Connecticut Community for Addiction Recovery

2011 ANNUAL REPORT

“The CCAR Recovery Coach Academy is pure recovery genius!”
- October 2011 participant

The Connecticut Community for Addiction Recovery envisions a world where the power, hope and healing of recovery from alcohol and other drug addiction is thoroughly understood and embraced.
Our Mission, Our Values, Our Story

Our Mission - The Connecticut Community for Addiction Recovery (CCAR) organizes the recovery community (people in recovery, family members, friends and allies) to 1) put a face on recovery and 2) provide recovery support services. By promoting recovery from alcohol and other drug addiction through advocacy, education and service, CCAR strives to end discrimination surrounding addiction and recovery, open new doors and remove barriers to recovery, maintain and sustain recovery regardless of the pathway, all the while ensuring that all people in recovery, and people seeking recovery, are treated with dignity and respect.

Our Values – CCAR meets people where they are. We don’t push any one form of recovery on anyone. Over the years CCAR has develop some foundational principles on which we base our work. They are

• You are in recovery if you say you are
• There are many pathways to recovery
• Focus on the recovery potential, not the pathology
• Err on the side of the recoveree
• Err on the side of being generous

Many times people are left to navigate the system on their own. By the time they get to us, they are frustrated, crying, discouraged. We talk with them. We meet them where they are. We offer the hope of a new way of living. We help them.

Our Story – We were founded in 1998 when Bob Savage, a long-time employee of the state, set out to answer two questions. Where are the people in recovery when policy decisions are made? Can the recovery community be organized? Fourteen years later, thanks in large part to his early vision and dedication, the organized recovery community is at the table (locally and nationally) and our presence is growing. In the early years, CCAR focused solely on advocacy and because of the influence of the recovery community, evolved into providing recovery support services. We are often seen as pioneers and our consulting services are in high demand.
Dear Friends,

I am a blessed man. My work is my purpose. My purpose is my work.

I had the opportunity this year to make two trips across the Atlantic to share CCAR experience, strength and hope in Wales and England. I visited a recovery community center in Newcastle on the Tyne in the UK that is twinned after Hartford. When I started with CCAR back in January 1999, having one of our centers twinned across the pond was not even imaginable. We’ve come a long way.

Often I am asked, “How does CCAR do so much?”

We have tremendous support from the State. DMHAS has believed in our recovery community organization from the outset. Without their support, we could not have helped so many people. The staff strives for excellence. For us, our work is more than a vocation. And finally, volunteerism is the engine that drives the agency. There seems to be unlimited power within the recovery community. Today, our three recovery community centers are far too small to handle the number of people that flock to them. Visits have tripled in number this year from 15,000 in 2010 to just under 45,000 in 2011! Bridgeport is so packed that we just signed a lease to double our space. Our lease in Willimantic is up this year and we’ll need to go bigger there too. And in Hartford, well there is the building next door being sold for a song… but, I hear Bill’s voice in my ear saying we have to take care of the one we have and it needs a LOT of work.

We are getting more calls and emails from people looking for services, assistance, resources, recovery housing, recovery, volunteer opportunities, detox or a listening ear. Yoly recently got a call from an 83-year old woman who found our first video (VHS) “Putting a Face on Recovery” at a Goodwill store and decided to watch it. She was so moved by Diane’s story and wanted to know how Diane is doing today. She then told Yoly about her 43-year old daughter who is addicted. As the conversation went on, Yoly realized she just wanted to talk to someone. So Yoly listened. Sometimes, listening is all we can do. And it helps.

The number of people we are calling through Telephone Recovery Support has nearly tripled in the last few months. We’re calling nearly 650 people each and every week! Volunteerism is through the roof too. We reached a high-water mark of more than 20,000 hours served. People from 28 different states travelled to CT to attend our Recovery Coach Academy. Many thanks to the CT Behavioral Health Partnership for letting us use their beautiful space for the Academy. You rock, Lori.

This year I am encouraging our staff to strive even more for excellence using our recently completed strategic plan for guidance. Even though we have set the bar high with our latest results and outcomes, I believe the best is yet to come. The recovery community here in Connecticut has always amazed me. Inspired me. I have every reason to remain optimistic.

With recovery all things are possible.

Blessings,

Phil Valentine
CCAR Executive Director
In recovery since 12-28-1987
Phil’s Trip
Wales and the UK
2011
Advocacy

CCAR believes in the personal story of recovery. We offer ourselves as living proof that recovery is real. By telling our stories, the voice of the recovery community offers hope. And when people hear and see people in recovery, they are much more likely to support and fund services that help people initiate and maintain recovery. It’s a big problem that left untreated has only three conclusions – jail, institution or death. We promote the fourth and best outcome - recovery.

Service

CCAR strives to make people feel welcome. CCAR is a place where our guests don’t have to feel alone, ostracized or ashamed. At CCAR people feel safe. We provide activities/trainings that help people new to recovery get through one more day. We also provide opportunities for people in recovery to help those that are new to the journey, showing them the possibility of a redeemed life.

Recovery Community Centers

“I lost my home due to my addiction and was homeless for 5 months. I was living in and out of shelters. I had no mailing address. I heard about CCAR and came to the Center. I got some direction with IOP from a treatment provider and I have been clean 6 months. CCAR has helped me get an apartment and been a big support in my recovery. I come here to use the computers and phone to make appointments and when I need someone to talk too, someone is always there for me”. ~Michele A.

A Recovery Community Center is a recovery-oriented sanctuary located in the heart of the community. It’s a safe place where people can work on their recovery. In the addiction prevention, treatment and recovery field this model is often referred to as peer-to-peer recovery support services. CCAR has been a pioneer by developing telephone recovery support, recovery coaching, recovery housing assistance and recovery vocational services. Peer-to-peer recovery support services are as varied and creative as the people who create them.
How does someone get help at CCAR?

When someone calls or walks into one of our Centers, they are asked “how can we help you?” That’s our assessment. We go from there. Below is a sampling of how CCAR has helped people stay free from alcohol and other drugs – in other words, how we helped them sustain recovery.

* Hosted holiday parties where hundreds and hundreds attended. In Willimantic, CCAR was on the front page of the local newspaper for caroling during the Christmas season.
* Produce local cable TV shows that put a positive face on recovery.
* Clothed people in recovery with professional attire for interviews, etc. Thanks to Men’s Wearhouse.
* Helped people figure out the next steps on their personal road of recovery through free guidance from trained recovery coaches.
* Held “Don’t Gamble with Your Recovery” workshops and meetings.
* Hosted Wellness Days. Smoking cessation classes and support.
* Plan and participate in small fundraising events – tag sales, car washes, serve in concession stands at minor league baseball games, mini-grant writing, etc.
* Held HIV/AIDS, Hep C workshops with on-site confidential HIV and Hepatitis C testing.
* Assisted people in acquiring food stamps.
* Hosted free dental care.
* A recovery bookstore.
* The BRCC supports “KeyTrain,” an initiative that prepares people to become more employable.
* Supported people in recovery with their application for a pardon.
* Distributed transportation vouchers.
* Hosted All-Recovery meetings – a “non-denominational” recovery support format.
* Planned alcohol and other drug free social events – karaoke, talent shows, softball, basketball, etc.

We improved our ability to track activity in each of the Centers. Here is some of the data.

In 2011, our 3 Recovery Community Centers..

* Handled more than 35,000 visits! This is more than double the amount we had in 2010. Is it any wonder we have to expand?
* Hosted 38 different trainings 300 times with 1,723 in attendance.
* Held 375 other events with 14,031 participants in attendance.

INTERESTING FACTOID:

89% of all people visiting CCAR recovery community centers have had some criminal justice involvement.
Wonderful People of CCAR
2011
Recovery Support Services

Telephone Recovery Support

“A lot of people are appreciative when we reach out to them…it’s supportive when we call every week. It is important for them to know people are still thinking about them because they are being supported in their recovery even when they are having a hard time. I am grateful for the experience to meet new people through these calls and find it very rewarding. It is refreshing and inspiring to see people struggling to better themselves.” ~Jillian, an Eastern student who has been making TRS calls for two years

The beauty is in the simplicity. TRS helps people in recovery stay in recovery. Sometimes just a phone call can make the recipient feel wanted, included and cared about. When making the call, the caller will often feel rewarded when they have spoken to someone and can share in their joy or share in their sorrow and know that sometimes just listening and speaking with another person helps both of them immensely.

There’s magic in those conversations.

*This is to express my gratitude to CCAR. As a whole, before coming here I had no direction, no purpose, by coming here I began to get direction. I started attending the All Recovery Meeting and began to talk about me, what I was going through. I began to meet people that were able to identify with me. I also attended the different educational workshops and groups that were given. I learned a lot about different things. CCAR is a positive place for change; I am so thankful that it is here. It’s a safe place where all are welcome; I have found direction, gratitude, respect, hope here. We need more CCARs throughout the state. Thank You!” ~Vincent R.
How does it work?

A person new in recovery receives a weekly call from a trained person to check in and see how their recovery is going. On average, people receive calls for fourteen weeks, often times much longer. In 2010, we enrolled 1,218 new recoverees, our volunteers made more than 27,000 outbound calls and had more than 6,800 conversations about recovery. Look how it’s grown in 2011. We enrolled 1,945 new recoverees, we made 32,636 outbound calls and talked to someone 8,226 times. At the time of this report we are calling about 625 people weekly and this number has been skyrocketing. We may have hit a critical mass. Our volunteers and staff have welcomed this challenge – they love it!

Imagine the spiritual ripple effect all these conversations had on Connecticut’s recovery community. We know our calls help people get back into recovery when a relapse occurs. Just because someone tells us they are no longer in recovery, we don’t kick them out of the program; we keep calling them, checking in with them, seeing if they want help. CCAR is often the only encouraging voice heard at a critical crossroad on the road of their recovery.

Since the beginning of TRS, CCAR has enrolled over 6,000 people, made more than 128,000 calls resulting in 36,000 conversations with about 4,500 recoverees.

Telephone Recovery Support is spreading. The CCAR model is being used in Minnesota, South Dakota, at the Anchor Recovery Community Center in Pawtucket, RI and in Newcastle, United Kingdom. TRS is scheduled to start up in Virginia, New York, Maryland and Maine in the first few months of 2012.

In 2011, CCAR partnered with Recovery Network of Programs on a pilot program to call recoverees while they are in inpatient treatment at two of their programs: Horizons and New Prospects. When they leave treatment, they will have been accustomed to receiving TRS calls for about one month. If they do not have a cell phone, RNP has committed to paying for and distributing 40 cell phones for 6 months. It is too early to measure the effectiveness of this effort, however, I am inspired by RNP’s vision and support and we are encouraged that the program will be successful. We do know that it helped one person...

Cheryle received a call from Mark B. He was a recoveree that was given an RNP cell phone when he was discharged from treatment. He was looking for Adam S., a long time CCAR TRS volunteer. Cheryle told Mark that Adam had not arrived yet. Mark seemed distraught. Cheryle shared about her recovery asked him if she could help. Mark shared that he had an incident at his recovery house and needed someone to talk to. Because he had the RNP cell phone, he called us instead of using. Near the end of the conversation Cheryle told him not to give up before the miracle happens. He said, “The miracle already happened. I called you and didn’t use.”

We believe this model has tremendous potential with all treatment programs.
Recovery Oriented Employment Services (ROES)

“The ROES Program has given me confidence in my interviewing. It also has provided me with tremendous job skills and has taught me how to be a team player. The modules are very, very useful. Not only can you develop your job skills, but the ROES Program gives you another outlet in recovery because you’re doing a program with other recoverees and has provided really helpful tips for my recovery. The ROES Program gave me the tools that I need in my job search and once I find that job, to hold onto it. Diana and Bonnie have been really helpful and that’s a plus. I hope that I can pass along what I learned to someone else in recovery as I do my recovery coaching at CCAR.” ~ Alan G., 2011 ROES graduate, CCAR Recovery Coach

Along with social support and safe housing, employment is the third in the big three for maintaining recovery. CCAR developed a vocational curriculum infused with recovery principles and techniques. Participants are also asked to receive telephone recovery support calls and contribute twenty hours as a volunteer. We have had a successful partnership with ADRC – they are also doing tremendous work in this area.

There were 203 individuals referred to the ROES program, 54 completed the 8-module curriculum, 56 are now employed.

Recovery Coaching

“For anyone in the recovery field, the Recovery Coach Academy (RCA) is an innovative new approach to healing people’s lives that is unlike any other training. Utilizing a dynamic approach to learning that blends both process and content, the RCA offers a once-in-a-lifetime experience that has been referred to as ‘pure recovery genius’. If you’re ready to learn, be challenged, and reap valuable rewards for life, the RCA is a must for anyone in the recovery field.”

In each of our Recovery Community Centers recovery coaching is offered by volunteers who have been trained at our Recovery Coach Academy (RCA). The RCA is our most exciting, innovative and desired training curriculum. In Connecticut, we held the Academy 4 times and trained 124 coaches representing 28 different states. 32 scholarships were provided to volunteers from CCAR. The model was used in several different states and an additional 958 coaches were trained.

2012 holds a lot of promise for the RCA. There are already 9 scheduled. We are working on a business plan to make this even more available and accessible. CCAR is also working with the CT Certification Board (CCB) to have a Certified Recovery Coach credential available by June.

“Being a recovery coach is rewarding because I have walked in their shoes...I hear them and feel what they have been through. My RCA manual is a treasure...my heart is so much into CCAR and giving back. I walk around with my resource packet to help people I meet on the street.” ~Patti, Recovery Coach
Volunteers

“I had planned on volunteering as a Recovery Coach with the Veterans Administration and had purchased my own equipment. Then, one day I stopped by CCAR and after one experience there, changed my goals. I realized I could use my skills to help more people succeed, not just Veterans. I have succeeded far greater than my expectations and found myself putting in more time than before I retired. I have realized that I can’t help everyone even though I still try. The process of recovery coaching has helped me to realize how much it took for me to maintain a balanced life...It has helped me to come out of isolation and to get more involved with other people and our community.” ~Rich, has volunteered over 500 hours since training as a Recovery Coach in June.

“I enjoy volunteering at the front desk for CCAR…and interacting with people from all walks of life. It uplifts my spirit and shows me on a daily basis that I have a purpose in life. Volunteering makes me proud to make a difference in someone else’s life…a fax, setting up an email, helping with a resume, makes a world of difference to someone and I’m glad to be able to help.” ~Tesra, a volunteer receptionist at one of our Recovery Community Centers

CCAR is a volunteer agency. The growth over the last several years has been steady and remarkable. Our active volunteer force generates more positive results than paid staff could possibly accomplish alone. We operate under a classic win-win scenario, where not only the people we serve “win”, the volunteers do as well. We adhere to the time-honored recovery principle, “You can’t keep it unless you give it away.”

<table>
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<tr>
<th>Year</th>
<th>Volunteers</th>
<th>Hours Served</th>
<th>CT Volunteer Rate</th>
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<tr>
<td>2011</td>
<td>317</td>
<td>20,438</td>
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<td>13,449</td>
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<td>2008</td>
<td>292</td>
<td>11,979</td>
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<td>189</td>
<td>8,305</td>
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<td>2005</td>
<td>90</td>
<td>3,450</td>
<td>$74,870</td>
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A quick review of the table above shows that CCAR is a fantastic investment, don’t you think?

Community Education

CCAR, with support from the CT Behavioral Health Partnership, has embarked on a community education project where we bring the addiction recovery perspective to a variety of behavioral health providers across the state. CCAR has held 3 focus groups and delivered 16 trainings reaching 226 participants.
Volunteer Recognition Dinner
April 15, 2011
St. Clements Castle, Portland, CT
6th Annual Volunteer Recognition Dinner Sponsors

Headlining Sponsor $5000
Connecticut Behavioral Health Partnership

Silver Sponsors $1000
Geeks for Good

Friends Sponsor $250
Stonington Institute

Dinner Sponsors
ADRC
Alpha Prison and Community Ministry
Bardaglio Hart & Shuman
Chaos
Chimirri’s Italian Pastry Shop
Connecticut Renaissance
Cornerstone
Fahey & Landolina, Attorneys
Gloria Garcia
Inter-Community Mental Health Group
Mattingly Graphics
McCarthy Associates
Richard and Sharon McCracken
Memorial Baptist Church
Merrigan & LeFebvre Realty
New England Bank
Rushford
Shailerville Manor
Wheeler Clinic
William Leary
12th Annual Recovery Walks!
September 25, 2011
Bushnell Park, Hartford, CT
Recovery Walks! Sponsors

**Top Sponsor $20,000**
WDRC-FM

**Platinum Sponsor $5000**
ACE Taxi 860-244-9999
DMHAS
Recovery Network of Programs

**Bronze Sponsors $250**
CHS African American Men in Recovery
SCADD
High Watch Recovery Center
John Potvin
The Wilson Company of CT
The Siemon Company

**Gold Sponsor $1000**
A&E The Recovery Project
Advanced Behavioral Health
Ambassador Wheelchair
CT ASAM-CT Chapter of the Society of Addiction Medicine
CT Behavioral Health Partnership
Dr. John Kelly
Geeks for Good
Havens of Hope
Latino Community Services
Stonington Institute
Wheeler Clinic

**Copper Sponsors $100**
Alpha Prison and Community Ministry
Anton and Hillary Taschner
BHcare
Carmon Community Funeral Homes
Chemical Abuse Services Agency
Coram Deo
CT Aquarium Services
Green Mountain Coffee Roasters
Heidi Pugliese
Jody Davis
John’s Scrap Yard
Kardas Larson
Lawrence Mayer
Liberation Programs
Marcella MacDonald
Michaela Fissel
Richard and Sharon McCracken
Morris Foundation
New England Health Care Employees
Union District 1199
Pam Ferguson
SERAC
Shailerville Manor
Steven Kant
Steven Moore
Terri Hubbard
Wallace Farrell

**Silver Sponsors $500**
ADRC
Ann Phelan
CT Judicial Branch Community Service Program-Wheeler Clinic
CT Turning to Youth and Families
Dr. Thomas Kirk
Face It
Glastonbury Rotary Club
Reckitt Benckiser
Saint Francis Hospital
Stepping Stone House
Silver Hill Hospital
William Leary
# Revenue vs. Expense

## Statement of Activities and Changes in Net Assets

For the year ended June 30, 2011

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<td>Contributions</td>
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<td>In-kind contributions</td>
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<td><strong>Expenses</strong></td>
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<td>Program services – recovery activities</td>
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<td>Management, general and fundraising</td>
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<td><strong>Total expenses</strong></td>
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