

So You Want to Start a Recovery School? In Texas....

Introduction

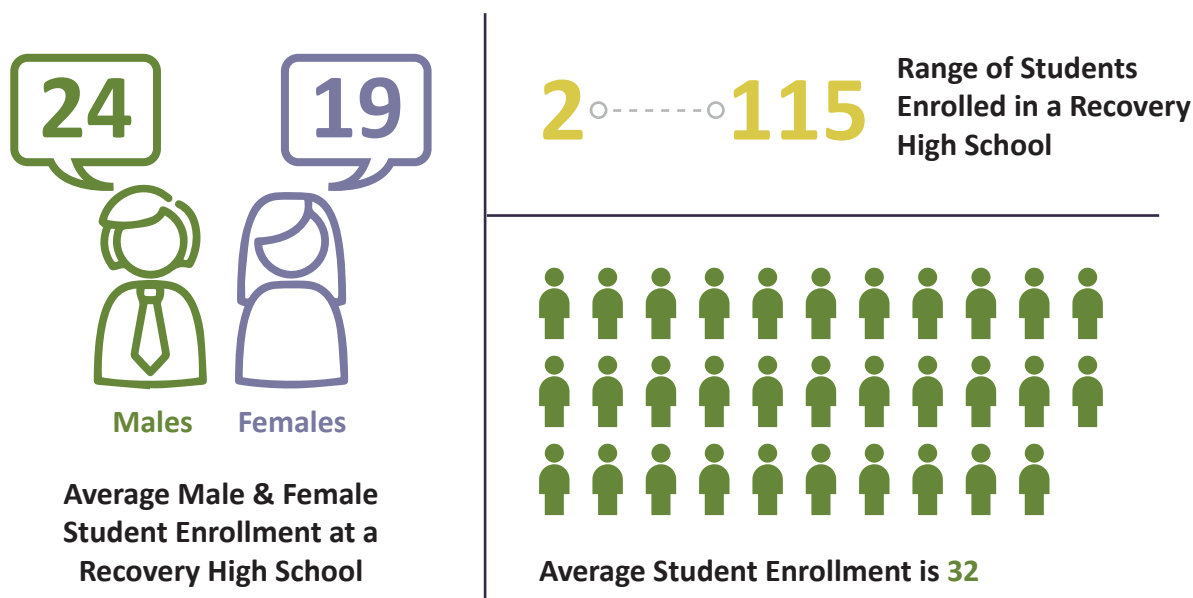
Recovery high schools (RHS's), collegiate recovery programs (CRP's), and Alternative Peer Groups (APG's) emerged organically over the past several decades in response to the growing need to provide recovery support to students in recovery. These developmentally appropriate services are beginning to take root, but are still very much in their infancy stages. Despite recent attempts to increase access and availability to evidence-based youth support services in schools, educators, policy-makers, and administrators have been slow to respond. Only now that a full-blow opioid epidemic has hit the U.S., have these stakeholders realized that our "Just Say No" approach, is no longer working. This paper provides a general overview of the evolution of recovery high schools, collegiate recovery services, current practices/gaps in services, and conclude with a set of recommendations for those communities interested in creating these programs in their local areas.

For far too long, young people have not been able to access adequate recovery support services. Developmentally appropriate peer supports are rare, as is access to treatment and supportive environments in an educational setting. Despite the lack of resources for our nation's young people, there has been significant momentum in recent years to fill the vast gaps that exist in youth recovery support services. The traditional Substance Use Disorder (SUD) continuum of care model has proven unsuccessful with this group. While adolescents (12-18 years old) and emerging adult (18 – 24 years old) populations have been marginalized as high risk, the development of appropriate supports has been lacking within the recovery support services field (Fisher).

The History

The components of a comprehensive continuum of care system: prevention, intervention, treatment, and recovery support services, were originally created to support the needs of adults, rather than the needs of a younger population. As a direct consequence, adolescent treatment professionals, families, and peers have become accustomed to high rates of recurrence within client populations. As a result of the lack of post-treatment resources for adolescents and young adults, peer supports began to take shape in the late 1950's and have evolved slowly over the past fifty years.

While participation in young people's 12-step groups can be helpful, not all communities have access to them. In the late 1960's, the recovery community in Houston, Texas identified a need for a young person's twelve step-like program that incorporated the concepts of youth recovery into a structured setting. Father Charles Wyatt-Brown, the rector of Palmer Memorial Episcopal Church, founded Alternative Peer Groups (APGs) in 1971. Father Charles, as his parishioners came to know him, saw the benefits of youth recovery support services that were peer driven, but supervised by young, relatable adults. Interestingly, as the teens began to meet weekly for support groups, their parents too began seeing the benefits of supporting each other. As a result, APG's incorporated a familial component, further endorsing the concept that when an adolescent's family receives support, the child has an improved chance at recovery (Finch & Karakos, 2014).



As APG's began to spread throughout the local Houston community, and eventually to other states, recovery supports at the collegiate level began to organically. In 1977, Brown University appointed Bruce Donovan as the university's newest Associate Dean with Special Responsibilities in the Area of Chemical Dependency (Finch & Karakos, 2014). In addition to providing counseling, Donovan made sure that Brown students had access to twelve step-meetings on or near campus. Donovan also created an on-campus discussion meeting for recovering students. The group, known as the "Early Sobriety Group," met once each week. It would ultimately become known as the first collegiate recovery community in the United States.

Not surprisingly, the need grew for recovery support at universities and colleges throughout the nation. Rutgers University (1983), Texas Tech University (1986) and Augsburg College (1997) each instituted collegiate recovery communities after identifying the need for recovery supports on campus. Texas Tech University’s Center for the Study of Addiction and Recovery (now known as the Center for Collegiate Recovery Communities) was awarded a replication grant by the Substance Abuse and Mental Health Services Administration (SAMHSA), and the Department of Education in 2006, which infused interest in the concept of collegiate recovery nationally. Over the next 10 years, collegiate recovery communities and more formalized collegiate recovery programs would grow from just three in 1998 to more than one-hundred programs in 2016, according to the Association of Recovery in Higher Education (Retrieved from www.collegiaterecovery.org).

While collegiate recovery communities were emerging in the late 1970’s and early 1980’s, secondary education recovery support services were also beginning to take shape. In 1979, the first recorded recovery high school in the country, the Phoenix School in Silver Spring, MD, opened its doors to students with a history of substance use disorder, who were seeking post-treatment supports (Finch & Karakos, 20014). Maryland eventually opened a second Phoenix School in 1982. Minnesota, New Mexico, and Washington followed suit in the late 1980’s and early 1990’s. By the time the inaugural meeting of the Association of Recovery Schools (ARS) took place in 2002, approximately six collegiate recovery communities and over twenty recovery high schools had opened their doors. Transforming Youth Recovery (TYR) reports approximately forty recovery high schools and 239 collegiate recovery communities at the beginning of 2018 (TYR, 2018).

Average Student Engagement



100%

Peer Support



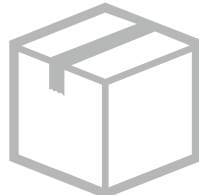
89%

Social Activities & Sober Fun



41%

Counseling or Clinical Support



28%

Other



Another interesting component of RHS's and APG's is the close, symbiotic nature the two resources have with one another, especially in the Houston and Austin models. In creating a RHS, leaders may identify a need for after school activities and additional familial/peer support. APG's fit nicely in this category, given that an APG as an afterschool program for the gifted. Teen and Family, for example, a Houston-based APG, works with the RHS's in Houston and Austin to support students and their families using counseling, recovery activities, and peer-to-peer networking.

INVOLVED FAMILY

Parent participation in family groups, dad's groups, mom's groups, family recovery groups and celebrations.

ENGAGED PEERS

Peer-to-peer participation in life skills groups, 12-Step meetings, family recovery groups, retreats, pro-social activities after school and on the weekends, celebrations, ongoing alumni support.



A CARING COMMUNITY

External community partners such as sober schools, treatment centers, active alumni and families, community service locations, etc.

CARING & COMMITTED COUNSELORS AND STAFF

Positive role modeling from staff who demonstrate various forms of recovery. Values such as self-esteem, trust, honesty and emotional support of one another. These are displayed during all services and program interactions.

Citation: Teen and Family Services - <http://www.teenandfamilyservices.org/>

The emergence of these programs has transformed the landscape of the youth recovery support services field, although growth has been slow. Stacie Mathewson, a mother who lost her only son to addiction, determined that the lack of resources for their family played a big role in his death. Mathewson’s foundation, Transforming Youth Recovery, was established in 2013 and has awarded over \$1.2 million to collegiate recovery efforts and the expansion of recovery high schools. TYR currently has 160 collegiate recovery grantees, offers on-going technical assistance to these schools, and is the premiere sponsor for the Association of Recovery in Higher Education’s annual conference, (Houston, TX, in July 2018).

Stage of Development	#	%	Median year since started serving students	Min year	Max year
Early stage	52	40.94%	2015	1980	2017
Mid stage	41	32.28%	2014	1977	2017
Late stage	19	14.96%	2013	1983	2017
No response	15	11.81%	—	—	—

Texas at a Glance

There is no denying the importance Texas has played in the nation-wide emergence of recovery supports for adolescents and young adults. Texas Tech, Archway Academy, University of Texas-Austin, University of Houston, and University High School are consistently listed among the top collegiate recovery and recovery high schools in the country. However, according to Transforming Youth Recovery asset map, there are a total of thirty-nine CRP's, RHS's, APG's, and other recovery supports for students throughout the state (Retrieved 3/17/18). Texas is also responsible for one of the most robust, statewide recovery networks. Thanks to several recovery community organizations, like Recovery People, as well as ongoing efforts by Texas' Health and Human Service Commission, recovery support is beginning to take root throughout most of the state. Texas is also piloting an innovative model to further strengthen youth recovery supports.

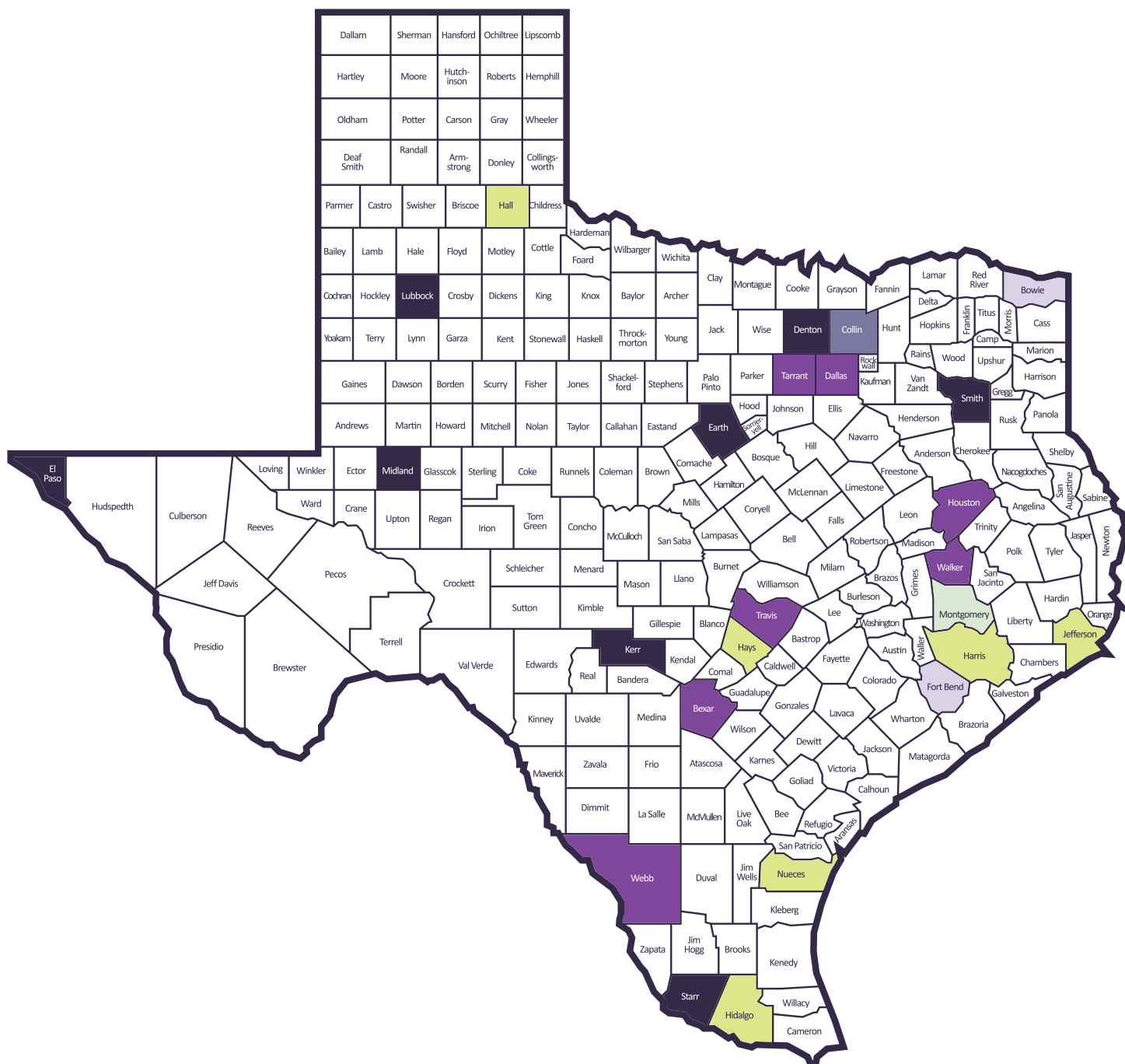
In 2015, The Department of State Health Services-Substance Use Disorders (SUD) Program Services Department, selected eight organizations to pilot Youth Recovery Community Centers (YRC) through a Request for Proposal (RFP) to help shape the vision for youth recovery in Texas. The YRC program focuses on adolescents that have had SUD and their families, supportive allies, and their communities. These centers provide a substance free environment to support the youth's efforts in rebuilding their lives. The eight centers are in regions: 1,5,6,7,8,11. The contracted organizations housing one of the eight pilot programs must follow these recovery-oriented principles:

- ✿ Choice and Self Determination
- ✿ Community Integration
- ✿ Offer an Array of Recovery Support Services, Caters to Peer Culture
- ✿ Family Inclusion
- ✿ Continuity of Care
- ✿ Partnership-Consultant Relationship, Participants Direct Their Own Recovery
- ✿ Culturally and Linguistically Competent

According to the State of Texas, the YRC's provide a safe space for young people and their families to enjoy peer supported activities and fellowship. One of the gaps in services, however, is the lack of a youth recovery coach certification. Most of the youth leaders are young people (18-24) from surrounding neighborhoods where these centers are located. Six months of recovery is required of applicants for youth-leader positions at the center. Staff training, supervision, and on-going professional development will be critical components in growing the YRC model across the state. There are two staff summits held yearly. The youth leaders (YRC staff) plan the summits around guest speakers and team building activities. There has only been one statewide conference for all eight pilot locations. This took place in Austin and was an internal event for state employees attached to the pilot program, community members and YRC employees.

Most of the communities in Texas still need recovery support services in educational settings. Adolescent and young adults spend most of their time navigating complex educational systems; creating a bridge program from high school to college is a way to cut down on the frustration and confusion that teens and their families face on a regular basis. Many adolescents and recovering, young adults simply give up hope of obtaining a higher education because of these complex systems. Having a peer coach, or navigator, to assist can make a profound difference in a young person's decision to continue their education.

Below, you will see a map of the State of Texas. Counties that have been highlighted have a recovery high school, collegiate recovery community, alternative peer group, adolescent treatment with an educational component, and YRC locations.



Texas is poised to be one of the pioneers in youth recovery coach academy/certifications. Collegiate recovery students would fit well into these vacancies and could be placed in YRC's or recovery high schools as mentors and staff. There are very few places in the rest of the country that have this much fertile soil in the youth recovery movement. All Texas needs is cultivation through youth-specific training, strategic coordination, and planning.

Recovery High School Tips

STEP 1: DRAFTING "THE WHAT"

What is a Recovery High School?

A recovery high school is a secondary school designed for students in recovery from substance use disorder or dependency. According to the Association of Recovery Schools (ARS), each school shares the following goals:

- ✿ To educate all available and eligible students who are in recovery from substance use disorder or co-occurring disorder such as anxiety, depression, and attention deficit hyperactivity disorder
- ✿ To meet state requirements for awarding a secondary school diploma
- ✿ To support students in working a strong program of recovery

The staff of recovery high schools most often includes administrative staff, teachers, substance use disorder counselors, and mental health professionals. Each plays a critical role in supporting recovering students. Additionally, recovery schools provide support for families learning how to live with and support their teens entering the recovery lifestyle. There are currently thirty-three recovery schools in operation around the country. The quotes herein, from students and staff at existing recovery high schools, demonstrate why these schools are needed and what they provide for students.

Many areas do not have a recovery high school. This story, from a suburban high school shows why it so desperately needs one:

"We have a student, T, who has been hospitalized for psychiatric reasons several times. I knew that he had substance use disorder, but even with aftercare, those went unaddressed.

Between hospitalizations, T refused to attend school. We discovered he had been physically assaulted by other students due to an outstanding drug-related debt. He refused to provide names or file charges. T and his friends were later involved in breaking and entering to obtain money to pay for said standing debt and were arrested and charged. In the meantime, T continued to refuse to attend school, and was subsequently given an ankle bracelet and home detention.

In the fall of 2015, after three years of ignoring his substance use disorder, his parents had T admitted to an inpatient substance use disorder program for youth. When he was released this spring, T still refused to attend school: He was terrified of retributions for the past incidents, of going back to the environment where using was easy and expected, to the friends who were still using. His parents reported that the student attended 12-step meetings daily, was sober, and properly reported to his probation officer, yet the court continued to threaten T with youth detainment if he didn't go back to school. After another month and another ankle

bracelet, the student began having to report to the youth detention facility. At this point, he has 53 absences in his remaining three classes and only nine out of the fifteen credits he should have at this point in his school career. His parents have begged for off-campus options for their son to no avail. To my knowledge, the student has (miraculously) maintained his sobriety.”

STEP 2: EXPLAINING “THE WHY”

A 2011 report from the US Department of Education Office of Safe and Drug Free Schools noted that 85% of adolescents entering addiction treatment in the United States begin regular use of alcohol and other drugs before the age of fifteen. According to the US Department of Health and Human Services Office of Adolescent Health, 62% perceived no great risk from having five or more drinks once or twice a week, and 74% perceived no great risk from smoking marijuana once a month.

Unsafe School Environments

The reality for students is that one of the easiest places to get drugs and alcohol is at school. In a report on its National Survey of American Attitudes on Substance Abuse: Teens, the Center for Alcohol and Substance Abuse (CASA) found that 60% or more of teens report that their high schools are drug-infested, meaning that drugs are used, kept, or sold there. More than half of the students surveyed said that there is a place on or near school grounds where students drink and use drugs during the school day; nearly half know of a student who sells drugs at their school. Moreover, 75% of respondents said that social networking applies peer-to-peer pressure, encourages other teens to want to party like that, creating what the report calls “digital peer pressure.”

It is well-documented that youth substance use disorder affects grades, test scores, attendance, and school completion. According to the Office of School Safety report, middle and high school students with even moderate involvement with substance use have dramatically lower academic achievement than groups of students with little or no involvement in these behaviors. In addition, a significantly higher percentage of high school students who had previously reported drug use dropped out of school compared with non-drug users.

High Relapse Rates

Often, addicted students seek help. However, for these students, relapse is all too common. According to the Office of Safe and Drug-Free Schools, first-year post-treatment relapse rates for adolescents range from 60-70%. Rates are particularly high for those that have completed residential treatment. Another study found that the average rate of sustained abstinence after treatment, across fifty-three adolescent treatment outcome studies, was 38% at six months and 32% at twelve months. The percentage of youth in recovery at the twelve months follow up in the Cannabis Youth Treatment Study ranged from 17 to 34%.

“I personally wouldn’t know where to begin finding sober friends at my old high school. It would be difficult to find a sober network at my old high school, because all the kids I knew were using drugs and alcohol.” — RHS Student

Research indicates that social factors, including social pressure to use, as well as exposure to substance using peers, are the strongest predictors of adolescent relapse. Successful recovery is less likely for youth who enter or return to an environment or peer culture in which substance use is the norm.

For young people trying to recover, the barriers to success are formidable. Many have performed poorly in school, even been suspended or expelled; these students are only minimally engaged in a school setting. For the majority, school is where most of their drug use happened, where social pressure to use was at its highest, and where easy availability of illegal substances and minimizing substance use disorder makes abstinence nearly impossible.

STEP 3: CREATING “THE HOW”

The risk of relapse is highest for youth in the period of time directly following treatment. The Office of Safe and Drug-Free Schools notes that the transition to the school setting is an important time when appropriate relapse prevention services could increase the likelihood of long-term recovery. It points to the development of the recovery school movement as a vital step in providing such services.

The 2010 National Drug Control Strategy supports this approach and calls for “the expansion of community-based recovery support programs, including recovery schools, peer-led programs, mutual help groups, and recovery support centers” (Office of National Drug Control Policy [ONDCP], 2010, p. 45) to assist students in their efforts toward continued sobriety.



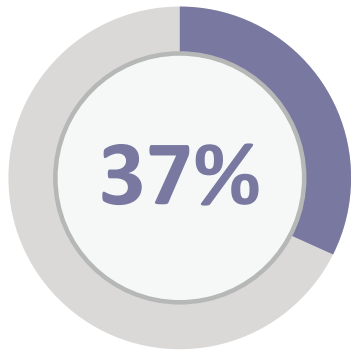
Source: U.S. Department of Education



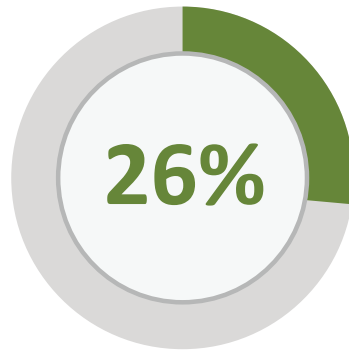
Recovery-based high schools create environments that foster what NIDA has identified as positive outcomes for youth seeking sobriety; they provide prosocial peers and activities, positive adults and recovery mentors, school connectedness and commitment, nurturing relationships with positive communication, and supervision. There is a small but growing body of evidence of the effectiveness of these programs. For example, one study compared student behavior before (in the community) to their behavior during their recovery school enrollment. Between the first period and second period, reports of at least weekly use of alcohol, cannabis or other illicit drugs were reduced from 90% to 7%.

Identify Target Population

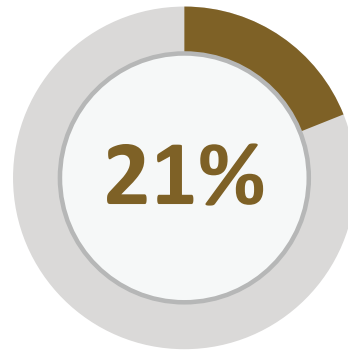
Ex. The target population for Recovery High School X, consists of adolescents and emerging adults between the ages of 15-21 years of age who have not graduated from high school and who meet the DSMV criteria for substance use disorders.



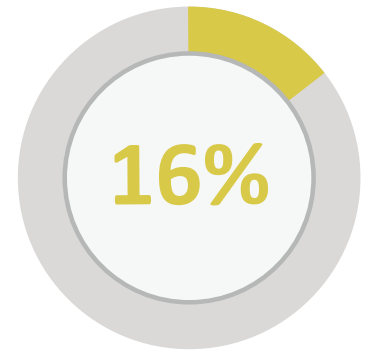
Alternative School



Charter School



Other



Private School

Describe Your School's Mission and Vision

Recovery High School X has its genesis in the ongoing discussions of an impassioned collective of substance use disorder counselors, psychologists, social workers, and school administrators with a vision to provide youth with a high-quality education in a supportive environment that promotes lifelong recovery.

X will be a private (or public, depending on your community resources) secondary school following the Texas State guidelines for accreditation, length of school year/days, curriculum, teacher certification, recordkeeping/reports, health and safety transportation, textbooks, testing, special education and other areas, as defined by the Texas Board of Education. It will be centrally located in X location, which is easily accessible from all of the city's neighborhoods via public transportation.

Recovery High School X will have a 175-day school year and a 44-day summer school; school hours are 8:30 to 4:00 pm. It is anticipated that Recovery High School X's first class will convene in Fall, 2018, with a small group of freshman (all dependent on Texas policies).

Model for the Recovery High School X

“There was a solid group of people here who were all trying to do the right things, so it was a lot easier for me to finish school and not do anything stupid. This place kept me sane.”

Recovery High School X is a member of the Association of Recovery Schools. In developing X, we are following the four criteria for a recovery school developed by ARS:

- ✿ Recovery schools operate as state-recognized high schools or colleges with services designed specifically for chemically dependent students committed to being sober and working a program of recovery
- ✿ Recovery schools provide academic services and recovery assistance. “If the balance tilts toward academic or treatment outcomes, the school moves away from being a recovery school.”
- ✿ Recovery high schools require that all recovering students work a program of recovery while enrolled
- ✿ Recovery schools offer academic courses for which students receive credit toward a high school or college diploma

Recovery schools have a plan in place to handle the therapeutic and crisis needs of students, which includes the use of part-time or full-time licensed professionals, outsource counseling services, external referrals, etc. Most schools drug test their students regularly. Drug tests can be requested based on suspicion or they may be conducted at random. Parents, teachers, and recovery counselors are granted authority to request a drug test. Drug testing in recovery high schools is only done to engage students and increase a student’s recovery plan.

School Staffing

We anticipate that students will have a wide range of needs beyond the academic; it is essential that Recovery High School X have the staff necessary to address them. Thus, school staff will include the following:

School Principal: This individual will be responsible for all aspects of the school’s direction, sustainability, academic and recovery services, staffing, and operations.

Licensed/Certified Teachers: These will include experts in all subject matter areas required by the State: language arts, mathematics, social studies and science. Teachers must be able to provide instruction in classroom settings, in one-on-one tutoring, and via online tutorials and courses. Staff with special education certification will be available to meet the needs of students with IEP’s.

Clinical Staff: These will include licensed clinical social workers and/ or licensed clinical professional counselors who are dually certified as addictions professionals (LCDC). These licensed professionals will be required to have at least three years’ of experience working with adolescents with substance use disorder.

Peer Recovery Staff: Recovery coaches who possess the Peer Recovery Support Specialist (PRSS) credential in the State of Texas to provide recovery support for students while they are in school and in the community where students live.

Lived Experience in Recovery: We will seek to hire staff who are in recovery, ensuring that they have the requisite experience to understand the trials that face their students. This will ensure that they have the experience needed to fully understand what their students are experiencing. Staff with lived experience will also provide students with adult role models and mentors who can demonstrate that it is possible to live happily in recovery.

“At my old school, the teachers just brushed me off because I was a drug addict.... They assumed I wasn’t going anywhere, so they wouldn’t waste their time and energy on me. I never thought I could get through 24 hours without drugs, let alone 24 months.”

– RHS Student

Due to the delicate intersection of academic performance and effects of substance use disorder, school staff will need to work closely together to provide the full network of support needed by students. Therefore, teachers and counselors will be expected to collaborate on the development of students’ educational and recovery plans and integrate efforts to support achievement in both.

Scope of Services

Admissions / Assessments

Students applying for admission to Recovery High School X should meet the established diagnostic criteria for substance use disorders as defined in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-V) and should have received treatment from a licensed provider OR attended sobriety support group meetings. Additionally, some young people may not have access to treatment and will seek services regardless of diagnosis. These cases should be evaluated on a case by case basis by the school administration.

Students who are admitted to the school will then undergo a comprehensive assessment that will identify the following:

- ✿ Immediate needs first (linkage to treatment, mental health care, etc), which, if not met, would prevent student from engaging in program
- ✿ Academic history, including grades, disciplinary issues, attendance and remediation needs
- ✿ Substance use disorder history, including usage, treatment, familial and social supports
- ✿ Mental health status, to identify co-occurring disorders
- ✿ Familial history, including substance use disorder, strength of connection and support
- ✿ Other barriers to maintain sobriety

In addition, to establish baseline measurements of function, students will be administered instruments such as the Teen Addiction Severity Index, Practical Adolescent Dual Diagnostic Interview or Child/Adolescent Functioning Assessment Scale. These will assist in measuring progress over time.

Individualized Plans

“Just try adding acne, constant temptation and regularly being heckled that you’re a ‘loser’ to a standard newcomer’s recovery and you’ll see just how high the deck is stacked against teenage sobriety; the notion of placing them in an environment that caters to clean living thus makes sense. In a regular high school, kids can’t move to another town or get out of the dysfunctional relationships surrounding them – basically, they’ll be punished for making a good decision.”

– SUD Adolescent Counselor

Using the assessment findings as a guide, students and their counselors will develop and individualized plan that incorporates short- and long-term objectives for academic and recovery success. These plans will be revisited every six months and updated as needed. If a student appears to be having difficulty reaching goals, he or she will meet with a counselor and/or teacher, as appropriate, to develop new strategies for reaching the goal or to set a different, more achievable goal.

Coordination of Care

Many of Recovery High School X students will still be in some form of outpatient treatment, or will have recently completed residential treatment, for which an aftercare plan is still in place. In developing individualized plans for our students, X staff will work closely with students' treatment counselors, mental health therapists, or other members of their support teams to coordinate goals and activities.

Academic Activities

We anticipate students enrolling in Recovery High School X to be behind their peers academically. Many of the students have been suspended at previous schools or expelled for behaviors connected to their substance use; others will have underperformed academically due in part to their substance use disorder; still others, while embedded in a using culture, will have disconnected from school engagement. Whatever the reason, these students will need assistance in achieving the levels of academic competence expected for youth their age.

The academic curriculum we are designing for Recovery High School X takes this into account. It will include instruction in all subject matter areas required for graduation from high school, including Language Arts, Math, Social Studies and Science. For students requiring remediation in any area, one period daily is devoted to tutoring and one-on-one assistance. Following is a sample schedule of a typical school day:

Period	Activity	Begin	End
1	English	9:00 AM	9:50 AM
2	Math	9:50 AM	10:40 AM
3	PE / Health	10:50 AM	11:40 AM
4	Lunch	11:40 AM	12:10 PM
5	Group	12:10 PM	1:00 PM
6	Social Studies	1:00 PM	1:50 PM
7	Science	1:50 PM	2:40 PM
8	Tutorial / 1x1	2:50 PM	3:30 PM
9	End of Day Check In	3:30 PM	4:00 PM

The first goal is to ensure that students are able to take and pass all required State assessments, to complete the number of hours in each subject matter area needed to meet State requirements for graduation, and to earn a high-school diploma. We also want students to do well enough to get into the colleges of their choice. For those students more interested in pursuing work instead of continuing education, we will provide pathways to vocational education, training, and certification.

Recovery Support

Nothing will promote academic growth better than continued growth in recovery. Helping students create healthy lives with clear visions for their futures, based in the principles of recovery, is Recovery High School X's main goal.

Addressing Substance Use Disorders: A key component of substance use treatment is to help students understand why relapse happens by helping them understand what triggers their desire to use and providing them necessary coping skills. The focus is on cognitive retraining, learning to use strategies to foster behavior change on a daily basis. Each day's schedules allow students to meet one on one with counselors in order to receive help with daily challenges. Intensive support of this kind is common in residential treatment, but is unheard of in a school environment.

Addressing Co-Occurring Disorders: X's clinical staff includes licensed counselors who will be on hand to help students when symptoms arise; they will also be able to make referrals for more intensive levels of mental health treatment, including medication and inpatient or outpatient therapy.

Addressing Trauma: Research shows that individuals who have experienced trauma – violence within the family, street violence, sexual assault, and other forms – are more likely to develop a substance use disorder. We therefore anticipate that a large number of students will be trauma survivors to one degree or another. Recovery High School's clinical staff will be uniformly trained in trauma-based approaches to treatment that can empower students to reclaim control over their choices.

"If you talk to kids in recovery, they will tell you the first time they felt truly accepted for who they are and not necessarily singled out for having a substance use disorder is when they arrived at a recovery school. They're surrounded by a bunch of kids who feel similar to them and they feel like they can understand them and they can be themselves." - Teacher

– Teacher

Peer Recovery Services: As anyone who has remained sober through the help of support groups can attest, and as a large body of research has demonstrated, peer recovery support services are an invaluable tool to maintaining long-term sobriety. Defined as services that are designed and delivered by people who have experienced both substance use disorder and recovery, they help people become and stay engaged in the recovery process and reduce the likelihood of relapse. Because they are designed and delivered by peers who have been successful in the recovery process, they embody a powerful message of hope, as well as a wealth of experiential knowledge.

Recovery High School X will hire Recovery Coaches, specially trained individuals with lived experience. The Coaches will provide emotional support, life-skills training, concrete assistance to help students accomplish tasks, and build community networks. They will help students develop individualized/self-directed recovery plans, provide one-on-one recovery coaching in person, by phone or by email, create and lead educational and social support groups on recovery-related topics. Coaches will lead socialization activities that provide students with opportunities to broaden their social support systems in sober social events.

Case Management: All counselors, regardless of training, will be able to provide students with linkages to resources needed to maintain sobriety, such as referrals for health care, transportation, housing and other basic needs. Recovery coaches, in particular, will be knowledgeable about a wide range of community-based organizations and activities that promote sober living and long-term recovery, so that when they are not in school, students will still have access to pro-social, recovery-oriented services.

Family Supports: Addiction is a family disease that has fractured the bonds of trust and support between parents, siblings, and the afflicted child. Continued recovery depends on restoring these bonds to provide a strong safety net of family love and support. In many cases, students who meet criteria for substance use disorder are also the children of parents with substance use disorder, and they carry with them all of the anger and resentment that comes with growing up in such an environment. Recovery High School X counselors will work with families of students to address the lingering legacies of familial substance use disorder, educate them about the recovery process and their necessary roles, and restore the bonds of love and trust lost to addiction.

Social / Cultural Activities: X will provide students with frequent opportunities to explore the local area's rich cultural and civic resources via field trips and educational outings around the city. The school will also sponsor sober social events to provide opportunities to students to build strong social networks of support.

"Thanks to Recovery High, I have been sober for seven years. The School is where I got the strength and confidence I needed, because when I went in, I had no self-esteem. These people showed that they cared for me, that they were there for me no matter what."

– RHS Student

Keeping Students Engaged in Recovery

Recovery High School X is committed to providing students with necessary support to stay in recovery and move forward with their lives. Success to this end requires students to remain engaged in the shaping and direction of their recovery process and become committed to the kinds of daily practices that support long-term recovery. If they are to have successful recoveries, students have to remain engaged in the progress of their recovery process, and become committed to making the kinds of daily practices that support long-term sobriety. Therefore, we will encourage active participation in the recovery process in several ways:

Engagement in Individualized/Self-Directed Recovery Planning: When students enter Recovery High School X, they will work with teachers and counselors to create a blueprint for recovery. Staff will empower the students to take ownership of their lives by encouraging goal setting to create a clear recovery path. Students will be required to remain involved in the recovery planning process by working with their counselors to reach plan goals, revise goals as needed, and update the plan as progress is made.

Peer-Recovery Involvement: Once a student has remained sober for a year, he or she will be offered the opportunity to train to become a volunteer peer coach or peer leader. These students will become closely involved in the development of peer-led programming at the school, and will become coaches to students with less time in recovery. As successive generations of students remain sober and engage in peer recovery activities, they become a powerful network of resources for other students, one that will grow in strength and reach as students graduate.

Attendance at Extra-Curricular Recovery Activities: : Students will be required to attend at least one sobriety support group meeting each week outside of school hours.

STEP 4: EVALUATE, EVALUATE, EVALUATE

Recovery High School X is committed to helping our students change the course of their lives. To track the success of our programming, we will collect data on the following:

- ✿ Substance use Outcomes: Continued abstinence and reduction in risk behaviors
- ✿ Academic Outcomes: attendance rates, disciplinary actions, grades
- ✿ Improved functioning as measured by changes in scores on psychological instruments over time

“Recovery schools are a unique intervention that can help students sustain their abstinence, which in many cases can save lives. Throwing kids in recovery back into their old high schools is setting them up to fail. We do a lot of primary prevention in this country, but the further you go down the spectrum of prevention, treatment and recovery, the less help there is.” – Kevin Jennings, former Assistant Deputy for Safe and Drug Free Schools, US Dept. of Education

As the numbers of students grow, we will look at school retention and graduation rates, length of time in recovery, and other factors.

Additionally, we will maintain all data required by the Texas Board of Education to ensure compliance. We will also pursue accreditation as a recovery school by the Association of Recovery Schools, and will work with them to develop the evaluation structure and capacity needed to meet the requirements of their annual evaluation.

STEP 5: SUSTAINABILITY PLANNING

Know How to Tell Your Story. Powerful stories equal powerful funding.

HOW RECOVERY HIGH SCHOOL X BEGAN AND NEXT STEPS

Initial conversations by community stakeholders indicated that youth seeking recovery had few resources to support their efforts, and it was determined that a recovery high-school would be the most effective means of providing the support they need. A planning committee was formed. Its initial tasks were to establish the necessary credentials to launch the school.

The Planning Committee became the Board of Directors, and embarked upon a fact-finding tour of other recovery schools. As key stakeholders throughout the State of Texas, including representatives from the County Commissioners office, administrators of alternative and private schools, and agencies providing substance use disorder services to youth, a solid board emerged. From the initial discussions the mission, substance, and focus of Recovery High School X has taken shape. We are now in need of start up funds to turn our efforts into reality. Below is a general overview of draft budget that the Planning Committee put together for your review. Please let us know if you have any questions or comments. We look forward to working with you to make meaningful impact in our community!

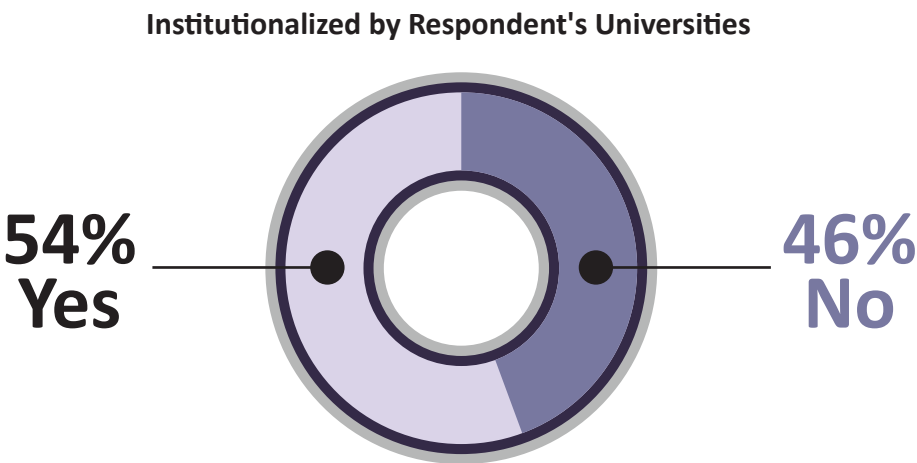
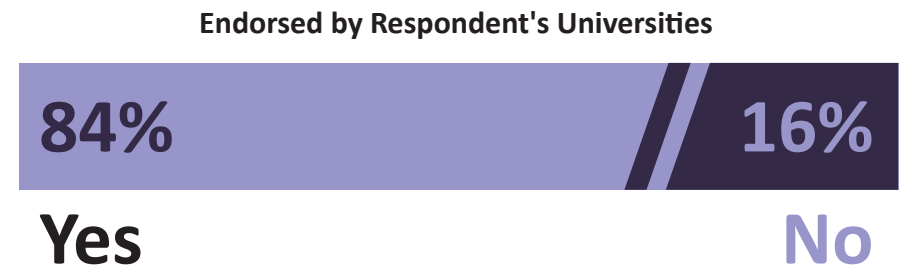
Use of Start-up Funds (\$50,000)

The requested funds will be used to:

- ✿ Continue fundraising efforts
- ✿ Secure a location for the school
- ✿ Helping to cover salaries for:
 - ✿ A Principal to lead the development of the school’s academic and recovery curricula, hire staff, and prepare the school for its opening
 - ✿ Hire school staff and train them in the mission, principles, and academic and recovery strategies used by the school.
- ✿ Develop the technological infrastructure needed to support online learning, program evaluation, and data collection efforts

Collegiate Recovery Support Tips

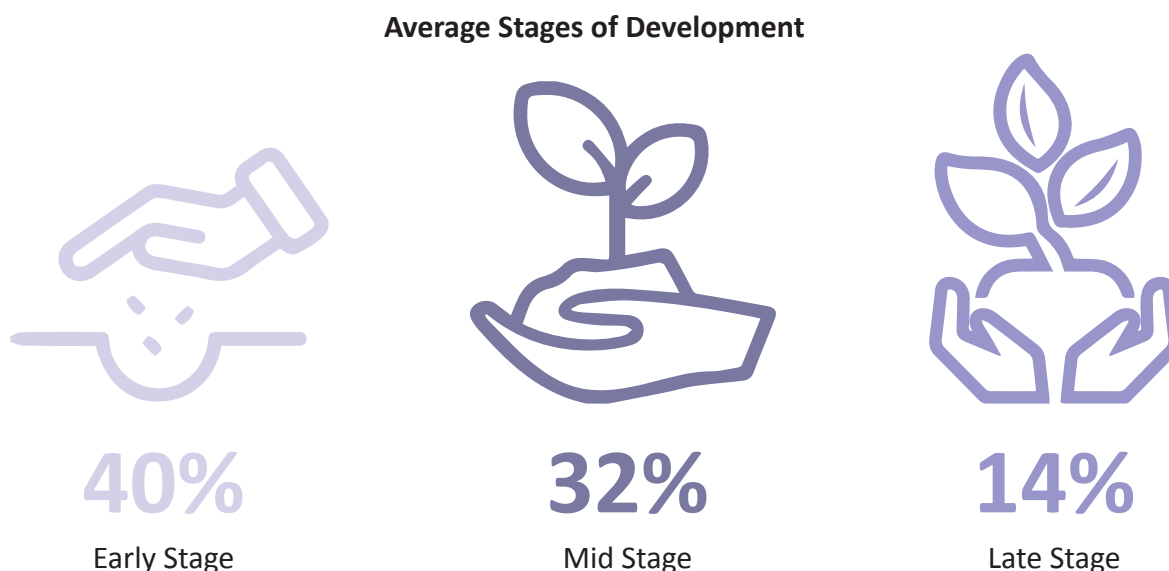
For the past two decades, institutions across the country have recognized the need to support students who are in recovery from substance use disorders as they work to complete their degrees. Collegiate recovery communities were developed and have continued to expand as administrators have recognized their significance and effectiveness. Within the past five years there has been an explosion of collegiate recovery communities based on successful models. We hope that University X will join the ranks of over 200 institutions who are offering collegiate recovery supports to their students.



STEP 1: DRAFTING “THE WHAT”

What are Collegiate Recovery Support Services?

According to the most current collegiate recovery research, published by Transforming Youth Recovery in March 2018, there are a spectrum of recovery support services being offered by institutions of higher education. It is critical for emergent recovery supports to be defined by the planning committee. Below are the classifications that were constructed from TYR’s 2017 RECOVERY IN HIGHER EDUCATION: DEFINITIONS AND CENSUS. In designing your collegiate recovery support:



1. **Collegiate Recovery Community** – Emergent efforts by students in recovery from substance misuse or dependency to create safe, supportive learning environments at an institution of higher education. The primary components of collegiate recovery communities are:

- ✿ Mutual aid support groups on or near campus for recovering students or other committed individuals who gather together socially, participate in sober activities; and,
- ✿ Peer recovery support in a community setting.

2. **Collegiate Recovery Program** – Programs offered at institutions of higher education that provide safe, supportive learning environments for enrolled students in recovery from substance misuse or dependency. The primary components of collegiate recovery programs are:

- ✿ Mutual aid support groups on or near campus for students in recovery;
- ✿ Physical space for students to gather together socially, participate in sober activities, and experience peer recovery support in a safe environment;
- ✿ Institutional acceptance and support of the collegiate recovery program and the academic goals of students in recovery;
- ✿ Staff, counselors, or student leaders who are dedicated to the collegiate recovery program; and,
- ✿ Peers, recovery coaches, or counselors who are available for recovery support.

3. Collegiate Recovery Residency Program – Collegiate recovery programs that offer recovery housing options for students in recovery enrolled at an institution of higher education.

4. Young Adult Intensive Outpatient Program (IOP) – Outpatient treatment services for students enrolled at an institution of higher education. An IOP for young adults typically offers flexible day and evening programs so that students can manage treatment services with class schedules. The primary components of IOPs are:

- ✿ Individual and group therapy sessions;
- ✿ Life and study skills development and workshops;
- ✿ Relapse prevention, health and wellness classes;
- ✿ Case management and peer mentoring; and,
- ✿ Drug testing.

5. Treatment and Education Program – Residential or day-treatment program in which individuals are admitted for ten days or more and can enroll and attend classes through a participating college or university (online, at the treatment center, or on-campus). Medication management and medical monitoring is generally available on-site. Facilities address serious psychological and behavior issues, and most are Joint Commission, CARF, and/or NAATP accredited.

6. Transitional Living/Recovery Housing and Education Program – Substance-free living facilities for individuals recovering from substance misuse or dependency that often serve as a transitional living environment between detoxification or residential treatment and everyday life or educational settings. Students at these living facilities enroll and take classes through a participating college or university, either online or on-campus.

7. Recovery Support Referral – Colleges and universities that offer some level of substance misuse prevention services and referral-based recovery support resources for enrolled students. These services and resources may include:

- ✿ Alcohol & Other Drug Prevention (AOD) Programs, which offer screening and interventions for substance misuse;
- ✿ Counseling and Psychological Services (CAPS), which offer clinical services for behavioral and mental health;
- ✿ Student Health and Wellness Centers, which provide referral services for mutual aid support groups and general wellness classes; and,
- ✿ Resource sites, which provide listings of recovery support group meetings and services near campus.

Average Student Engagement



100%

Peer
Support



89%

Social Activities
& Sober Fun



41%

Counseling or
Clinical Support



28%

Other

STEP 2: EXPLAINING “THE WHY”

The literature of addiction treatment and recovery supports long-term interventions for individuals struggling with chemical addictions. This research correlates the length of time spent in treatment and other support services with outcomes in recovery. The longer an individual is participating in formal treatment and programs designed to support recovery, the more positive the outcome. Community support and relapse prevention models specific to colleges and universities allow recovering students to extend their participation in semi-structured programs, without having to postpone or eliminate the possibility of achieving their education goals. Successful supports have the potential to impact student success, engagement, resiliency, and retention.

Align with the University’s Strategic Plan

University X is focused on preparing students to become successful individuals with an advanced understanding of their field of study, the interdisciplinary workplace, how to be effective leaders and engaged citizens who contribute to society. The areas of focus are: communication, interpersonal abilities, critical thinking, organization, global engagement, teamwork, self-awareness, professionalism, and life skills. Collegiate recovery at UX will directly align and drive value across each area – thus further developing “spartan ready” students.

Specifically:

- ✿ UX Goal 1: Engage well-educated and highly skilled global citizens through our continuing commitment to student success. Develop diverse, dynamic global citizens and leaders to strengthen communities and improve quality of life. Educate competitive, highly skilled students, prepared to excel in the global job market and to make meaningful and lasting contributions to society.
- ✿ UX Goal 2: Become a highly effective, major economic engine, creating new partnerships to build a strong and sustainable future for State X in the global economy. Promote a stimulating campus life through diverse academic, economic, cultural, and athletic opportunities.



Further, collegiate recovery aligns with the following Student Affairs strategic plan goals:

- ✿ Student Engagement Goal 2: Equip and empower students to become impactful and innovative societal leaders. 2.2 Create opportunities that promote cultural and social identity development, community building, and inclusion. 2.3 Facilitate meaningful reflection to enhance self-awareness and learning experiences.
- ✿ Student Engagement Goal 3: Promote a healthy and safe campus environment and campus community. 3.1 Promote a campus culture where students feel safe, included, and welcome. 3.2 Encourage healthy behaviors and informed decision making. 3.4 Provide educational opportunities and prevention measures that help reduce risk, injury, or loss through effective protocol.
- ✿ Student Engagement Goal 4: Enhance and sustain a robust campus life. 4.1 Develop additional community relationships and partnerships to explore collaborative efforts and joint initiatives.



9%

Early Class
Registration



15%

Priority
Housing



9%

Extra Time
on Tests



23%

Medical
Withdrawals



3%

Access to
Lecture Notes



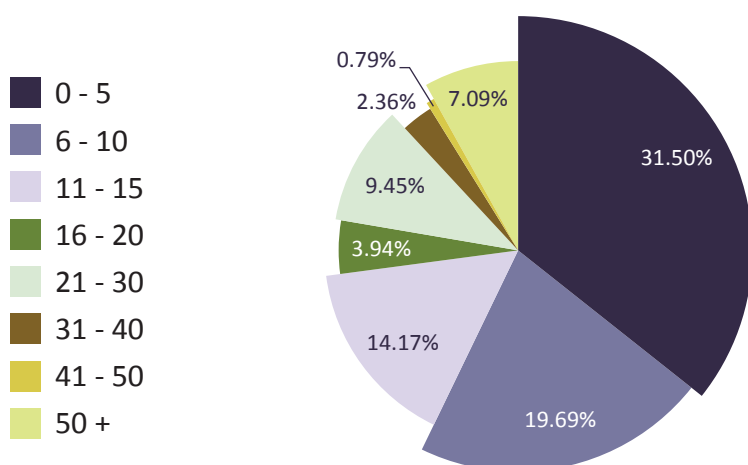
13%

Other

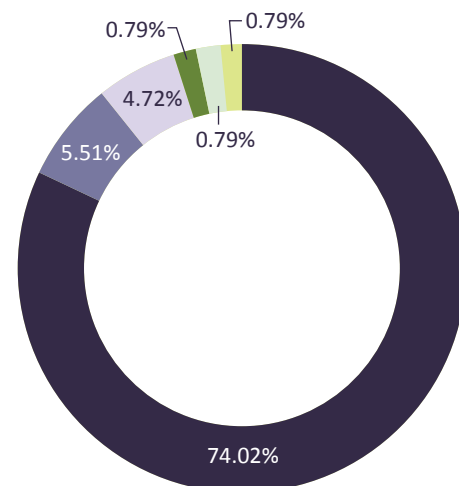
Identifying Target Population

Addiction and recovery have the potential to impact every individual on UX's campus. The target population for collegiate recovery support is all students (undergraduate and graduate) who are in recovery from substance use disorders and/or those who are affected by addiction. In addition to students who are in recovery, faculty and staff, as well as prospective students, are welcome to attend open recovery events as well as 12-step meetings.

Undergraduate Student Involvement Graph



Graduate Student Involvement Graph



Describe Your CRP / CRC's Mission and Vision

Ideal services provided by strong CRPs:

- ✿ Help students new to recovery find resources for wellness, sobriety, and support.
- ✿ Connect students living lives of recovery into welcoming, inclusive, compassionate campus community, as well as the broader X County recovery community.
- ✿ Link students to academic resources: tutors, advisors, mentors, professional development, and career specialists.
- ✿ Engage students in recovery by offering fun sober social activities, wellness events, and service opportunities to engage the University of X community and increase the visibility of the recovery community.
- ✿ Offer programming to help students integrate the principles of recovery into their daily lives, including 12-step meetings conveniently located on and around campus.

"No one should have to choose between their education and their recovery. Being a part of a collegiate recovery community has given me the ability to protect my recovery while pursuing my educational goals." — **CRP Student**

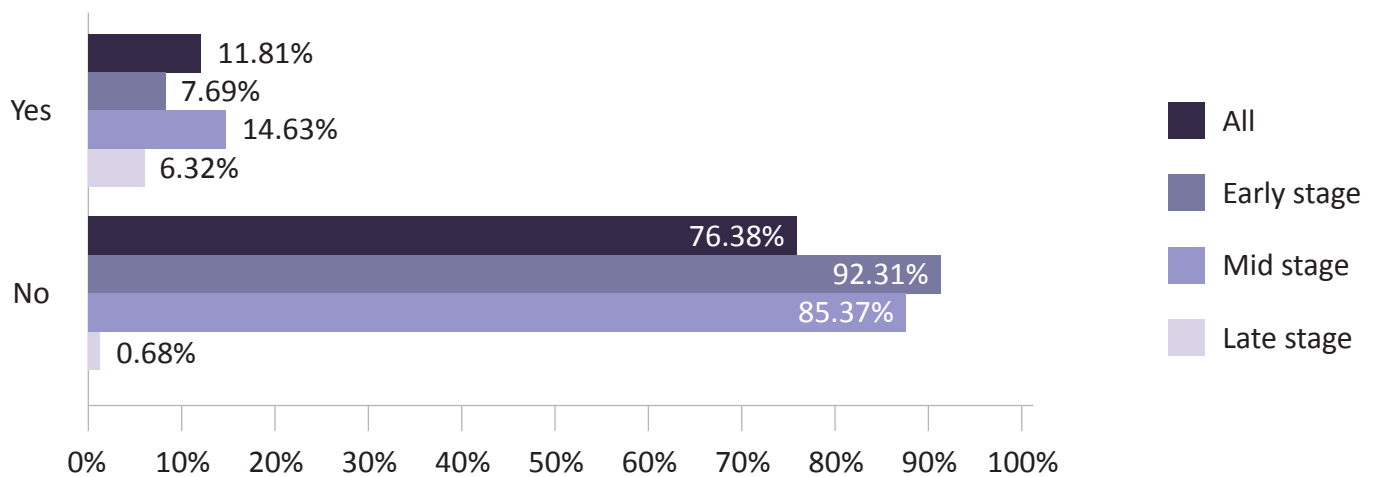
Examples of core values of CRPs

- ✿ Clean, Sober and Healthy
- ✿ Connected in community
- ✿ Commitment to academics
- ✿ Civility in relationships

Program Requirements Graph

Student participation requirements	# (All)	% (All)	# (Early stage)	% (Early stage)	# (Mid stage)	% (Mid stage)	# (Late stage)	% (Late stage)
This program is open to any student.	51	40.19%	26	50.00%	21	51.22%	4	21.05%
Students must live a substance-free lifestyle in order to participate.	9	7.09%	3	5.77%	1	2.44%	4	21.05%
Students must be in recovery from a substance use disorder in order to participate.	46	36.22%	20	38.46%	17	41.46%	9	47.37%
Other	7	5.51%	3	5.77%	2	4.88%	2	10.53%
No Response (14)	—	—	—	—	—	—	—	—

Program Requirements Graph



STEP 3: CREATING “THE HOW”

University X – From a Collegiate Recovery Community to Collegiate Recovery Program

UX’s collegiate recovery community was established and formalized in the spring semester of 2017 as a student organization and has had a moderate amount of success / impact, involving student engagement. As University X currently has limited resources available to students seeking drug and/or alcohol support, it is imperative that the recovery community implements a strategy for the Fall 2017 / Spring 2018 academic year focused around the following:

- ✱ Integration and Collaboration,
- ✱ Finance,
- ✱ Programming, &
- ✱ Marketing and Outreach

Designing and rolling out a CRP is an endeavor that will take a considerable of time and require sponsorship from multiple levels of the university. To that end, the plan captured below is iterative and evolving

Integration and Collaboration

Integration for the recovery community means collaboration with different departments at the University X. Captured below are the high priority target points / goals and corresponding timeline:

Departments	University Resources	Community Resources
<ul style="list-style-type: none"> ✱ Counseling Center ✱ Dean of Students Office ✱ Housing and Residential Education (future) ✱ Student Health Services ✱ Wellness Education 	<ul style="list-style-type: none"> ✱ Academic Advising ✱ UX Foundation ✱ UX Development ✱ Campus Safety ✱ Student Government ✱ Office of Recreation ✱ Office of Residential Life 	<ul style="list-style-type: none"> ✱ Treatment Facilities ✱ Sober Living Homes ✱ Private Donors ✱ Family Members ✱ Corporations and Businesses

Advocacy: It is important that we have buy in from the highest levels of UX's administration. It is of utmost importance that we identify these stakeholders (that sit at the head of each department), create a draft budget, and host collegiate recovery experts who have a proven track record of working with university administrators.

Timeline: On-Going

Operations: In order to better track metrics and collaborate with the university, UX in the Fall semester of 2017, will begin an application process for students in recovery interested in officially joining our CRC. Part of the benefits of joining the CRC will (in the future) include scholarships, early registration, meals, events, activities and the ability to go on trips to conferences.

Timeline: On-Going

UX Development & University Relations: We will collaborate with the UX Development & University Relations department and share its vision / goal. A significant part of our efforts require financing - therefore, we must create a joint strategy with UX Development and identify areas for collaboration in budgeting and external fund raising.

Timeline: Long-Term

Admissions: As our community evolves into a mature CRP – an important tool for growth is ensuring that all elements of the University are aware of our presence on campus. It is important that we collaborate with admissions, as they are the first point of contact for inbound students. Nurturing this relationship also allows for advocacy for prospective students whose GPA's have been affected by SUD. Currently, data on students in recovery is not collected by UX. Moving forward, all incoming, first-time college students are required to complete a recovery questionnaire.

The generally accepted statistic is that 1 in 66 incoming freshmen struggle with substance use disorder. The incoming class size is 2200 students, so statistically speaking, there are approximately 33 incoming students that qualify for our CRP and at least 500 that could serve as allies to the recovery community.

Timeline: On-Going

Res-Life / Dining Services: Part of our service offering for the fall is to be able to host a community-wide, fellowshiping breakfast once weekly. We will collaborate with dining services and ask them to support our organization by providing a certain amount of meal vouchers per month, fostering community amongst our members.

Our community will also need to engage with res-life and draw a road map for on campus accommodation for students in recovery. We plan, tentatively, to gather housing plans by the Fall Semester of 2018.

Timeline: Initial meetings; August 2017

Goal Accomplishment for Sodexo expectation: Spring 2018

Goal Accomplishment for Res Life: August 2019

Academic Advisors: Part of the benefit of joining the community will be early registration for classes. This will give students the ability to best balance their recovery & academic pursuits.

Timeline: Initial meetings; September 2017

Goal Accomplishment for Registrar: September 2019

Faculty Senate: To help grow our community, it is important that our members collaborate with faculty in all departments who may come in contact with students who are seeking recovery support services . This is part of our outreach for the Fall and will be captured in more depth later in this document.

Goal Accomplishment for engaging with Faculty Members: On-going

Campus Safety / Conduct / Health Services: Although relations are already established here, it is imperative that they are managed, and that all of concerned departments are aware of our presence and our goals for the Fall/Spring semesters.

Timeline: On-going

Office of Campus Recreation: Integration with the Office of Campus Recreation will allow for collaboration for outdoor events through the academic year.

Timeline: Initial meeting; September 2017

Start-Up Financing

- ✿ Staffing – 1 FTE plus benefits \$60,000/year
- ✿ Programming – \$14,000
 - ✿ Seminar Programming -- \$1,500
 - ✿ Special Events -- \$1,500
 - ✿ Weekend Retreats -- \$3,250
 - ✿ Recovery Night -- \$500
- ✿ Expenditures (Coffee, Food, Literature, Study Supplies) - \$750
 - ✿ Coffee -- \$250
 - ✿ Food -- \$300
 - ✿ Literature -- \$200
- ✿ Promotional (Items/Advertisements/Print) - \$6,500
 - ✿ Promotional Items/Advertisements/Print Materials -- \$1,500
 - ✿ Website & App Design -- \$5,000
- ✿ Travel – \$7,000
 - ✿ ARHE Conferences for 2018 (Student Summit and National Conference)

“Our recovery students are some of the most dedicated and passionate members of our campus. Not only are their G.P.A.’s higher than the average student’s, they have repeatedly modeled what it means to be a leader, scholar and citizen.”

– Dean of Students, University X.

The goal is to work in tandem with University of X student government and external institutions that offer grants. The capital outlay for new and existing collegiate recovery initiatives will be financed via internal and external fundraising, geared as high as 75% / 25% respectively.

Next Steps

- ✿ Obtain Transforming Youth Recovery Grant for \$10,000 – Fall 2017
- ✿ Raise \$11,000 from the Student Government – Fall 2017

Programming

The mission of University X's collegiate recovery community is to build a community and infrastructure supportive of the personal aspirations and educational goals of students in recovery. We will only accomplish this mission by offering activities and support services to meet the needs of these students.

Such activities include:

- ✿ Providing students with access to campus-based, twelve-step programs and additional recovery support groups like SMART and Refuge Recovery. Other innovative approaches to sustaining a recovery lifestyle should also be available upon students' requests.
- ✿ The collegiate recovery community will host sober events to facilitate the development of substance-free social networks,
- ✿ Educate the broader campus community to reduce stigma that is attached to substance use disorder.

In the spring semester of 2017, the recovery community met once a week on campus and offered several events every few weeks. Moving forward, it is important we consolidate our offerings by having more events with greater frequency.

Seminar Topics for Fall 2017

- ✿ August 28th – Recovery Protection 101
- ✿ September 4th – Labor Day Holiday Event
- ✿ September 11th – Relationships in Recovery
- ✿ September 18th – Finding gratitude during college football season.
- ✿ September 25th – The Stress, The Stress! Dealing with academic and personal stressors in recovery.
- ✿ October 2nd – Service Event – Boys and Girls Club
- ✿ October 9th – Setting Boundaries
- ✿ October 16th – Peer support, you bring the topic
- ✿ October 23rd – Cultivating careers after a criminal justice experience
- ✿ October 30th – Sober Halloween Party
- ✿ November 6th – Family - related to these people?
- ✿ November 13th – Spirituality & Meditation
- ✿ November 20th – Balance
- ✿ November 27th – Prepping for the Holidays

Marketing and Outreach

Our marketing rollout for the fall will involve creating a team of allies to help spread the word about our organization. In September, the collegiate recovery community will leverage national recovery month and hand out t-shirts to our sober allies who we will train other students on campus. We will be largely sustained by active, student participation. To that end, marketing, social media, and outreach are efficient methods to attract students and maintain a solid student base. In the Fall 2018 semester, we will roll out a social media strategy that will involve leveraging Facebook, Twitter and Instagram accounts to spur engagement. We will work with marketing students to design the best plan to move forward.



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