



COMMONWEALTH of VIRGINIA

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MEMORANDUM

TO: Community Providers of Substance Abuse Recovery Support Services
Executive Directors of Community Services Boards and Behavioral Health
Authorities
Interested Community Stakeholders

FROM: James W. Stewart, III 

SUBJECT: Request for Information Regarding Local Recovery Support Organizations
for Legislative Report for the 2013 Session of the General Assembly

DATE: August 29, 2012

House Bill 271 (“The Substance Abuse Recovery Support Services Grant Program”) requires the Department of Behavioral Health and Developmental Services (DBHDS) to prepare a report that identifies *all public and private organizations that may raise and disburse funds for substance abuse recovery support services* in the Commonwealth. To define *substance abuse recovery support services*, DBHDS is using the definition developed by the Substance Abuse and Mental Health Services Administration for its 2011 Request For Proposal for Recovery Support Community Services Program:

“...organizations that provide at least one of the following types of services to people who are abusing alcohol or other drugs and to their families and significant others:

- Emotional support refers to demonstrations of empathy, caring, and concern that bolster one’s self-esteem and confidence. Peer mentoring, peer coaching, and peer-led support groups are examples of peer-to-peer recovery support services that provide emotional support.
- Informational support involves assistance with knowledge, information, and skills. This type of support can include providing information on where to go for resources or might involve teaching a specific skill. Examples of peer recovery support services that provide informational support include peer-led life skills training (e.g., parenting, stress management, conflict resolution), job skills training, citizenship restoration, educational assistance, and health and wellness information (e.g., smoking cessation, nutrition, relaxation training).

- Instrumental support refers to concrete assistance in helping others do things or get things done, especially stressful or unpleasant tasks. Examples in this category might include providing transportation to get to support groups, child-care, clothing closets, and concrete assistance with tasks such as filling out applications or helping people obtain entitlements.
- Affiliational support offers the opportunity to establish positive social connections with other recovering people. It is important for people in recovery to learn social and recreational skills in an alcohol- and drug-free environment. Especially in early recovery – when there may be little that is reinforcing about abstaining from alcohol or drugs – alcohol- and drug-free socialization may help prevent relapse. In addition, community and cultural connections can be important in helping the recovering person establish a new identity around health and wellness as opposed to an identity formed in relation to the cultures of alcohol and drugs. “

These services are primarily provided by people in recovery, not by professional therapists. These services do not include professional treatment services of any kind, including aftercare, nor do they include recovery support services provided by professionals. Examples of organizations providing such services include: faith-based organizations, rescue missions, independent religious groups, the Salvation Army and Goodwill, as long as the substance abuse recovery support services provided meet the SAMHSA definition. These services may also be provided by public entities such as CSBs.

To compile the data for the report in time to meet the reporting deadline, I am asking the executive directors of the community services boards (CSBs) and all other stakeholders receiving this memorandum to provide the names and contact information of all public or private organizations in their communities that may raise and disburse funds for substance abuse recovery support services that meet the SAMHSA definition.

DBHDS will need to receive your data no later than September 19th. Since turn-around time to prepare the report is very short, DBHDS has created an online tool to assist in the collection of this information, available at <https://www.surveymonkey.com/s/DBHDSHB271>. Please access this link directly (or copy it into your browser) to enter the name and contact information of each of the organizations you have identified.

I will greatly appreciate your timely cooperation in assisting DBHDS in meeting the Governor's request for this information. Thank you.

cc: Olivia Garland, Ph.D.
John Pezzoli
Mellie Randall

Ruth Anne Walker
Margaret Anne Lane
Jason Lowe