
Abstract

Substance use disorders (SUD) are, for many, chronic conditions that are typically associated with severe impairments in multiple areas of functioning. "Recovery" from SUD is, for most, a lengthy process; improvements in other areas of functioning do not necessarily follow the attainment of abstinence. The current SUD service model providing intense, short-term, symptom-focused services is ill-suited to address these issues. A recovery-oriented model of care is emerging, which provides coordinated recovery-support services using a chronic-care model of sustained recovery management. Information is needed about substance users' priorities, particularly persons in recovery who are not currently enrolled in treatment, to guide the development of recovery-oriented systems. As a first step in filling this gap, we present qualitative data on current life priorities among a sample of individuals that collectively represent successive recovery stages (N = 356). Findings suggest that many areas of functioning remain challenging long after abstinence is attained, most notably employment and education, family/social relations, and housing. Although the ranking of priorities changes somewhat across recovery stages, employment is consistently the second most important priority, behind working on one's recovery. Study limitations are noted, and the implications of findings for the development and evaluation of recovery-oriented services are discussed.