some may have 100 members; others have thousands. Some are all volunteer. Some have large staff and large budgets. That does help inform the scope of activities of a particular organization, but to a group, all of them are putting a face and a voice on recovery. For example, People Advocating Recovery (PAR) in Kentucky recently hired their first executive director after being an all volunteer organization. PAR has been very involved on a legislative issue of importance to the recovery community – restoration of voting rights. They haven’t been involved in providing peer and other recovery support services. They’ve also been very involved in making sure that there’s recovery community representation at the state policy level, They, along with many other recovery community organizations, have great rallies. I’ve been to two of them, where they drawing thousands of people to the state capital.

Another model is in the state of Vermont, where there’s a network of recovery community centers, and a separate statewide recovery advocacy organization, Friends of Recovery - Vermont. What’s exciting to see is the new and emerging groups coming together all across the country. In New York, for example, Friends of Recovery New York held its first statewide
advocacy day in Albany on February 2nd with over 250 people from the recovery community rallying and visiting with state legislators. Their goal for next year is 2000 people putting a face and a voice on recovery and advocating for improved state policies.

It’s a very dynamic moment in the history of recovery advocacy. We have groups that have been around for awhile and are developing incredible skills that they’re sharing with the new and emerging groups, which is something that characterizes this movement unlike so many others. I’ve never seen so many people willing to share their experiences to make it possible for other organizations to thrive. Groups like CCAR and PRO-ACT who received our Joel Hernandez Voice of the Recovery Community award have been incredibly generous sharing their experiences. We’re going to be launching a new project called WeRecoverNet to help develop the capacity of recovery community organizations and their leaders.

**Bill White:** Could you talk a little bit about the composition of the Faces & Voices of Recovery board and how the board’s role has changed over time?

**Pat Taylor:** Faces & Voices of Recovery wasn’t incorporated until 2004. Lisa Mojer-Torres was the first board chair and the board held its first retreat in July 2005 in Chicago. One thing that the board decided to do was to set up regions that would parallel the regions of the Addiction Technology Transfer Centers (ATTCs), out of the Center for Substance Abuse Treatment. It was a way to represent the interests of the recovery community nationwide on the board and leverage relationships and opportunities because people were already coming together through these existing regions. In retrospect, I think that it’s worked out well because our regional representatives have been able to develop relationships with the ATTCs. For example, Judie Didriksen, our board member representing the Mid-America region, has worked closely with that ATTC. Representatives from the states in that region came together for a training and continue to collaborate. There are similar relationships in New England with Patty McCarthy, Faces & Voices New England representative. So one part of how our board is structured is through these regional representatives who are really the face and voice of our organization throughout their regions.

We also have at-large board members. Carol McDaid is our current board chair. We don’t have a large staff, but we do have this incredible board who give so much of their time and talent, and part of that time and talent for our regional representatives is representing Faces & Voices and recovery advocacy at events throughout their regions. Their presence in
communities and states in their regions has made a huge difference in helping get out our message about the reality of long-term recovery. All of our board members have helped engage people across the country in recovery advocacy and are building cohesion and a sense of joint mission among recovery advocates. The makeup of Faces & Voices board also reflects this broader vision of recovery community, meaning people in recovery, family members and friends, representing the many pathways to recovery, and representing different constituencies as well. Faces & Voices board also has board committees, some of which have non-board members on them. That’s one way to further engage people in recovery in governing and guiding Faces and Voices of Recovery and build new leaders of our movement.

Bill White: How many staff do you have and what their primary roles?

Pat Taylor: We have Dannie Greenberg, who has been at Faces & Voices for four years now. She’s a critical part of our work and has many areas of responsibility, especially given our relatively small staff. She’s responsible for making everything work, including the web site as well as managing the Joel Hernandez Voice of the Recovery Community Awards program and our annual appeal. One of the first things she did when she came to Faces & Voices was to produce The Power of Our Stories video. She also manages our interns, who have been a critical part of our operations. We’ve recently hired Whitney O’Neill, who is our new Administrative and Program Assistant, and we are hiring someone to manage our new program for recovery community organizations, WeRecoverNet. Whitney was a volunteer who helped us organize the filming of our messaging training in December before coming on as a full-time staff person.

As I mentioned, our board is very involved in our work and they help us carry out projects and programs. We recently completed an exciting project to help revitalize Friends of Recovery-New Hampshire, that state’s recovery community organization. Patty McCarthy, our New England regional representative, was involved in that project along with CCAR. So, part of what we’re trying to do is bring the expertise and the skills of our board members and other people who are active in the recovery advocacy movement into all of the work that we do. It may mean opportunities to speak or to provide technical assistance to new and emerging recovery community organizations. Carla Ayres, our Frontier regional representative, is working with all of the people who were recovery delegates to A&E’s Recovery Project who have formed an organization based at Faces & Voices
called the US Recovery Delegates so that they can continue to give back to the recovery community. Then, I’m the Executive Director at Faces & Voices. My primary roles are to work with the Board to guide our organization and to work with our board committees in terms of our various initiatives that we do, and to represent Faces & Voices here in Washington and around the country.

**Bill White:** What are some of the most important issues that Faces & Voices of Recovery has addressed under your leadership?

**Pat Taylor:** I think the first one is governance. After the St. Paul summit, Faces & Voices was envisioned as a campaign, and I was the campaign coordinator. A decision was made in 2004 to incorporate Faces & Voices as an independent 501c3 organization that would be governed by the recovery community. So one of the important issues that we continue to work on is our governance: how we make decisions about what our priorities are, how we develop resources and mobilize to accomplish our mission. A second important issue related to that is how do you develop and implement a perspective of the organized recovery community and then how do you bring that perspective to allied organizations and others to move this recovery agenda forward?

We’ve done that in different kinds of ways, and it’s one of our biggest challenges. As we’ve developed and become more recognized, we have different opportunities that can divert us from our focus on long-term recovery and mobilizing the recovery community. We’ve developed a number of programs and projects to bring the voice of the organized recovery community forward. For example, when we first incorporated, we had a Right to Addiction Recovery Platform that laid out a vision for Faces & Voices. In 2008 we built on that to release our Recovery Bill of Rights. Another example is the work that we are doing to discuss recovery-oriented systems of care from the perspective of the recovery community and develop policies and programs that support that perspective. What does recovery-based care mean for the recovery community? Putting forth a perspective for the organized recovery community is probably one of the most important issues that we continue to address.

**Bill White:** Faces & Voices has been involved in a lot of policy and legislative advocacy-related issues. Could you describe some of these we have been involved in and maybe even some of our successes to-date?
Pat Taylor: Absolutely. One of the first ones that we were involved in was to address a particular barrier that was facing students with drug convictions, the ban of federal financial aid to students with drug convictions. We worked in coalition with many other organizations to successfully modify the law and publicized the new law with posters that I’ve seen in various places that read, Got Recovery? Want to Go Back to School, to let people know about the change. We’re not all of the way there yet because students still have to answer questions about this issue when they apply for aid, but we’ve made important progress.

This was a very important issue for Faces & Voices because there’s so little public understanding about the fact that if people make the personal commitment to seek recovery, we invest public dollars and private dollars in getting people help with their addiction, after all of that investment, we then erect all of these barriers that make it very difficult to people to get on with their lives and sustain their recovery. How about a society that says, “That is so wonderful; we’re happy happy for you and for your family, here’s where you can find a job, housing and education.” We were able to use the stories of people who had experienced this discrimination as part of the effort, and that was an important contribution: to make this all personal. Because it is personal. Personal stories of people make a huge difference in terms of trying to change public policy.

Another issue that we have been very involved in is fighting the cuts to the Recovery Community Services Program that were proposed under the previous administration. This is the only federal program that provides critical resources for recovery community organizations and this year only three awards will be made. Looking to the future, my great hope is that there will be a recognition of the importance of developing the capacity of recovery community organizations around the country and there will be vastly expanded public support for these critical community-based institutions. We organized a briefing with the Congressional Caucus on Addiction Treatment and Recovery to educate members of Congress about what this investment was bringing in developing recovery-friendly communities around the country. with the funding, where we brought in representatives from the recovery community to explain what they were doing and to profile people from the recovery community. Representatives from recovery community organizations briefed members of Congress and their staffs about the RCSP program and about the fact that the recovery community was coming together to support one another in a very public way. We were very fortunate to have very supportive members of Congress – Rep. Patrick Kennedy (D-MA) and former Representative Jim Ramstad
(R-MN) support the briefing as well as many other activities that Faces & Voices has organized.

We’ve worked in coalition with allied organizations to support critical funding for addiction research, prevention and treatment; on the Second Chance Act; and most recently on health reform in Washington, DC. In 2007 and 2008 we spent quite a bit of time working on the successful effort to pass the Paul Wellstone and Pete Domenici Mental Health and Addiction Equity Act to begin to end insurance discrimination facing people with addiction.

**Bill White:** Could you describe how Faces & Voices is financially supported?

**Pat Taylor:** Yes. Before Faces & Voices was founded back in 2001, leading up to the St. Paul Summit, the Alliance Project was supported by Center for Substance Abuse Treatment (CSAT). CSAT has continued to support Faces & Voices to this day and we are producing a video of our message training, Our Stories Have Power with their support. The Robert Wood Johnson Foundation also was an original funder of Faces & Voices. Their support ended in December 2008 and was critical to our early growth and development. They also supported our collaboration with Join Together and Community Anti-Drug Coalitions (CADCA) on HBO’s Addiction public awareness campaign. The National Institute on Drug Abuse (NIDA) is funding our Science of Addiction and Recovery training. I want to briefly mention that what we’re working to do is always bring the recovery perspective. We are very grateful to NIDA for their support of this trainings, which is called the Science of Addiction and Recovery. So many people have seen the brain images of people who are in active addiction, but we very rarely see brain images of people in long-term recovery. We really want to bring the message forward that people can and do recover.

Today we have more diverse sources of funding. We have organizational members who provide financial support – recovery community organizations and our allies. We have a growing list of individual donors who contribute to our end-of-the-year appeal and Joel Hernandez Voices of the Recovery Community awards program. We also have received support from pharmaceutical companies and other generous donors. Reckitt Benckiser supported our Recovery Voices Count campaign in 2008 and this year. And we’ve just received funding from the Open Society Institute to support our work building the capacity of recovery community organizations.
**Bill White:** Do you envision a day in the future when the bulk of funding for Faces & Voices and local recovery advocacy groups will come from recovering people and their families?

**Pat Taylor:** I certainly do. We’re excited about the growing number and level, of contributions by individuals to Faces & Voices and local recovery community organizations. Local groups are using events like Rally for Recovery! during National Recovery Month to bring in new sponsors and supporters. We’ve just finished our second matching-gift campaign. Right now, we have significant contributions from individuals, and I envision a day when that will be more than the majority of our funding. But like local recovery community organizations, Faces & Voices is challenged to develop the resource base that we need to grow and thrive. The recovery community is used to supporting opportunities for individuals to get treatment and recovery support. There is a desire, which is totally understandable, to make it possible for people to find recovery through treatment, through scholarship programs, and other kinds of activities like that. Supporting a local recovery community organization or a national advocacy organization is a different kind of giving and it’s going to take awhile for it to grow. Part of our job in the recovery advocacy movement is helping people understand that when public policies change, more individuals can get help through recovery community centers, through recovery community organizations, through effective treatment. Then there will be a greater understanding and willingness to invest in supporting recovery advocacy and recovery community organizations financially in addition to the many gifts of personal time and talent that we experience every day.

**Bill White:** How have attitudes of various communities of recovery towards the larger recovery advocacy movement changed since you’ve been at Faces & Voices.

**Pat Taylor:** I think there’s been a tremendous change in terms of people’s willingness to be part of the recovery advocacy movement. We have a brochure called “Advocacy with Anonymity” that we produced with the National Council on Alcoholism and Drug Dependence, Join Together, and the Johnson Institute. It was updated a couple of years ago with our messaging about long-term recovery. They have been flying out the door and we’re reprinting another 50,000 copies. I’ve been in numerous situations and conversations where people are talking about their willingness to be
public about their recovery experiences, again, as a person in recovery or a family member. I’ve witnessed a tremendous change. When you think about the proliferation of books about people’s recovery experiences, the numbers of people who are participating in recovery community organizations and activities around the country. I think that there is a growing understanding and appreciation of how important it is to put a face and a voice on recovery and to make it possible for others to understand that people can and do get well.

Bill White: I’ve been writing about several broad trends that seem to be unfolding: the cultural and political awakening of recovering people and their families, the diversification of recovery support groups, the advocacy movement, new recovery institutions such as recovery schools and recovery industries. What’s your sense of this larger picture that’s unfolding?

Pat Taylor: Well, there’s so much going on that I can’t even keep track of it. I’ve been talking with a filmmaker who is making a film about recovery churches. There’s a growing number of recovery high schools. There are more parent groups organizing. It’s just amazing how much is going on. It’s as if a great untold story is beginning to be told. There’s a tremendous cultural shift going on right now. It’s reflected in the new leadership at the federal Office of National Drug Control Policy and its focus on recovery. We may even have an Office of Recovery there. The Center for Substance Abuse Treatment has been focusing on recovery-oriented systems of care. The challenge for the organized recovery community and Faces & Voices is to make sure that names aren’t just changing, and that there are real changes in policies and practices. It’s hard to pinpoint what it is, but we’re at this real opportune moment in terms of the development of a culture of recovery. I think about it in terms of the HIV/AIDS movement. There was political activism coupled with the development of social and cultural supports coming from the community. The vibrancy of a developing culture of recovery and new cultural institutions reflect a shift that’s happening right now.

One next step is to let the rest of America know about what’s happening, that people are in recovery and living incredible lives. Every day there’s a new organization, new initiative underway – just three years ago, no one had thought about recovery coaching. Today there are Recovery Coach Academies. There are recovery film festivals, websites where people are sharing recovery music, recovery poetry, new recovery community centers opening. It’s permeating our culture in a whole different kind of
way. How we share all of this with the rest of America and maintain a focus on long-term recovery is a challenge and an incredible opportunity. We still know so little about the recovery experience. When I first came to Faces & Voices I asked, how many people are in long-term recovery? The answer, we don’t know. We now say that there are over 20 million Americans in long-term recovery, but that’s an estimate. We need more research about what it means to get well.

**Bill White:** How would you characterize the relationship between addiction treatment providers and recovery advocates around the country?

**Pat Taylor:** First I’d like to talk about the Wellstone-Domenici law and why I think that it was important for recovery advocates and for Faces & Voices of Recovery to be so involved in that fight. We had two members of Congress – Representatives Patrick Kennedy and Jim Ramstad, who were willing to share their personal recovery stories while leading the fight to end insurance discrimination facing people with addiction. They held forums or town hall meetings across the country where real people and families who had struggled with addiction and mental illness told their stories to elected officials – about how they weren’t able to access the care that they had a right to. Those stories made a difference. The second part of it was how we think about public policy and making a difference in the lives of people seeking or in recovery.

The fight to begin to end insurance discrimination gave us an opportunity to inform policymakers, the media, and the public about the fact that there is discrimination. As we worked on the issue, we developed messaging for advocates to talk about ending insurance discrimination, and that was very intentional because the fight for parity was part of a much bigger and longer-term strategy to end discrimination and we were able to demonstrate the power and influence of an organized recovery community.

By the way, the late Senator Paul Wellstone was one of the speakers at the 2001 summit when Faces & Voices of Recovery was founded. He talked about developing a new civil rights movement, and that’s really what this is all about. The effort to end insurance discrimination is only the beginning.

When this legislation was proposed three years before its final enactment, people with addiction were still excluded. It was very important for the recovery community and all of the allied organizations who worked on this effort to step up to the plate and say, “Hey, people with addiction need to have the same coverage, not only with people with other illnesses,
but also people with mental illnesses.” That makes me think about language. We don’t want to be lumped with people with mental illness and described as behavioral health, we really have to be out there in talking about addiction recovery. It would have been horrendous if people with addiction had been excluded from the Wellstone-Domenici Act. This important victory also helped set the stage for the larger health reform debate that we’re in the middle of right now. And who knows how that’s going to turn out? If something moves forward and if there is inclusion for addiction and mental illness, it will be in large part because of the all of the educating and advocating that happened in the years that led to enactment of the Wellstone-Domenici Act. We laid the groundwork for members of Congress and policymakers to say, “Oh right. We better make sure that we include that. We’re also hopeful that there will be coverage for peer and other recovery support services.

Former Congressman Jim Ramstad has said many times that the engagement of the recovery community and Faces & Voices of Recovery was critical to passage of that important legislation. It was an important victory and gave us an opportunity to really build some relationships and political capital. It gave us a chance to get out the story that that people can and do get well and as the law gets implemented, that more people will get the help that they need to recover. So as we’re moving forward with this health reform debate, we are part of the equation, and hopefully we’ll stay there.

**Bill White:** Faces & Voices of Recovery has spent considerable time on the issue of language. Are we making progress on this front?

**Pat Taylor:** I think we are. We have a long way to go, however. One of the important contributions that I think we have been able to make in terms of this issue of language is helping people articulate what it means to be in long-term recovery. I frequently tell the story of when I first came to work here and went to a public meeting where there were a people were talking about public policy issues. One person got up and introduced himself as an addict and proceeded to talk about whatever the policy issue was. I was like, “Oh my God, I didn’t know he was an addict.” Low and behold, the guy had 26 years of recovery, and I was like, “Wait a minute. Something’s not right here. We really need to work to figure out ways for people to talk about what it means to be in long-term recovery or to have a family member in long-term recovery.” I am so pleased that this concept of long-term recovery, which was articulated at the St. Paul summit in 2001. We have
been able to use the research that we have done to develop messaging and language that people can use to describe their relationship to recovery when they’re in a public setting.

There are two conversations that happen, one is within the recovery community, where just like any other community, if you were working for an automobile company, you’d have the same issue, which is when you’re talking about what model car to build, you’d use certain words, language, and yes, acronyms. You don’t use that same set of language when you’re talking to the public and the policy makers. So we needed to develop language to talk about what recovery is and what it means and how it works to people outside of the recovery community. I really think we have made tremendous progress in terms of helping people articulate what recovery is – defining it and giving language to talk about it – with friends or neighbors, employers if they want, and in the media. I’m very pleased by the movement that we have made in that area.

On the issue of communicating with the broader public, we’re seeing language like “substance use disorder” more frequently. I’m not sure who knows what that means and was pleased about the proposal to use the word “addiction” in the proposed DSM – V. We have to be careful to use language and words that the public understands. Another language issue is the use of the word “substance abuse” and “substance abusers,” which are still rampant. I was just at a meeting and 25 people talk about substance abuse. We have a long way to go and language matters. We are making progress but we have to keep our eyes on this and continue working on it. We should be talking about people getting well, using language that reflects health and wellness, it’s so important.

One language issue that I’m concerned about is when people talk about relapse as part of recovery. We need to throw that out. To my mind, relapse is part of addiction, the reoccurrence of the illness. It’s not part of the wellness. With other illnesses, you don’t talk about relapsing from cancer or diabetes. Also, we don’t want to set up an expectation that “You’re going to relapse. It’s part of your recovery.” We know so little about peoples’ long-term recovery experiences and should be very careful about not having people expect relapse to be part of their recovery experience.

**Bill White:** You’ve had a lot of opportunities to represent the recovery advocacy community with NIDA, NIAAA, CSAT, lots of state agencies and private foundations. Are you seeing a shift yet towards a kind of recovery paradigm in your work with these organizations? Are they starting to get it?
**Pat Taylor:** I think there’s a lot going on. I’m very excited about the new leadership at the Office of National Drug Control Policy (ONDCP), for example. The media campaign has a new public service announcement about methamphetamine use featuring a gentleman who is a drug court graduate with five years of recovery and he talks about what his recovery means to him and has a tag line that people can and do recover. We’re hopeful that there will be a new Office of Recovery at ONDCP that will be a downpayment on a larger recovery focus. Just think back 10 years ago about the stigmatizing nature of many of the ads coming out of ONDCP. This new campaign combined with the new leadership of Director Gil Kerlikowske and Deputy Director Tom McLellan – both of whom were at the Brooklyn Bridge rally last September with over 10,000 people from the recovery community – is very exciting – there’s much more of a solution and recovery focus.

Obviously, there’s been a lot of work coming out of the Center for Substance Abuse Treatment (CSAT) on developing recovery-oriented systems of care. CSAT had a recovery summit back in 2005 and there’s growing discussion about it; but what the reality is going to be remains to be seen. Recovery-oriented systems of care isn’t a program – it’s a dramatic rethinking and shift in perspective. I hope that we will be able to fully take advantage of this shift in perspective, I don’t know. The voice of the organized recovery community and the recovery community must be part of it.
**Bill White:** Faces & Voices and the Johnson Institute have been very involved in recent years in training local recovery advocates. Could you describe this training and the fruits it is bearing?

**Pat Taylor:** Yes. I can’t tell you how important I think it is to be able to provide training for local recovery advocates. Faces & Voices has two major trainings: Our Stories Have Power, a message and media training on delivering the recovery message to family members, employers, friends and neighbors, as well as to the media. We are using a “train the trainers” format so that the people who come to our trainings can then go back into their community and train others and will be releasing a video of the training in March, 2010. We also have our Science of Addiction and Recovery training, which we developed with support from the National Institute on Drug Abuse. The genesis of that training, I think, tells it all in terms of our recovery advocacy movement. When Faces and Voices had our summit in 2005 in Washington, DC, Dr. Volkow, NIDA’s head, spoke. Our trainer, Flo Hilliard, approached her and said, “We really need to figure out a way to get information based on science to recovery advocates about the science, not only behind addiction, but also behind recovery.” So our Science of Addiction and Recovery training shows images of a brain of a person in recovery. It’s available on DVD.

One thing that has struck me as we’ve been going around delivering these trainings is the power of information for family members to help understand what is going on in the lives of their loved ones, but also the power of information for people seeking and in long-term recovery.

We also do training around specific activities. We have an organizing network that meets monthly by phone leading up to Rally for Recovery! where recovery community organizations learn about ways to build up their events and learn from one another’s experiences. And we’ll be doing Recovery Voices Count, our civic engagement campaign, working with recovery community organizations to register voters and carry out other civic engagement programs.

The Johnson Institute had a wonderful training called Recovery Ambassadors that brought people together and provided an opportunity for them to think about how to bring the message to people in their communities. Johnny Allen, who was president of the Johnson Institute, developed this training with Dona Dmitrovic to stimulate the development of an organized recovery presence in communities. It’s really paid off. For example, a Recovery Ambassadors training in Kentucky laid the ground
work for People Advocating Recovery’s launch. The Johnson Institute brought in people like Joel Hernandez when he was alive to talk about why he decided to step forward and stand up for his rights, taking his employment discrimination case all of the way to the Supreme Court. Local elected and appointed officials have spoken. For the moment, the trainings aren’t being held, but we’d like to get them up and running again. These are opportunities for people to come together to hone our skills as recovery advocates, bring in others from outside of the community, and together decide on next steps that we’ll be taking.

A number of recovery community organizations like CCAR, PRO-ACT and the El Paso Alliance are also doing trainings. They are very critical and are making a tremendous difference in building the recovery movement.

**Bill White:** Faces & Voices of Recovery has played a really major role in organizing support for National Recovery Month activities. Have you seen these activities change over time, and if so, how?

**Pat Taylor:** I’ve seen them change dramatically over the last five or six years. We have worked to raise the profile of these activities and help groups develop more capacity to carry out effective events during Recovery Month. About three years ago, we started Rally for Recovery! at Phil Valentine of CCAR’s suggestion, to bring together the many events around the country in a more organized way. On Rally for Recovery! groups all around the country have events on the same day as part of Recovery Month. One thing that has struck me, as it always does, is the willingness of the recovery community to share information and expertise. During these organizing network calls, we have groups that have been particularly effective—for example, in attracting media, community sponsors and doing turnout talk about what they’ve done. This year we’re documenting those experiences in a series of organizing tools. The first Rally for Recovery! three years ago, involved 30,000 people at 40 events all across the country. In 2009 there were over 60,000 people all across the country and our goal for 2010 is 100,000! We have a “hub event,” one location where groups call in and report on what’s happening in their community – whether it’s 50 people or 5,000!

These events offer hope to people and families still needing recovery and raise the profile of the organized recovery community as a constituency to elected officials. We have mayors; we have governors; and elected officials participating in Rally for Recovery! and Recovery Month. PRO-ACT in Philadelphia and FAVOR-SC in South Carolina had billboards
advertising their walks! That kind of public face on recovery is one of the most exciting developments.

The Recovery Month Planning Partners, which is part of the federal government’s Center for Substance Abuse Treatment, have also grown and Faces & Voices and our allied organizations are part of that network. There’s a rich website at recoverymonth.gov with lots of resources and webcasts and the number of events and their sophistication continue to grow. An important development is the addition of an advocacy component to Recovery Month and to Rally for Recovery. We encourage groups—and many, many do—to register voters, educate voters, educate elected officials, speak out on behalf of advocacy issues that are in the community. For example, Kentucky’s Rally for Recovery! featured information about a call-in day to restore voting rights. All of these components – advocacy; face painting; musical celebrations; walks – add up to a growing recovery presence during the month of September.

Bill White: I’m always amazed at the frequency of emails that I get from you that are soliciting particular types of people to share their recovery stories for various media. Could you describe a little bit of this linkage role that Faces and Voices is playing with all these media outlets?

Pat Taylor: I’d be happy to. I think it signifies a growing interest on the part of the media in the recovery perspective. A reporter will call us and be writing, say a story about the National Survey on Drug Use and Health or a particularly horrible thing that happened in the community around addiction. They’re looking for the voice of real people and we’re in the very fortunate position of being able to connect with a large network of people in recovery and family members all across the country. So what happens is typically, we will get a call from a reporter saying, “I’m looking for a 25 year old woman in recovery from methamphetamine who lives in the San Francisco Bay area” because the reporter is calling from a news outlet in that area. We send out those media requests through our network and ask folks to get back in touch with us. We have a policy at Faces and Voices of Recovery of not putting someone before the media unless they have at least two years of recovery. Then we spend time talking to an individual about what it means to be in the media and do a “dry run” before making the connection with the media. These are important opportunities for us to let the American public know that people can and do recover. We’re a mini-booking agent for the recovery community. The most important thing is that we not ask people to be in the media without giving them preparation and time to think about
ways to respond to questions, just like in any other advocacy effort across our country.

Bill White: You’ve had the opportunity to participate in local recovery celebration events virtually all across the United States. I wonder from that experience what you think the importance of such events are and if there are any images or stories that really stand out from these that you could share with us?

Pat Taylor: One of my first experiences when I came to Faces and Voices of Recovery was Recovery Month. I decided that I really needed to get out and meet people so I took a road trip to New England. My first stop was in Ellsworth, Maine where a recovery-related play was put on in a town hit by addiction-related deaths. I was able to—in a very intimate kind of a setting—get to know people who are part of Faces & Voices and the Maine Alliance for Addiction Recovery and find out more about their communities and what they were doing. Then I drove to Hartford, Connecticut, where I went to Recovery Walks! A very public big display of recovery and took part in a walk around the capitol in Hartford and met the folks at CCAR for the first time. In Ellsworth, Maine, it was a moving community discussion about young people, addiction, and recovery after the play. There were teachers; young people from the local high school; people in recovery; law enforcement officials; and the mayor. The conversation that took place there is what a public recovery community is all about. It’s figuring out at the grassroots level how to understand what needs to happen in order to make it possible for more people to recover. And then moving on to Hartford, there were thousands of people celebrating and marching. They had face painting; they had clowns and of course food and music!

Another image is from 2008 at our Rally for Recovery! Hands Across the Bridge hub event in St. Louis, Missouri. A terrific steering committee worked with Tom Coderre to organize it and Lou Gossett spoke. People were calling in from all over the country. There were thousands of people at different events, but the call that I remember the most came from Evan Luther at the University of Texas. He had been doing our Recovery Voices Count project there and they had set up a recovery club on campus and made a video that’s available on our web site. He was so excited to call in to say they had 10 people at their event. That’s how this all starts.

Bill White: That’s a wonderful story.
Pat Taylor: It’s the coming together of diverse groups of people in different communities in ways that work for them that’s so important in raising the profile of the reality of recovery and offering hope to people who still haven’t found recovery. These events are so important because they bring people together. They allow a conversation to happen with the broader community, be it on a college campus or in a theater, or people walking around a state capital with elected officials there. These events are very important and the addition of advocacy to recovery celebrations will help us move forward.

Bill White: At the 2001 Recovery Summit, there was a sense that we didn’t need a new organization to necessarily lead us, but we needed an organization that could connect us. It seems like the Faces & Voices of Recovery website has served that connecting function. Could you reflect a little bit on the role of the website and what it’s been able to do for us?

Pat Taylor: The website is critical in linking, sharing information and resources, giving groups the ability to let others know what one another are doing, and in sharing those experiences. Our website is the hub of all of the work that we have been doing at Faces & Voices. People can find out about us and who their regional representative is, they can find your writing, it’s really become the place to go for recovery information. We have our Guide to Mutual Support Resources, our Online Advocacy Action Area and other tools for recovery advocacy. We’re able to pull together the various parts of this recovery movement in one place, and people can come in at different places and find out where they can connect and also how they can contribute.

Bill White: One of the other surprises I’ve had is how rapidly recovery advocacy is becoming an international movement. Could you describe some of the things Faces and Voices has done to support recovery advocacy in other countries?

Pat Taylor: I’d be happy to. This is also very surprising to me. These international developments are not only in the area of recovery advocacy but also providing assistance for people who want to get involved in providing treatment. I know the National Association of Alcohol and Drug Abuse Counselors has been going to different places around the world, the National Association for children of Alcoholics was recently in Germany and recovery community organizations also have been traveling worldwide in
terms of providing information and support. The Detroit Recovery Project, under Andre Johnson’s leadership, was recently in Zaire. I had the pleasure of going to Scotland with you and Keith Humphreys to help the folks there think about how to build the recovery advocacy movement. Some folks have been to Russia, so there is a lot going on internationally. There’s a FAVOR South Africa. We know of at least eight or nine Recovery Month events that are going to be happening in different places around the world in 2010. It’s catching on. This is becoming an international movement. It just makes sense. As people come together, they want to make it possible for others to find sustained long-term recovery and without the engagement of citizens and the grassroots, that’s just not going to be able to happen. We’ve been providing information and support, a lot of linkage, again, to our website. That’s a great place for people to come in.

**Bill White:** There’ve been earlier efforts to organize a national recovery advocacy movement that collapsed after a few years. I’m thinking of groups such as the Society of Americans for Recovery (SOAR). What do you think are some of the lessons we’ve learned about how to initiate, and maybe even more importantly, sustain such a movement at both the national level and local levels?

**Pat Taylor:** I think one of the most important lessons is the need to help build the capacity of recovery community organizations, which are really the heart and soul of the recovery advocacy movement. Some groups like the Massachusetts Organization for Addiction Recovery (MOAR) came from the SOAR era, so we can continue to grow and development despite some historical setbacks. We need to pay attention to figuring out ways to make it possible for groups to have strong, involved boards of directors, have stable funding bases, have the tools and the expertise to engage the media and others in their communities because you need to have that kind of an infrastructure at the grassroots level to support the national recovery advocacy movement.

These are exciting and challenging times in terms of the nation’s economy in terms of building financial support for local, state, and national organizations. We have to make sure that we are working together to support one another and that our boards of directors and others are paying attention to the need to have strategic plans that support and build our national recovery advocacy movement. What’s exciting to me is that since the 2001 summit, there’s been tremendous growth and development for existing recovery community organizations and a raft of new and emerging groups.
We need to stay as connected as possible and build our capacity because we’re going to be here for the long haul.

**Bill White:** What is your vision for the future of the recovery advocacy movement?

**Pat Taylor:** One of my visions is that the recovery community is recognized as the experts that we are in terms of what makes recovery possible in our country, and as this becomes international, around the world. I see us organized with a political agenda that will change public attitudes while we change public policies to support recovery. Another vision of mine is that there is broad public understanding of the reality of recovery and support for changed public policy that will support people. My vision is for recognized, visible, organized communities of recovery with recognition of addiction as a public health – not a criminal justice issue and that we have been able to really change the public discussion to focus on the solution, which is recovery.

**Bill White:** What has your role in the recovery advocacy movement meant to you personally?

**Pat Taylor:** Well, first of all, I have met the most incredible people you could possibly ever want to meet. I just can’t say enough about what those relationships mean to me and how important it is to share this work and what I’m doing. On a personal note, I lost one of my oldest friends to an alcohol-related suicide a little over two years ago, and that’s partly why I’m so committed to this work. There is too much needless death around us because of our failure to think about and invest in people who are struggling with addiction and to acknowledge the reality of recovery. I’m still shocked by my friend’s death. What can I say? Her death while I was working here as the Executive Director of Faces and Voices of Recovery brought it all home to me. So many people have accomplished so much, but we still have far to go to make it possible for more people to recover and sustain their recovery and to end these needless and inexcusable deaths.

**Bill White:** Are there any early pioneers of the new recovery advocacy movement whose lives and contributions you feel we should be celebrating?

**Pat Taylor:** Well, there are an awful lot of them. As you were asking that question, I was thinking about how strongly I feel that recovery community
organizations are the heart and soul of the recovery advocacy movement. There are so many people who are contributing to their growth – as volunteers, as staff. Often unheralded are the people who are making it all possible – serving as board members; lobbying their elected officials; telling their stories in the media; giving of their time and talent. They are the early pioneers.

Of course, there are many, many individuals, and it’s hard to name them all. A few people who come to mind are Joel Hernandez, who without a connection to a recovery community organization, decided that he wanted to stand up for his rights and did so. People like Don Coyhis at White Bison and the Wellbriety movement; the leaders of recovery community organizations around the country, it’s hard to name names, because I’m sure that I’ll leave people off of the list. Johnny Allem has played a very important role at SOAR, the Johnson Institute, at Faces & Voices and now that he’s retired, here in DC at the DC Recovery Community Alliance. We have another group of people who are elected officials at the local, state and national levels. They are coming forward and not only telling about their own recovery experiences, but advocating on behalf of others. And Tom Coderre, who was our National Field director, will be remembered as a pioneer. Among his many contributions was organizing the first Recovery Wellness rooms at the Democratic and Republican National conventions in coalition with other addiction and mental illness organizations in 2008 as part of the Whole Health Campaign.

Our current board chair, Carol McDaid, and previous board chairs Merlyn Karst and Lisa Mojer Torres have all played a very important role in terms of moving forward Faces & Voices of Recovery and the recovery advocacy movement. We’re excited that we’ll be honoring three recovery leaders this year as part of America Honors Recovery, there are just so many people making so many contributions.

**Bill White:** Let me ask a final question and that’s really for our readers, how individuals who are interested in getting involved in this movement, how they can do that at a local or even national level?

**Pat Taylor:** There are so many different ways that people can get involved in supporting recovery. One of my dreams is to write a book called “50 Ways to Support Recovery” To get involved, please go to our website at www.facesandvoicesofrecovery.org where you can sign up for our e-newsletter. Also on our website there’s a map of the United States, and you can click on it and find out if there’s a recovery community organization...
near you, and how to join it. If there isn’t one in your community, get in touch with us, and we’re happy to help you get going. You can also speak out as a person in recovery, or as a family member in different settings. There are many ways to get involved. If you don’t want to speak out, you can support recovery in your community through education and by supporting others who are speaking out. There’s lots of behind the scenes work that people can be doing. No matter what, the most important thing is to find what works for you in terms of helping move this recovery advocacy movement forward. You can make a sign for others to hold. You can be part of a Recovery Month celebration in your community. You can work with physicians in your community if you’re in recovery to let them know that people can and do recover. Find what works for you and be part of this movement.

**Bill White:** Pat, this has been wonderful. Thank you for your willingness to share this information with us.

**Pat Taylor:** My pleasure. Thank you.