

# Questions Asked During Live Webinar Broadcast on 5/15/2020



## *Peer Recovery Support Series, Section VI: A Deeper Dive into Coaching Recovery*

Presenter: Phil Valentine, RCP

### **Do you feel that "Peer" is an intro term...and then "Coaching" happens after "Peer" engagement?**

A: Fascinating question, had to think about this for a bit. As stated, personally I am not a fan of the word peer (<https://ccar.us/peer-rejected>) and at CCAR we use it infrequently. I don't think we need to call ourselves a "peer" to introduce ourselves or to establish a connection. That happens by our presence, our attitude and our ability to care. The words we use, or how we introduce ourselves, are not as important as who we are. I also believe that "peer" limits our field and is used by others to discredit what we do. I think Recovery Coach most accurately describes the role.

### **Is there any discussion about moving some of that training if not the entire academy online?**

A: It's all available online (<http://ccar.us/ccartraining/>)

### **Do we accept friend's requests on Facebook or engage with recoverees on social media?**

A: That's dictated by a few factors... 1. What is the social policy of the agency you work for? 2. Do you personally have a clear purpose for your Facebook page? For me, I set my age up years ago to "put one man's face on recovery". I tell the story of my life in recovery, so I'll post selected family events, recovery topics (usually encouraging) and refrain from controversial subjects. CCAR also trusts its employees to make that call. So the simple answer... it depends.

### **CCAR has led the way in the recovery coaching world. Would you like to see a "CCAR-like organization" in each and every state? Are there urban or rural areas of the country you feel are lacking or lagging behind in recovery coaching within the framework of the CCAR vision?**

A: I believe every state *needs* a Recovery Community Organization (RCO). Faces & Voices of Recovery has a listing on their website. An RCO can coordinate and deliver effective recovery support services and also advocate for issues of importance to the recovery community and train others. Any time something new (or re-introduced) gains traction, some places take the lead and some will resist. It's natural. As advocates, our voices influence policy makers, especially where services are needed.

### **I am a State Certified Peer Recovery Coach. How do you maintain that boundary of friendship and not get too close or involved over long term period?**

A: Why wouldn't you want to get too close or involved? If that happens, CCAR believes a coach has the choice and through a mutual decision process to *officially* end the coaching relationship so the friendship can blossom. The role of friend/companion garners the most discussion in the CCAR Recovery Coach Academy©. I wrote a piece to expand on this concept (<https://ccar.us/recovery-coaching-and-friendship/>).

### **The idea of a peer coach is that we've been through what you've been through. What is the best way to work with someone, so they don't see you as just another authority figure or professional?**

A: There is so much more to a recovery coach than the main idea espoused here. Some people may want someone who does have the *authority* to connect them to resources. In our experience many people appreciate that we are *professionals*; it means we know what we're doing. The best way to work with someone is to be genuine, no matter your lived experience. People don't care how much you know, until they know how much you care.

### **What's the best way to sell recovery coaching to the professional community to get referrals?**

A: Is there a best way? That would depend on the professional community you're referring to and your personal art and science of developing a business. I often use the Joshua's Knee story (<https://ccar.us/joshua-knee-recovery-coach-role-further-defined>) to help people understand the Recovery Coach profession.

### **What are your thoughts on Harm Reduction VS. Abstinence?**

A: Harm reduction works. Abstinence works. Depends on the recoveree. I would not pit the two against each other like this question poses. Both are legitimate pathways. As a Recovery Coach, support both.

### **The Virginia Peer Recovery Specialist training content puts "peer support" as distinct from "peer coaching." This is true in some other states. Why is there no "national standard" to dispel the confusion and promote evidence-based practices and other benefits, etc.?**

A: I don't know why states do this. It makes no sense to me. CCAR has the [Recovery Coach Professional \(RCP\)](#) designation as one standard. I wrote about it [here](#). We have also set up an [International Association of Recovery Coach Professionals \(IARCP\)](#) for reasons cited above.

### **What is the best way to raise awareness for the value of peer support in the professional communities? I am personally making inroads in the DSS/Foster care community.**

A: Sounds like you're doing it! Telling stories, providing data and advocating.

### **How does a therapist juggle being a recovery coach and a therapist?**

A: To me, this would seem quite difficult. I'd need to ask the person some questions. First and foremost, I'm curious why the two professions? I have seen many people abandon their clinician, counselor, therapist role and become recovery coaches. I have also seen a few transition from recovery coach to clinician.

### **How do you keep the fundamental principles of recovery coaching, planting the seed of recovery and supporting it, as the recovery support field continues to be professionalized and dependent upon outcomes?**

A: One of the roles of a recovery coach is Advocate. As a field, we need to define and define the Recovery Coach role. Funders often dictate the need for outcomes and place an extraordinary administrative burden in order to bill. At CCAR, we have resisted billing and provide recovery coaching through grant funding – in my opinion, the best way to fund the service. Other payment mechanisms are currently being devised that are more recovery-friendly. Finally, the simple answer to your question is leadership. Great leaders are aware of the essence of recovery coaching and will strive to ensure, promote and protect the key principles.

### **What is your opinion in regard supply and demand of illegal hard drugs or other addictive and illicit substances? In other words, you recovered, but many other folks are being engaged on illicit substances because the supply is there. What would you do to stop the supply of illicit substances and prevent people from engaging in addiction?**

A: Supply will ALWAYS be there as long as there is DEMAND. I think stopping the supply is a fruitless endeavor, we've proven that time and again. And how do we stop people from getting addicted? People need to love and be loved. And even if this happens, people will still become addicted, we're human.

### **Is certifying recovery coaches over credentialing?**

A: Depends on who's using the terms... they are often interchanged. Most states have Certification Boards. I'd check with yours.

### **What is an Emergency Department Recovery Coach?**

A: Here's the simple answer – a recovery coach that works in an emergency department (sorry), But here's a link to a [video](#).

### **Why do these people need to be owned and managed by a Recovery Community? These organizations are tacking on specific experience and recommendation criteria - can't it be a Recovery Cafe? We are running into control issues with these organizations that are trying to block our access to people and grants.**

A: Of course a Recovery Café can employ recovery coaches. I have not heard of a recovery community “owning” recovery coaches.

### **Is there a Recovery Coach certification process and if so, how would one do that?**

A: CCAR has the [Recovery Coach Professional \(RCP\)](#) designation as one standard. I wrote about it [here](#). We have also set up an [International Association of Recovery Coach Professionals \(IARCP\)](#) for reasons sited above.

### **Why did you pick this field?**

A: The field chose me. However, from a very young person, I’ve been drawn to coaching. In my teens, I coached soccer and basketball. Then I found recovery. I’m blessed to combine two passions.

### **If Recovery Coaches aren't the ones to attract people to recovery, who will have that role? Is this a gap in services?**

A: We all have a role to make recovery attractive – people in recovery, family members, friends and allies. Over the decades, many roles have emerged to assist people initiate recovery – outreach workers, social workers, interventionists, harm reductionists... and probably more that I can’t recall. Recovery Coaches do attract people to recovery by their example.

### **How do you reduce stigma around MAT within the recovery community?**

A: When you figure that out, let me know. When I’m asked personally, I talk about taking medication as prescribed. I wrote a blog about [pain medication](#) that expands on this topic. .

### **Can you talk more about other recovery pathways?**

A: Simply put, I used to believe that 12-Step recovery was the only way. I no longer believe that. Again, another link to a blog on the topic of [Multiple Pathways](#).

### **Do you ever use the term "peer" recovery support in regard to those going through the recovery process at the same time; the "peer" age referring to length of time in recovery versus date of birth?**

A: I do not.

### **How is COVID-19 and social distancing affecting your RCO?**

A: We adapted quickly and develop our own system of DRS (Digital Recovery Support) – online meetings, online training, enhanced and expanded Telephone recovery Support (TRS), more FaceTime calls, textmessaging, etc.

### **Do you want to share your AT trail name?**

A: Right Click because my right knee clicked going uphill.

### **Can Recovery Coaches who work in an outpatient setting, refer clients to detox/inpatient settings if their primary clinician agrees to it?**

A: I see this particular role, as you’ve described it, as being outside the lane of recovery coaching.

### **What would you do if you are supporting a participant in recovery and the participant continues to indulge in substance use?**

A: Ask good questions. Be curious. Promote recovery.

### **Regarding social media and recovery coaching, does HIPPA etc. have a part also?**

A: This question is out of my area of expertise. At CCAR, we would never endorse talking about medical information on social media.

# *Sober Peer*

Presenter: Mark Cole

**Are recovery coaches at your organization employees or independent contractors? If employees, are they full time, part time, have a schedule or being on call?**

**A:** Sober Peer is a mobile health platform that you can use to support your clients and grow your practice. We don't hire coaches or counselors to work for us or to compete with you. Instead, our platform helps you to earn money directly by working with your clients or by getting connected to Sober Peer app users seeking professional help. You have the freedom to choose the hours and number of clients you would like to serve.

**Can an organization resell Sober Peer? I am very interested in this – I am an EHR integrator.**

**A:** Yes, we support this model. Contact Mark Cole at [mark@soberpeer.com](mailto:mark@soberpeer.com) for additional details.

**How do we get access to this app?**

**A:** The Sober Peer app can be downloaded for free from the Apple App Store (iOS) or Google Play store (Android).

**Is this app connected to any specific EHR for medical billing?**

**A:** We can exchange data via an API or import/export feature with any EHR system.

**Is Sober Peer for practitioners only? I am a Sober House Peer Manager and am interested in implementing a resource like this for some of our residents.**

**A:** The app is used by both individuals and practitioners. Individuals can download the app for free and join a digital community of peers for support and encouragement. Practitioners can also create community small groups to connect program participants, host group telehealth video sessions, and securely text chat with individuals.