

Preventing and Addressing Relapse in Recovery Housing

Best Practice Guidance 2020

Introduction				
Recovery houses create living environme supports that help residents build recove important issues that recovery housing caddressing a relapse if it were to occur. along with the quality standards and best	ery capital needed operators face is as Operators of recov	for long term recov sisting residents in ery housing should	ery. One of the mo preventing a relaps review this guidan	ost se or ce
National Alliance of Recovery Residences state or local funding.				

Defining Relapse

Relapse in addiction is complicated because the definition of "relapse" has been evolving, and there is a lack of consensus on the operational definition of the term. This guidance uses the definition that recognizes relapse as a dynamic process rather than a single event:

Relapse is a process that occurs within the individual and manifests itself in a progressive pattern of behavior that reactivates the symptoms of a disease or creates related debilitating conditions in a person that had previously experienced remission from the illness.¹

It is important to note that relapse is a process. There are often thoughts, behaviors and actions that occur prior to a person using illicit drugs or alcohol. A person may experience a one-time use that is an error in judgement that is due to extreme emotions or environmental triggers. Viewing relapse as a process requires that such incidents are evaluated using a person-centered approach with a goal of ensuring safety, reducing trauma, allowing residents to learn from the experience, and providing additional support for residents to break the cycle of relapse.

Strategies for Preventing Relapse

The core of relapse prevention is building quality relationships with and among people in recovery. The social model of recovery is an effective model for creating environments where such relationships can be established. Social model of recovery environments are not only physically safe, but also encourage prosocial interaction. The following are suggestions for recovery homes seeking to implement the social model of recovery for the purposes of relapse prevention.

Help residents develop prosocial relationships

One of the most beneficial aspects of living in recovery housing is creating an environment where residents live together and support each other as a family. Residents also work to hold each other accountable in a positive and supportive way. Residents want to see each other be successful and are there to help residents who have challenges. Strategies to help residents develop positive relationships with one another include

- Using buddy or mentorship systems where residents who have lived in the house longer support newer residents and get to know them
- Setting group mealtimes where residents prepare and enjoy meals together
- Have residents plan and execute social support activities such as picnics, movie nights and other activities for the house
- Encourage residents who notice another resident struggling to reach out, offer to help, and offer support as a friend and peer. Residents should feel free to tell someone if they feel a resident is struggling
- Allow residents to identify ways to help each other celebrate their successes
- Allow residents to play a role in setting and enforcing house rules that are supportive of recovery and hold each other accountable for them

¹ Abrams, D.B., et al. (2003). Tobacco Dependence Treatment Handbook. New York: Guilford Press.

Help staff and leaders develop positive relationships with residents

Recovery homes that offer a higher level of support have paid staff. Recovery homes at lower levels of support may not have paid staff, but there are often residents or others who are seen as community leaders. Recovery homes can ensure that staff and leaders model recovery principals and are available to help residents prevent relapse by

- Ensuring that all staff, no matter their role, are trained on, and understand the basics of the disease of addiction, recovery and the social model of recovery
- Ensuring that any staff who are peers have a support system and can monitor their own recovery
- Provide training on culture and diversity for populations served by the recovery home
- Require training on appropriate boundaries for staff and peer leaders
- Encourage staff and peer leaders to engage with residents informally, to develop friendships, and to create an environment where residents feel safe sharing information and challenges
- Have staff practice engaging in active listening and motivational interviewing

Ensure language used is supportive of recovery

Recovery homes that implement the social model create environments where resident experience is respected, and residents are held in continuous positive regard. One of the most powerful ways that recovery homes can set this culture is by ensuring that the language that they use is appropriate. Recovery homes can ensure their language is supportive of the social model by

- Using person first language
- Avoiding terms that promote stigma or negative perceptions of people with addiction or people in recovery
- Providing training to all staff, volunteers and residents on what language is expected and appropriate when talking about addiction and recovery

Review the Code of Conduct

Every recovery home should have a code of conduct that all residents agree to adhere to. This Code of Conduct is often used to communicate expectations and create a harmonious living environment for residents. The Code of Conduct should contain a prohibition on the use or possession of alcohol or illicit drugs. Recovery homes need to be careful that the Code of Conduct does not turn into a punitive tool that is used more for controlling resident behavior. Instead, the Code of Conduct is used to provide structure and support for residents.

- Review each item and ensure that it is specifically related to ensuring a positive recovery environment
- Ensure any consequences for violations of the Code of Conduct are not punitive, but instead focused on providing additional support to prevent or break a potential cycle of relapse
- Ask residents and successful alumni to contribute to the Code of Conduct and about their feelings about how the Code of Conduct can prevent relapse
- Do not threaten immediate termination from the home for minor diversions from the Code of Conduct. Instead, use conversation and support as a way of learning why the resident is not engaging in appropriate activities.

Screen residents for appropriate level of support

Recovery homes offer different levels of support². One way that recovery homes can prevent relapse is by taking steps to ensure that potential residents are screened prior to entering the home to ensure that the level of support provided is appropriate for the resident.

Recovery homes should talk with potential residents and learn

- The potential resident's experience in treatment and recovery
- The potential resident's commitment to living in recovery
- The potential resident's reasons and goals for living in recovery housing
- What support the resident will need to sustain recovery

The home should consider this information and ensure that the home is able to offer the support that the resident needs. If the recovery home is not able to offer the support needed, the potential resident should be referred to an appropriate level of support or treatment.

Work with residents individually to create a recovery plan that includes relapse prevention

Recovery homes not only create supportive and safe environments, they can also work with residents in a more formal way to prevent relapse by working with them individually to develop a recovery plan. Recovery plans help residents focus and achieve goals. These goals can be very specific to recovery, such as attending meetings or finding a sponsor or other type of mutual aid supporter. These goals can also be supportive of recovery, if not directly related, such as applying for a job, or engaging in a certain number of sober social activities. Recovery homes can help residents include elements in their individualized recovery plans that can help them prevent relapse.

It is critical that the recovery plan be resident driven, with the ability of the residents to identify their own goals and what support is needed for them. Each resident's plan should be different and focused on the resident's individual needs. The recovery plan also needs to be supportive of the resident's chosen recovery pathways, including Medication Assisted Recovery³, 12-step programs, Celebrate Recovery, SMART Recovery or others.

The following chart contains information on common considerations related to relapse, questions you can ask residents to help residents plan, as well as supports that can be offered to help prevent relapse.

² https://narronline.org/wp-content/uploads/2016/12/NARR levels summary.pdf

³ See Best Practice Guidance on Supporting Residents who use Medication Assisted Treatment here: https://www.ohiorecoveryhousing.org/bestpracticeguides

Relapse Considerations	Questions to ask Residents	Strategies to Discuss
Severity of Addiction – The severity of a resident's	How long the resident has been in addiction	Offer more supports for residents who have identified as having longer time in addiction, less successful treatment
addiction is a key indicator of potential relapse.	About any previous experience in treatment	experiences, or multiple attempts to enter recovery. Examples include
	About any previous experience with abstinence or recovery	 Buddy systems Regular check ins Meetings Discussions with sponsor or mutual supporter
Motivation— Residents with low motivation to live in recovery are at greater risk of experiencing a relapse	About reasons why residents want to live in recovery About what they see as the positives of living in long term recovery	Allow residents to identify their own goals and reasons for living in recovery. You can help residents by Connecting them to others in long-term recovery to share their successes Helping them identify the positives of living
	About their goals for living in recovery	 recovery Assisting them in finding ways to have fun and enjoy living in recovery
Confidence – Residents with low confidence, such as those who see themselves as "serial relapsers" are at risk of experiencing a relapse	About any past attempts at living in recovery and what helped and did not help during those times About their perception of how prepared they are to face potential triggers About what they think their potential challenges are and how they plan to face those challenges	 Assist residents in building confidence by Having them create a list of questions and concerns to ask and discuss Allowing residents to share their fears and struggles with you and others in a safe environment Connecting resident to peers in long-term recovery who have faced similar challenges to the ones residents identified Asking residents to think about what they will do before, during and after encountering a challenge in their recovery to develop positive coping skills
Physical and Mental Health – Some residents may also be facing physical and mental health issues in addition to an	About any physical health conditions that they may have	You can help residents address any physical, mental, or dental health issues. • Connecting residents to appropriate health care or behavioral health care services in the community.

addiction. Allowing these issues to go unaddressed may lead to a relapse	About any mental health conditions, they may have About any dental or oral health conditions About their plans for addressing these conditions	 Even if a resident does not have any identified issues, encourage the resident to have a preventative physical exam or wellness visit and also visit the dentist for a routine cleaning as a way to establish healthful habits. Be aware of resources available to help residents sign up for health care programs Discuss strategies for informing their health care provider that they are a person in long term recovery
Social Supports and Recovery Capital – Residents who have people in their lives that are supportive of their recovery are less likely to experience a relapse	Ask about any potential positive social relationships that residents may have. The William White Recovery Capital Scale ⁴ is a useful resource. Ask residents if they have a sponsor or other type of mutual aid support	 You can assist residents in building positive social supports by Helping them find a sponsor or mutual aid supporter Encouraging the resident to meet with peer supporters as well as any sponsor or mutual aid supporter on a regular basis Helping the resident identify sober social support activities, both formal and informal that can help the resident build positive relationships that are supportive of recovery Connecting the resident to employment or volunteer opportunities that interest them
Individual Factors – people have their own experiences that can contribute to relapse.	Talk with residents about any people, places and things that they feel may potentially lead to a relapse	Assist residents in addressing individual factors by Talking about what the resident will do before, during and after, they encounter an individual risk factor

⁴ http://www.williamwhitepapers.com/pr/Recovery%20Capital%20Scale.pdf

Support residents as they implement their plan

Once residents have individualized plan, it is best practice to check in with residents on a regular basis to learn how implementation is going. Best practice strategies for supporting residents in their own recovery plans include

- Give residents specific tasks to help them implement the plan such as going to a certain number of meetings, or making a specific health care appointment
- Set up regular meetings with residents to discuss their plans, ask residents how things are going, and see if residents have completed identified tasks
- Set aside time at house meetings for residents to talk about their plans and support one another

Addressing Relapse with the Individual

When a relapse occurs with a resident, the situation requires the recovery home to not only consider the safety and well-being of the person who has experienced the relapse, but also the safety and wellbeing of the other residents living in the home.

The following is best practice guidance for addressing this situation in recovery housing.

Individual Relapse Plans

The best time to discuss relapse is before it happens. Best practice is to work with residents, individually, when they move into the home on a plan for what will happen should they experience a relapse. This plan should be implemented after any immediate medical needs are addressed and include

- Treatment providers, mutual aid supports, and recovery coaches that can be contacted for additional support of the resident
- Next steps the home will take to address the relapse and expectations of residents
- A safe space the resident can go and a person they can contact if they need to leave the home to support the health and safety of other residents

Addressing the Relapse with the Resident

ORH encourages recovery homes to implement policies and practices that allow residents to remain in the home's program, if possible, after a relapse has occurred. Immediate termination of residency will likely result in further deterioration of their condition and put them at risk of death.

The following are topics to consider when determining if a resident can remain in recovery housing

- The circumstances of the relapse
- Having the resident screened by a treatment provider to determine if there is a need for treatment services
- Review of relapse prevention plan and what changes are needed
- If the home has the ability to provide any additional supports needed based on the new relapse prevention plan
- If the resident remains interested in recovery and recovery housing

The impact of the relapse on the other residents in the home. Consider hosting a meeting with
residents and allow them to discuss if the person should be able to return with increased
supports and agreement to other terms or conditions.

If a resident is determined able to remain in housing, the home should work with the resident to reevaluate their relapse prevention plan, adjust any goals, and increase any supports.

If a resident is unable or no longer wishes to live in recovery housing, the resident must be provided with a referral to treatment, recovery supports or another housing option. The homes policies regarding termination of residency need to consider landlord tenant, fair housing and other applicable state and federal laws.

Emergency response plan

The safety and well-being of the resident who has experienced a relapse should be addressed immediately. Not every occurrence of a resident using alcohol or illicit drugs is cause for extreme alarm; however, each occurrence does need to be evaluated and addressed.

- The recovery home should have an emergency response plan to address a potential overdose
- Naloxone needs to be available in an accessible location
- All residents, staff and others should be offered training in how to administer Naloxone
- Emergency phone numbers should be posted in common locations of the house.
- Any resident who experiences a suspected overdose or seems to be in medical distress should be referred immediately for medical treatment

Keeping other residents safe after a relapse

One of the biggest considerations of recovery housing operators when a relapse occurs is the safety, health and well-being of the other residents in the house who are seeking to live in recovery. Operators can take the following steps to increase the safety of the home for other residents. Operators can increase safety by looking at the physical environment, increasing awareness of relapse, and continuing relapse prevention efforts after a release.

Physical safety

- Take steps to ensure that the home is free from alcohol and illicit drugs.
- Walk with residents through the property to identify any potential safety hazards
- Ensure all locks, doors and windows are working appropriately and that the home is physically secure
- Discuss resident's individual relapse prevention plans with them and connect any residents who need additional support to additional services or supports.

Increasing awareness

Relapse is an ongoing concern. Relapse can manifest itself at any time and all residents should be aware of relapse warning signs for themselves and others. These warning signs can include reliving days of drug use and seeing drug use in a positive light, sudden changes in behavior, increased isolation, avoiding recovery activities, or expressing doubt in the recovery process. A recovery home can increase awareness by

- Providing training to staff on how to identify warning signs
- Discussing with residents what they should do if they notice warning signs in other residents
- Discussing with residents and staff how to be aware of their own actions when others are struggling
- Having honest conversations about the realities of relapse with residents

Relapse prevention efforts after a relapse

Relapse is always a concern with this disease process. It can manifest itself at any time and all residents should be aware of relapse warning signs for themselves and for others. Staff and residents can work together to examine what was learned and how the home can become a stronger recovery environment. The social model of recovery values all experiences as opportunities to learn and gain knowledge in recovery. Allow residents to view the experience as an opportunity to learn and become stronger in their recovery.

- Open discussion about becoming more aware of when another resident may not be doing well or may be struggling is important and necessary.
- Discuss the importance of awareness of actions and inactions when witnessing someone struggling
- Encourage residents to help residents struggling ask for help and identify when help is needed.

Develop partnerships in the community

Sometimes, after a relapse it is determined that the recovery home is unable to provide the level of support that is needed for the resident, and that resident must be referred to a provider in the community who can provide the higher level of support. Recovery homes should develop a relationship with treatment providers and recovery housing operators that offer higher levels of support, so they can quickly and easily make referrals and ensure that residents have access to higher levels of support and treatment, if needed. Recovery housing operators should also be aware of any crisis response services or safe houses, where residents can stay short-term before being allowed to return the house.

Recovery homes should carefully consider policies that require that residents automatically reenter treatment or attend treatment for specific amount of time after experiencing a relapse. The resident may be screened and not determined to be clinically in need of that level of service, and therefore not able to meet such a requirement and be prevented from returning to the recovery home. Any requirements for residents to undergo treatment should be based on the recommendation after a clinical assessment.

About Ohio Recovery Housing

Ohio Recovery Housing (ORH) is an alliance for individuals and organizations operating quality recovery housing in Ohio. It is our mission to increase access to affordable, high-quality recovery housing options for Ohioans in recovery from substance use disorders. We strive to improve the public perception of recovery housing by promoting excellent, well-maintained housing as well as offering outreach, education and best practice guidance.

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Disclaimer

This best practice guidance is not intended to replace the advice of legal counsel or serve as clinical guidance for substance abuse treatment professionals. The exact implementation of the best practice guidance will vary depending on the Level of Support available in the recovery home (peer-run, monitored, or supervised). Recovery homes should be clear about the level of support available in the recovery home with potential and current residents, family members and community members.