A Brief Primer on Recovery Management (RM)

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Definition
Recover management (RM) is the time-sustained stewardship of personal, family and community resources to achieve the highest level of global health and functioning of individuals and families impacted by severe behavioral health disorders. It is collaborative model between service consumers and traditional and non-traditional service providers aimed at stabilizing and then actively managing, the ebb and flow of one or more chronic disorders.

Distinguished from “Treatment”
Recovery management differs from traditional treatment by: 1) lowering the threshold of service entry and continued service involvement (truly meeting the individual/family where they are) 2) redefining the role of the professional from one of expert “treater” to that of a long-term consultant and ally and redefines the role of the consumer from “patient” to the leader of the recovery management team, 3) shifting the emphasis from crisis stabilization to sustained management of the disorder via the linkage of treatment with a sustained continuum of recovery support services, 4) incorporating peers and indigenous healers/institutions into the service team, 5) re-engineering assessment to a process that is global (rather than categorical) and continual (rather than an intake function), 6) emphasizing sustained monitoring, stage-appropriate recovery education and recovery support services, linkage to the natural resources of communities of recovery, and, if and when necessary, early re-intervention, and 7) evaluating service events based not on their short-term effects but on their impact on the course of one’s recovery career¹.

Distinguished from “Disease Management”
Recovery management has much in common with early service initiatives characterized as “disease management” (DM) approaches but the selection of the term “recovery management”

¹Recovery career is the total span of experience that occurs after recovery from a severe behavioral health disorder has begun. It assumes that events that have short term effects on the course of a disorder may not have equally potent long term effects and that experiences that may not have short term effects may generate potent (cumulative or synergistic) long-term effects.
indicated the desire to focus on the experiences, needs and aspirations of the individual/family rather than the management of costs which many DM models have come to emphasize. In RM, the individual/family experiencing the disorder are the one’s doing the managing (rather than being “managed”) and the primary goal of such management is their own quality of life. In RM, any cost-reductions achieved by this model are desirable side-effects, but not its primary purpose.

**Elements of Recovery Management**

There are seven elements to a comprehensive program of recovery management:

1. **Assessment of Needs and Resources** (identifying the needs and strengths of individuals/families experiencing severe behavioral health disorders with a particular emphasis on eliciting first-person voices)
2. **Recovery Coalition and Recovery Community Building** (linking personal, professional and indigenous community resources into recovery management teams; increasing the service and support capacities of local communities of recovery)
3. **Recovery Resource Development** (creating the physical, psychological and social space within a community in which recovery can occur; creating a full continuum of treatment and recovery support services)
4. **Recovery Education and Training** (enhancing the recovery knowledge and skills of a) people/families in recovery, b) service providers, and c) the larger community)
5. **Recovery Support Services** (removing barriers and enhancing “recovery capital”\(^2\))
6. **Recovery Evaluation/Research** (pursuing a recovery research agenda), and
7. **Recovery Advocacy** (advocating for social and institutional policies that counter stigma and discrimination and promote recovery from severe behavioral health disorders).

**Zones of Recovery Management**

The Recovery management model is based on the recognition that recovery occurs incrementally and episodically across five zones of personal experience: physical, psychological, relational, lifestyle and spiritual. RM models anticipate the ebb and flow of needs within and across these zones and uses progress in one zone to prime improvement in other zones.

**Stages of Recovery Management**

The seven elements of recovery management span three phases in the recovery process: engagement and recovery priming (pre-recovery/treatment); recovery initiation and stabilization (in-recovery/treatment), and recovery maintenance (post-treatment recovery support needs).

**Levels of Recovery Management**

RM can range from a low level of service involvement (e.g., an annual recovery checkup or a quarterly phone call to monitor health status) to a high level of service involvement (e.g., recovery home with high intensity monitoring and recovery coaching).

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\(^2\)Recovery capital is the total amount of internal and external resources one can bring to bear to the initiation and maintenance of recovery. The term was coined by Granfield, R. and Cloud, W. (1999) *Coming Clean: Overcoming Addiction without Treatment.* New York: New York University Press.