

## **The Nine Guiding Principles for Recovery Oriented Adult Behavioral Health Services and Systems**

1. **Respect.** Respect is the cornerstone. Meet the person where they are without judgment, with great patience and compassion.
2. **Persons in recovery choose services and are included in program decisions and program development efforts.** A person in recovery has choice and a voice. Their self-determination in driving services, program decisions and program development is made possible, in part, by the ongoing dynamics of education, discussion, and evaluation, thus creating the “informed consumer” and the broadest possible palette from which choice is made. Persons in recovery should be involved at every level of the system, from administration to service delivery.
3. **Focus on individual as a whole person, while including and/or developing natural supports.** A person in recovery is held as nothing less than a whole being: capable, competent, and respected for his or her opinions and choices. As such, focus is given to empowering the greatest possible autonomy and the most natural and well-rounded lifestyle. This includes access to and involvement in the natural supports and social systems customary to an individual’s social community.
4. **Empower individuals taking steps towards independence and allowing risk taking without fear of failure.** A person in recovery finds independence through exploration, experimentation, evaluation, contemplation and action. An atmosphere is maintained whereby steps toward independence are encouraged and reinforced in a setting where both security and risk are valued as ingredients promoting growth.
5. **Integration, collaboration, and participation with the community of one’s choice.** A person in recovery is a valued, contributing member of society and, as such, is deserving of and beneficial to the community. Such integration and participation underscores one’s role as a vital part of the community, the community dynamic being inextricable from the human experience. Community service and volunteerism is valued.
6. **Partnership between individuals, staff, and family members/natural supports for shared decision making with a foundation of trust.** A person in recovery, as with any member of a society, finds strength and support through partnerships. Compassion-based alliances with a focus on recovery optimization bolster self-confidence, expand understanding in all participants, and lead to the creation of optimum protocols and outcomes.

7. **Persons in recovery define their own success.** A person in recovery – by his or her own declaration – discovers success, in part, by quality of life outcomes, which may include an improved sense of wellbeing, advanced integration into the community, and greater self determination. Persons in recovery are the experts on themselves, defining their own goals and desired outcomes.
  
8. **Strengths-based, flexible, responsive services reflective of an individual's cultural preferences.** A person in recovery can expect and deserves flexible, timely, and responsive services that are accessible, available, reliable, accountable, and sensitive to cultural values and mores. A person in recovery is the source of his/her own strength and resiliency. Those who serve as supports and facilitators identify, explore, and serve to optimize demonstrated strengths in the individual as tools for generating greater autonomy and effectiveness in life.
  
9. **Hope is the foundation for the journey towards recovery.** A person in recovery has the capacity for hope and thrives best in associations that foster hope. Through hope, a future of possibility enriches the life experience and creates the environment for uncommon and unexpected positive outcomes to be made real. A person in recovery is held as boundless in potential and possibility.