

**A participative approach to curriculum development for adults in addiction recovery across the European Union**

**www.recoveu.org**

**Facilitation Pack Section 2 (Final):**

**Course Pack**

**Deliverable 8.1: Revised Course Pack**

**(This also forms part of Deliverable 8.3: Final Facilitation Pack)**

**September 2016**

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**CONTENTS**

[1 ABOUT THE RECOVEU PROJECT 3](#_Toc462154145)

[1.1 Background and Aims 3](#_Toc462154146)

[1.2 Partners 3](#_Toc462154147)

[1.3 Development of the Course 3](#_Toc462154148)

[1.4 Target Group 4](#_Toc462154149)

[1.5 Evaluation 4](#_Toc462154150)

[2 THE RECOVEU COURSE 4](#_Toc462154151)

[2.1 Modules 4](#_Toc462154152)

[2.2 Learning Objectives 5](#_Toc462154153)

[2.3 Guidelines for Participants 5](#_Toc462154154)

[3 COURSE OVERVIEW 6](#_Toc462154155)

[4 MODULE SUMMARIES 8](#_Toc462154156)

[5 MODULE 1 – OUTLINE 13](#_Toc462154157)

[6 MODULE 2 – OUTLINE 18](#_Toc462154158)

[7 MODULE 3 – OUTLINE 22](#_Toc462154159)

[8 MODULE 4 – OUTLINE 26](#_Toc462154160)

[9 MODULE 5 – OUTLINE 30](#_Toc462154161)

[10 GLOSSARY 34](#_Toc462154162)

[11 BIBLIOGRAPHY 38](#_Toc462154163)



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# ABOUT THE RECOVEU PROJECT

## Background and Aims

The RECOVEU project is defined as ‘A participative approach to curriculum development for adults in addiction recovery across the European Union’. It works with service users and providers to develop an ‘Access to Learning’ course that will support people in recovery from drug addiction to participate in adult learning. RECOVEU aims to:

* Help people in recovery from addiction to understand the value of learning.
* Build self-efficacy (belief in one’s ability to complete tasks and reach goals).
* Build self-esteem (how a person feels about themself).
* Aid the development of ‘recovery capital’ (resources needed to initiate and sustain recovery from substance misuse).
* Increase opportunities for social inclusion and community participation.

RECOVEU is funded under the EU’s Grundtvig Lifelong Learning Programme (LLP). The project supports the aims of the LLP by improving the attractiveness and accessibility of learning opportunities for adult learners at particular risk of social exclusion and marginalisation. Successful engagement in further learning has the potential to increase employability and social re-integration. The project’s aims are consistent with EU strategies to develop more inclusive societies and ensure that all citizens can access opportunities for lifelong learning and up-skilling throughout their lives.

## Partners

* IEPR – Institute for Education Policy Research, Staffordshire University (United Kingdom) (Lead Partner).
* Soilse – a drug rehabilitation programme (Ireland).
* CARDET – Centre for the Advancement of Research and Development in Educational Technology (Cyprus).
* St. Dimitrie Program – an addiction information and counselling programme (Romania).
* SANSAT – Cooperativa Sociale San Saturnino Onlus – a social enterprise working with drug addicts and other disadvantaged people (Italy).

## Development of the Course

The RECOVEU project uses the experiences of people in recovery to develop the curriculum. It also uses experiential and participative approaches to impart the learning. Participants are in recovery from addiction and the emphasis in the course is to facilitate their progress into further education. The project was developed based on:

* Focus groups with 94 recovering drug users and service providers across the five partner countries.
* A comprehensive review of policy and practice in the partner countries.
* The expertise of the partners in drug rehabilitation/counselling and developing educational learning programmes.
* A pilot study of service users (adults in drug recovery) across the five partner countries. A draft form of the RECOVEU course was delivered to 72 service users; feedback from them and the trainers delivering the course was then used to inform revision of the course materials and production of this Final Facilitation Pack.

## Target Group

The audience for the course is people in self-defined recovery. How ‘recovery’ is defined may vary across countries. However, the general rule is that the course is for people who want to access further learning.

## Evaluation

In addition to the curriculum, an Evaluation Toolkit has been developed to help educators assess the impact of participation on learning self-efficacy, employability self-efficacy, vocational training self-efficacy, recovery capital, and self-esteem.

# THE RECOVEU COURSE

## Modules

The RECOVEU course consists of five modules:

* Module 1 – Digital Literacy
* Module 2 – Recovery and Resilience
* Module 3 – Learning to Learn
* Module 4 – Recovery and Community
* Module 5 – Recovery and Employability

Each module has four units. Two of these are core units to be used in all partner countries. The other two are cultural units that can be adapted to local settings. Each unit is designed to last for one hour. Therefore, in total there are 20 hours of trainer-led group sessions. Note, however, that some activities may take longer depending on participants’ needs.

A Course Overview and Module Summaries are presented in Sections 3 and 4 below. These are followed by individual Module Outlines which provide detailed information on what is included in each module. Trainers use worksheets and information and communications technology (such as videos, YouTube clips and PowerPoint presentations) to support the learning.

Guidance on delivering the course materials and Evaluation Tools can be found in the two other sections of the *Facilitation Pack* and in the *Train the Trainers Module*:

**Please refer to the *Facilitation Pack Section 1 (Final): Delivery Guidelines* for specific guidance on delivering the RECOVEU course materials.**

**Please refer to the *Facilitation Pack Section 3 (Final): Evaluation Toolkit* for the Evaluation Tools and guidelines for their use.**

**Please refer to the *Train the Trainers Module* for additional activities and guidance on delivering the RECOVEU course materials and Evaluation Toolkit.**

**All RECOVEU documents and course materials can be found on the RECOVEU website:** [**www.recoveu.org**](http://www.recoveu.org)

## Learning Objectives

The learning objectives of the course are to help participants:

* Understand the factors that will help them to engage successfully in further learning.
* Understand the factors that might prevent them from engaging in further learning.
* Understand the history, theory and principles of recovery capital.
* Build their self-esteem.
* Build their self-efficacy for learning, employability and vocational training.
* Learn how to access information and support resources.
* Develop their understanding of recovery communities.
* Develop understanding of their employment potential**.**

## Guidelines for Participants

Participants are asked to follow a set of guidelines for involvement. There may be variations among countries but the following are some suggestions:

* No intoxication.
* Respect confidentiality, give everyone the opportunity to speak, and treat other participants and trainers with respect.
* Sign in and sign out.
* Switch mobile phones off.
* Do not take photographs of other participants or trainers during sessions.
* Attend all sessions on time.
* Limit side conversations and facilitate respectful discussion.

# COURSE OVERVIEW

| **Module** | **Unit** | **Resources**PowerPoints (ppt), worksheets and information sheets \* |
| --- | --- | --- |
| 1 | **Digital Literacy** | 1.1 | Digital Divide and Digital Literacy (CORE) | 1.1A1.1B1.1C | Digital Literacy Guide (printed)Digital Divide and Digital Literacy (online)The 3 Initial Steps (handout) |
| 1.2 | Basic Computer Skills (CORE) | 1.2A | Basic Computer Skills (online) |
| 1.3 | The Internet (CORE) | 1.3A | Internet (online) |
| 1.4 | Social Interactions (CORE) | 1.4A1.4B | Social Interactions (online)Module Glossary List (handout) |
| 2 | **Recovery and Resilience** | 2.1 | From Active Addiction to Recovery (CORE) | 2.1A | Russell Brand: From Addiction to Recovery (ppt) |
| 2.2 | My Recovery Journey (CORE) | 2.2A2.2B | My Recovery Journey (ppt)Storyboard (ppt) |
| 2.3 | Building my Recovery Capital (CULTURAL) | 2.3A2.3B | Coming Clean: Overcoming Addiction without Treatment (ppt)Your Recovery Capital (ppt worksheet) |
| 2.4 | SMART Goals using the Principles of Recovery (CULTURAL) | 2.4A2.4B | SMART Goals in Recovery (ppt)My Goals – My Recovery Capital (ppt worksheet) |
| 3 | **Learning to Learn** | 3.1 | Recovery-Centred Learning (CORE) | 3.1A3.1B | Experiential Learning (ppt)Kolb Model and Worksheet (ppt) |
| 3.2 | Challenges for Learners in Recovery (CORE) | 3.2A | Challenges to Learning (worksheet) |
| 3.3 | Orientation for Access Education (CULTURAL) | 3.3A3.3B3.3C | Links for Vocational Tests (handout)Vocational Evaluation Test-RomaniaDo’s and Don’ts (handout) |
| 3.4 | Learning Using Study skills (CULTURAL) | 3.4A3.4B3.4C3.4D | Study Skills (ppt)Study Skills (worksheet)Mind Map WorksheetResources for Vocational Training (handout) |
| 4 | **Recovery and Community** | 4.1 | What is a Recovery Community? (CORE) | 4.1A4.1B4.1C4.1D | Module Introduction (ALL UNITS ppt)What is a Recovery Community? (ALL UNITS ppt)Building Recovery Communities UK-NTA (pdf report) Recovery Communities across Europe (handout) |
| 4.2 | Functions of Recovery Communities (CORE) | 4.2A4.2B | Functions of a Recovery Community (ALL UNITS ppt)Professional Boundaries Worksheet |
| 4.3 | What is a Recovery Coach? (CULTURAL) | 4.3A4.3B | Experiential Knowledge and Experiential Expertise (ALL UNITS ppt and separate handout)The Recovery Coach Role (ALL UNITS ppt) |
| 4.4 | Next steps – Personal Action (CULTURAL) | 4.4A4.4B | Daily Inventory of ‘My Recovery’ WorksheetGroup Tasks: Final Thoughts (ALL UNITS ppt) |
| 5 | **Recovery and Employability** | 5.1 | People in Recovery and Employability Skills (CORE) | 5.1A5.1B5.1C5.1D | Finding a Job (ppt)Build Your CV (ppt)Replying to a Job Advertisement (ppt)Preparing for a Job Interview (ppt) |
| 5.2 | Understanding the Social Enterprise (CORE) | 5.2A5.2B5.2C | Understanding Enterprise and Social Enterprise (ppt)Working in a Social Enterprise (ppt)Networks (ppt) |
| 5.3 | Applying the Social Enterprise Model to Recovery (CULTURAL) | 5.3A | Applying the Social Enterprise Model to Recovery (ppt) |
| 5.4 | Designing a Recovery Social Enterprise (CULTURAL) | 5.4A | Business Plan Example (worksheet) |

\* Videos and YouTube presentations are also included within the course. The specific links for these are given in the Module Outlines.

# MODULE SUMMARIES

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| **Module 1: Digital Literacy**This module sets out to give people in self-defined recovery the skills and knowledge to use digital applications to support their recovery. The aim is to give learners a solid foundation on digital literacy including development of computer skills, and familiarisation with the online environment. Learners will be able to obtain the advantages of online access to acquire recovery supports and reinforcement. The module also challenges learners to address internal barriers to their development and counteracts digital disadvantage. |
| **Unit 1.1: Digital Divide and Digital Literacy (CORE)**Digital Literacy refers to the skills that one should acquire in order to be able to use a computer or other electronic devices that provide access to the internet. Users will learn what digital literacy is, some useful things about E-learning and why being able to use a computer is important for personal development. |
| **Unit 1.2: Basic Computer Skills (CORE)**Computers can be used for different purposes both for entertainment and for work. The basic literacy skills related to the use of a computer can be applied to both situations. In this regard, this Unit will introduce learners to the basic hardware and software tools. |
| **Unit 1.3: The Internet (CORE)**The internet is for many people nowadays an integral part of everyday life. It is very important for people to learn how to use it effectively. Concepts like information retrieval, communication, internet safety and internet addiction are discussed. |
| **Unit 1.4: Social Interactions (CORE)**One basic reason why people use the internet is communication and participation to online communities. In order to achieve this people use a specific type of internet services – Social Media. This unit is about the types and features of Social Media and the dangers that may arise by their use. Rules of online etiquette are also stressed. |

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| **Module 2: Recovery and Resilience**This module sets the context for the course. The module will demonstrate how people can progress from active addiction to recovery. It will focus on the individual’s own recovery journey and how they have developed their recovery capital to enable this progression. It will also introduce planning tools, using the SMART model to correspond and measure progress against the recovery principles. |
| **Unit 2.1: From Active Addiction to Recovery (CORE)**People in addiction may endure and come through the most traumatic human experiences. Yet they continually prove change is possible against the most overwhelming circumstances. Many successfully come out the other end. Those in active addiction have been marginalised and may have wasted many years of their lives, enduring extreme emotional and physical deprivation. In turn they demonstrate that recovery is obtainable. Recovery is a reality often hidden due to pervasive stigma. Recovery is fulsome and holistic, resulting in fulfilling lives with real purpose and direction. This unit examines the characteristics of active addiction and recovery and how change occurs. |
| **Unit 2.2: My Recovery Journey (CORE)**Recovery is the process where people overcome drug addiction and find themselves recreating their lives. It is self-directed but supported also by others. Recovery involves recognition of the need to change. Recovery is based on continual growth and improved functioning along a continuum of health and wellness, resulting in a better quality of life. This unit will demonstrate what people need to do to initiate, develop and sustain their recovery. |
| **Unit 2.3: Building my Recovery Capital (CULTURAL)**Recovery capital is constructed by developing personal strengths and utilising assets that exist in local communities. Building social, physical, human and cultural capital creates new meaning and facilitates people on their recovery journey. Recovery capital is developed on a daily basis. This unit will explore the story of Cloud and Granfield’s (1999) study, ‘Coming clean; overcoming addiction without treatment’.  |
| **Unit 2.4: SMART Goals using the Principles of Recovery (CULTURAL)**There is an old adage, ‘Failing to plan is planning to fail’. People from an addiction background have a habit of reacting to situations rather than responding to events. Therefore, reflection and planning are key elements in the recovery journey. This unit will introduce participants to the principals of recovery and the importance of goal setting and encourage then to set obtainable goals, no matter where they are on the recovery journey. |

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| **Module 3: Learning to Learn**This module looks innovatively at the learning process for individuals in self-defined recovery. It is focused on how adults learn, the context of learning, and the challenges in the adult learning experience. It will empower and prepare participants with the knowledge and skills to deal with both positive and negative learning experiences. It will also focus on participants own learning needs and present concepts and ideas for reflective learning. |
| **Unit 3.1: Recovery-Centred Learning (CORE)**To effectively change their lives, adults in recovery have to go through a learning process. Adult learning is linked to the degree and quality of individuals’ interactions and their social/cultural contexts. An experiential learning focus content dealing with recovery issues can support the maintenance of recovery. This unit will explore types of learning that create change in a person. It will also show you how to record these changes. |
| **Unit 3.2: Challenges for Learners in Recovery (CORE)**When adults in recovery decide to go back to education, they enter a new learning environment that can bring many challenges. This can trigger a flight or fight response. Although this may trigger the same response in mainstream students, the effect of engaging in education for someone in recovery can be much more challenging. There may be considerable stigma associated with both addiction and mental health, and feelings of inadequacy. Adult learners in recovery need to set strong boundaries and have ‘staying safe’ techniques at hand. This unit looks at the fears and difficulties of undertaking adult learning, reviews the ‘flight or fight’ response to stressful situations, and discusses techniques for dealing with problems, conflict and asserting oneself. |
| **Unit 3.3: Orientation for Access Education (CULTURAL)**Adult learners in recovery who plan to go to college need to prepare well. They should be fully informed and clear as to their journey ahead and be working from an individual educational plan (IEP). Remember: ‘failure to plan is planning to fail’. A big part of accessing adult learning is orientation, making sure you know the course, college and issues you need to be familiar with. Participants will receive up-to-date practical information on courses and other types of vocational training they intend to follow and will have the opportunity of reflecting on, and writing about their life experience, thus allowing them the opportunity to exercise their writing skills. |
| **Unit 3.4: Learning Using Study Skills (CULTURAL)**Learning requires the fulfilment of certain factors such as opportunities for learning (formal, informal, vocational education) and study skills. Study skills and study strategies are ways that make learning simpler, more fun and more effective. They are generally critical to success in education. Study skills help people organise and take in new information, retain new information and deal with assessing new information. Since adults in recovery have had for a good period of time other priorities in their life than education, they have lost the opportunity of exercising these skills. This module looks at effective studying techniques and helps participants to make a personal inventory of the study skills they need to develop. |

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| **Module 4: Recovery and Community**Effective recovery communities have access to housing, work, education, mutual aid and peer support. This module is designed to introduce ideas about integration into drug free communities and the benefits of mutual support and recovery coaches. These social mechanisms represent opportunities to strengthen and sustain recovery through social networks. The module is designed to facilitate initial discussions and to develop thinking about how each individual may move forward with their recovery.  |
| **Unit 4.1: What is a Recovery Community? (CORE)**The benefits of becoming involved in a community that celebrates addiction recovery and recognises the contagious nature of recovery has been identified as a vital aspect of sustaining personal recovery. This units starts by defining our understanding of what community is, goes on to explore some key ideas about how recovery communities have developed, and introduces the idea of a ‘Community of Practice’. How people may be members of different communities through shared experiences will also be discussed.  |
| **Unit 4.2: Functions of Recovery Communities (CORE)**Participants will consider different ways they are and can become involved in a Recovery Community. Using the Professional Boundaries Worksheet participants will explore different roles they have in their lives and communities before discussing how they can maintain personal boundaries and stay safe. The key issue in this unit is to explore the difference between experiential knowledge and experiential expertise. This is the way we can use our experience to inform our work, thus supporting others whilst developing expertise as a coach. |
| **Unit 4.3: What is a Recovery Coach (CULTURAL)**Participants will be introduced to recovery coaching as a function in the community, the idea of recovery as contagious and how this may be helpful. The role a Recovery Coach may have in supporting change, and providing ideas about how to manage and acknowledge difficulties, are important issues to be discussed in this unit. This unit considers the need for people in recovery to develop expertise in sharing their experiences. The concepts of experiential knowledge and experiential expertise are explored to develop thinking around the idea that what works for one person in addiction recovery may not work for a different person. |
| **Unit 4.4: Next Steps – Personal Action (CULTURAL)**Participants will explore their own learning and prepare an action plan to take forward. They will develop a personal Inventory of ‘My Recovery’, examine key learning aspects for them in relation to recovery communities and recovery coaching, and discuss as a group how they will take this forward for the future.  |

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| **Module 5: Recovery and Employability**This module aims to give people in self-defined recovery a clear insight into their employment potential and how to go about preparing for work. Using the social enterprise model, participants can explore supports, rights and responsibilities that will equip them for work, while contributing to their recovery capital and vocational development. |
| **Unit 5.1: People in Recovery and Employability Skills (CORE)**Employment is an important step on the recovery path but it can present several difficulties for people in recovery due to internal barriers (e.g. low self-esteem or knowing how to explain any breaks in studies and career) and external barriers (e.g. stigma). Moreover, people in recovery often come to vocational guidance services/employment services with unrealistic expectations: to find a job immediately, to get a job without having the required skills, to get a high-level position quickly or to earn a high salary. Awareness of the reality of the employment market is vital. Participants will learn how to research and search for a job, build up a CV, write a cover letter and plan/manage a job interview. |
| **Unit 5.2: Understanding the Social Enterprise (CORE)**Many people in recovery want to start their own business because of the difficulty they experience in finding a job. However, setting up and running a business requires people to be highly motivated and able to work both on their own and as part of a team. Working in a social enterprise can offer advantages due to the greater sensitivity and the aims of solidarity, but it requires the same commitment as working in any other enterprise. This unit discusses general notions on entrepreneurship and the different forms of enterprise, how to manage and work in a social enterprise, and the risks and benefits of doing so. |
| **Unit 5.3: Applying the Social Enterprise Model to Recovery (CULTURAL)**Social enterprise can be a great way for people in recovery to re-enter the workforce. It enables personal growth and empowerment but also offers a way to build a ‘community’ and solidarity awareness. Working in a social enterprise enables people to develop their professional skills, personal skills, organisational skills and social skills. This unit addresses the personal benefits and requirements of working in a social enterprise. |
| **Unit 5.4: Designing a Recovery Social Enterprise (CULTURAL)**Participants will be introduced to different types of social enterprises such as agriculture (social farms), cafés, shops and businesses. Organising a visit to a social enterprise or inviting a representative to speak to the group can be a very useful way of learning more about the reality within a specific sector. For example, people in recovery do not want to work in the agriculture sector because they think it is hard work and they usually do not know how it is organised. However, in reality social farms offer employment to many disadvantaged people. Participants will design a project (or a business plan) for a social enterprise in one of these sectors based on the information acquired in the previous units. |

# MODULE 1 – OUTLINE

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| **Module Name**  | **Lead Partner** |
| Digital Literacy  | CARDET, Cyprus |

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| **Module 1 – Units** |
| Unit 1.1: Digital Divide and Digital Literacy **CORE** |
| Unit 1.2: Basic Computer Skills **CORE** |
| Unit 1.3: Internet **CORE** |
| Unit 1.4: Social Interactions **CORE**  |

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| **Module Overview**This module sets out to give people in self-defined recovery the skills and knowledge to use digital applications to support their recovery. The aim is to give learners a solid foundation on digital literacy including development of computer skills, and familiarisation with the online environment. Learners will be able to obtain the advantages of online access to acquire recovery supports and reinforcement. The module also challenges learners to address internal barriers to their development and counteracts digital disadvantage.**Module Objectives**Upon completion of this module participants should be able to:* Appreciate the importance of being digitally literate.
* Develop basic skills in both computer and internet use.
* Navigate with safety on the WWW and deal with threatening situations.
* Use Social Media services to communicate online by applying the rules of online etiquette.

**Learning Elements*** PowerPoint presentations, images, audio recordings, diagrams – all units
* Scenarios – Units 1, 2 and 4
* Screenshots and links to websites – Units 2, 3 and 4
* Charts with percentages – Unit 4
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| **Unit 1.1: Digital Divide and Digital Literacy** |
| **Introduction**Digital Literacy refers to the skills that one should acquire in order to be able to use a computer or other electronic devices that provide access to the internet. In this unit users will learn what digital literacy is, some useful things about E-learning and why being able to use a computer is important for their personal development. **(1.1A – Digital Literacy Guide, 1.1B – Digital Divide and Digital Literacy)** Prior to accessing the module, users will be given detailed instructions on what is required for them to set up their online learning environment. **Learning Outcomes**Upon completion of this unit participants should be able to:* Describe what Digital Literacy is and why it is useful.
* List some benefits of E-learning.

**Content**Setting up the Digital Learning Environment: Creating an e-mail account, setting up a Google group, and accessing the RECOVEU E-Learning Platform. **(1.1C – The 3 Initial Steps)**Digital Divide1. What is the Digital Divide?
2. Why to overcome Digital Divide?

Digital Literacy1. What is Digital literacy?
2. Digital literacy skills

E-learning1. What is E-learning?
2. Benefits of E-learning
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| **Unit 1.2: Basic Computer Skills** |
| **Introduction**Computers can be used for different purposes both for entertainment and for work. The basic literacy skills related to the use of a computer can be applied to both situations. In this regard, this unit will introduce learners to the basic hardware and software tools. **(1.2A – Basic Computer Skills)****Learning Outcomes**Upon completion of this unit participants should be able to:* List the basic parts of a computer and describe their functions.
* Recognize the basic components of the Windows Operating system.
* Categorize the basic office suite programs according to their services and recognize the basic features of the Apache Open Office programs.

**Content**What is Digital Literacy?Basic parts of a computer * 1. Keyboard, Mouse, Screen
	2. Devices connected to a computer
1. Printer
2. USB Flash Drive
3. Camera
4. Speakers
5. Modem
6. How to start a computer (will include job aid for printing)

Operating Systems 1. Windows XP
2. Windows 7
3. Windows 8

Basic Components of Windows 1. Taskbar
2. Start Menu
3. Understanding the parts of a window
4. Folders
5. File extensions
6. Media Player

MacOSOffice Suite1. What is Office Suite?
2. Office Suite programmes
	* + 1. Word processors
			2. Spreadsheets
			3. Presentation programmes
3. Open Office
4. Word processors
5. Spreadsheets
6. Presentation programmes
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| **Unit 1.3: The Internet** |
| **Introduction**The internet is for many people nowadays an integral part of everyday life. It is very important for people to learn how to use it effectively. Concepts like information retrieval, communication, internet safety and internet addiction are discussed in this unit. **(1.3A – Internet)****Learning Outcomes**Upon completion of this unit participants should be able to:* Recognize the processes of accessing information on the internet and how to critically evaluate online information.
* Describe ways of communication through a computer or a mobile phone.
* List some rules for better use of the internet concerning internet safety and internet addiction.

**Content**What is the internet?Access to the internetInternet Browsers* + 1. Internet Explorer
		2. Mozilla Firefox
		3. Google Chrome
		4. Safari

Internet servicesSearch for information on the internet* 1. Access to information
	2. Critical evaluation of information
	3. Guidelines to online services

Internet Safety* 1. Computer Protection
1. Choose what you share online
	1. Password protection
	2. Internet Addiction
2. Signs and symptoms
3. Ways to deal with internet addiction
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| **Unit 1.4: Social Interactions** |
| **Introduction**One basic reason why people use the internet is communication and participation to online communities. In order to achieve this people use a specific type of internet services – Social Media. This unit is about the types and features of Social Media and the dangers that may arise by their use. Rules of online etiquette are also stressed. **(1.4A – Social Interactions, 1.4B – Module Glossary List)****Learning Outcomes**Upon completion of this unit participants should be able to:* Define what Social Media are and list some basic types of Social Media.
* Categorize the different features of Social Media.
* List some basic features of Gmail and Skype
* Distinguish between effective and ineffective online communication.

**Content**Online social participationCommunication* + 1. Email
		2. Skype
		3. Mobile applications
1. Viber
2. WhatsApp

Online etiquette* 1. Basic Rules of Online Etiquette
	2. Dealing with Cyber Bullying

Social Media* + 1. Facebook
		2. Twitter
		3. Instagram
		4. LinkedIn
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# MODULE 2 – OUTLINE

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| **Module Name**  | **Lead Partner** |
| Recovery and Resilience  | Soilse, Ireland |

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| **Module 2 – Units** |
| Unit 2.1: From Active Addiction to Recovery **CORE** |
| Unit 2.2: My Recovery Journey **CORE** |
| Unit 2.3: Building my Recovery Capital **CULTURAL** |
| Unit 2.4: SMART Goals using the Principles of Recovery **CULTURAL** |

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| **Module Overview**This module sets the context for the course and will demonstrate:1. How people can progress from active addiction to recovery
2. The individual’s own recovery journey and the many pathways to recovery
3. How people have developed their recovery capital to enable this progression
4. The SMART model – an introduction to this self-defining goal setting tool
5. How people can benefit from the recovery principles

**Module Objectives**Upon completion of this module participants should be able to:* Trace their progress from addiction to recovery
* Understand Recovery Capital
* Reflect and set goals on their recovery journey
* Build a collaborative learning process
* Apply recovery principles

**Learning Elements*** PowerPoint presentations
* Video ‘Addiction to Recovery’ – Russell Brand
* Digital story board
* Group work/discussions
* Paper worksheet exercise
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| **Unit 2.1: From Active Addiction to Recovery** |
| **Introduction**People in addiction may endure and come through the most traumatic human experiences. Yet they continually prove change is possible against the most overwhelming circumstances. Many successfully come out the other end. Those in active addiction have been marginalised and may have wasted many years of their lives, enduring extreme emotional and physical deprivation. In turn they demonstrate that recovery is obtainable. Recovery is a reality often hidden due to pervasive stigma. Recovery is fulsome and holistic, resulting in fulfilling lives with real purpose and direction. This unit examines the characteristics of active addiction and recovery and how change occurs.**Overview**Using three specific exerts from a documentary (Russell Brand: ‘Addiction to Recovery’) this session will use group discussion to answer the questions posed. It will also allow participants to get to know each other.PowerPoint Introduction overview of unit (5 minutes) **(2.1A– Russell Brand: From Addiction to Recovery)**Video using three clips – approximately 15 minutes in total1. Introduction (0:00-3:00 minutes)
2. Interview with Dr Clare Gerada and Russell Brand (24:25-30:00)
3. RAPT interview with Russell Brand (40:45-45:00)

Group discussion – three questions explored over 40 minutes:1. What is active addiction and its effects?
2. What helps people change from active addiction to recovery?
3. What is recovery?

**Russell Brand: ‘Addiction to Recovery’:** [www.youtube.com/watch?ve=S5ZnFp8ilik](http://www.youtube.com/watch?ve=S5ZnFp8ilik) |

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| **Unit 2.2: My Recovery Journey** |
| **Introduction**Recovery is the process where people overcome drug addiction and find themselves recreating their lives. It is self-directed but supported also by others. Recovery involves recognition of the need to change. Recovery is based on continual growth and improved functioning along a continuum of health and wellness, resulting in a better quality of life. **Overview**This unit will demonstrate what people need to do to initiate, develop and sustain their recovery. Participants will be asked to map out their experiences in their journey from addiction to recovery. This journey will be illustrated by using a hard copy or digital format story board. Symbols, words, phrases and picture will be used to illustrate their recovery journey. Participants will then be asked to present this back to their peers in the group. PowerPoint introduction 5 minutes **(2.2A – My Recovery Journey)**Hard copy or digital format story board (25 minutes) **(2.2B – Storyboard)**1. Illustrate your recovery journey on the story board

Presentation to group and discussion (20 minutes)1. Share your story board recovery journey with your peers
2. Take feedback and share your hopes for the future
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| **Unit 2.3: Building my Recovery Capital** |
| **Introduction** Granfield and Cloud (1999) asked people who had overcome addiction without treatment to contact them. This was done through word of mouth and placing an advertisement in the New York Times. The resultant study with 46 people showed people did recover from active addiction. It found they got their lives back together due to the resources and supports they could call upon.Subsequently, Granfield and Cloud (2008) defined recovery capital as having four elements: social/ physical/human/cultural.Recovery capital is constructed by developing personal strengths and utilising assets that exist in local communities. Building social, physical, human and cultural capital creates new meaning and facilitates people on their recovery journey. Recovery capital is developed on a daily basis.**Content**Using a PowerPoint presentation, the story of Granfield and Cloud’s study: ‘Coming clean; overcoming addiction without treatment’ will be explored. This will explain how recovery occurred for 46 people. The theory of recovery capital will be discussed. The learning from this will be related to the individuals own recovery and plotted on a grid under the four element headings. It will be followed by feedback and an open group forum.1. PowerPoint presentation (20 minutes) **(2.3A – Coming Clean: Overcoming Addiction without Treatment)**
2. Individual recovery capital exercise (20 minutes) **(2.3B – Your Recovery Capital)**
3. Discussion and open group forum (20 minutes)
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| **Unit 2.4: SMART Goals using the Principles of Recovery** |
| **Introduction**There is an old adage: ‘Failing to plan is planning to fail’. People from an addiction background have a habit of reacting to situations rather than responding to events. Therefore, reflection and planning are key elements in the recovery journey. Keeping oneself organised is facilitated by setting SMART goals around your recovery issues and needs. Examples of this are setting medication targets when detoxing, getting 90 fellowship meetings in 90 days, getting a day programme, accommodation, etc. The starting point and timeframe are set by the service user and can be reset as necessary. SMART goals can be defined under the following headings:**S**pecific**M**easurable**A**ttainable**R**ealistic**T**ime RelatedGoals give you purpose and direction. The person becomes the agent of their own recovery making choices and decisions based on their recovery goals. In turn, the principles of recovery as developed by Sheedy and Whitter (2009) show the issues and opportunities that must be considered. Recovery is a highly personal and difficult journey particularly for those with little capital. However, it is occurring in increasing numbers and is now a reality for many thousands of addicts across the world. It also is the model in which services should be organised to maximise motivation and change.**Content**This unit will encourage participants to set obtainable goals**,** no matter where they are on the recovery journey. The group will be introduced to the principals of recovery and the importance of goal setting. A recovery wheel will illustrate the principals of recovery and allow setting attainable goals.1. PowerPoint presentation and discussion on SMART goals in recovery (using the Principles of Recovery) (20 minutes) **(2.4A – SMART Goals in Recovery)**
2. Worksheet exercise ‘MY Goals – My capital’ – Apply SMART goals worksheets (20 minutes) **(2.4B – My Goals – My Recovery Capital)**
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| **References**Granfield, R. and Cloud, W. (1999). Coming clean: Overcoming addiction without treatment. New York: New York University Press.Cloud, W. and Granfield, R. (2008). Conceptualising Recovery Capital: Expansion of a Theoretical Construct. *Substance Use and Misuse*, *43*, 1971-1986.Sheedy, C. K. and Whitter M. (2009). *Guiding Principles and Elements of Recovery-Oriented Systems of Care: What Do We Know From the Research? HHS Publication No. (SMA) 09-4439*. Rockville, MD: Center for Substance Abuse Treatment, Substance Abuse and Mental Health Services Administration. |

# MODULE 3 – OUTLINE

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| **Module Name**  | **Lead Partner** |
| Learning to Learn  | SDP, Romania |

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| **Module 3 – Units** |
| Unit 3.1: Recovery Centred Learning **CORE** |
| Unit 3.2: Challenges to Learners in Recovery **CORE** |
| Unit 3.3: Orientation for Access Education **CULTURAL** |
| Unit 3.4: Study Skills **CULTURAL** |

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| **Module Overview**This module looks innovatively at the learning process for individuals in self-defined recovery. It is focused on how adults learn, the context of learning, and the challenges in the adult learning experience. It will empower and prepare participants with the knowledge and skills to deal with both positive and negative learning experiences. It will also focus on participants own learning needs and present concepts and ideas for reflective learning.**Module Objectives**Upon completion of this module participants will be able to:* Understand how adults learn
* Understand the context of learning
* Identify adult learning challenges
* Deal with positive and negative learning experiences
* Have a realistic perspective on their own learning needs and how to address them

**Learning Elements*** Video
* PowerPoint
* Worksheets x 4
* Reflective Journal
* Group discussion
* Case study
* Field visit
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| **Unit 3.1: Recovery-Centred Learning** |
| **Introduction**To effectively change their lives, adults in recovery have to go through a learning process. Adult learning is linked to the degree and quality of individuals’ interactions and their social and cultural contexts. An experiential learning focus and content dealing with recovery issues can support the maintenance of recovery. This unit will explore types of learning that create change in the person. It will also show you how to record these changes.**Content**1. Thought Shower exercise and a review of the characteristics of learning while in recovery, whether it takes place in treatment centres, in individual counselling, group therapy, fellowships, spiritual, therapeutic, or religious groups, or family settings.
2. What is experiential (transformative, collaborative, participative) learning?
3. Review the Kolb model of experiential learning and the reflective learner.

**Activities**1. Thought Shower exercise and small group discussion. The facilitator will note on a flip chart the characteristics of **learning in recovery** that emerge from the group (20 minutes).
2. PowerPoint presentation **(3.1A – Experiential Learning)** (20 minutes)
3. Presentation on **Kolb’s Cycle of Experiential Learning (3.1B – Kolb Model and Worksheet)** and feedback. Participants will receive a worksheet with questions to ask themselves when moving from one learning phase to the next and a table to fill out to test the model on their last learning experience (either in recovery or in the education system) (20 minutes).
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| **Unit 3.2: Challenges to Learning for Learners in Recovery** |
| **Introduction**When adults in recovery decide to go back to education, they enter a new learning environment that can bring many challenges. This can trigger a flight or fight response. Although this may trigger the same response in mainstream students, the effect of engaging in education for someone in recovery can be much more challenging. There may be considerable stigma associated with both addiction and mental health. Feelings of inadequacy due to gender, race, class or sexuality may be evident. Boundaries are important as well as issues that may arise from disclosing one’s alcohol and drug-taking history to the wider student population. Adult learners in recovery need to set strong boundaries and have ‘staying safe’ techniques at hand.**Content**1. Review of the ‘flight or fight’ response to a stressful situation. Understanding fears and difficulties undertaking adult learning.
2. Dealing with problems, bad learning experiences, conflict and asserting oneself.

**Activities**1. Brief overview on responses to stress using a YouTube presentation: **The Stress Response – Flight or Fight** (4 minutes) or **Pressure in Life** (9.5 minutes). <https://www.youtube.com/watch?v=eCNUAdQIaYY>
2. **Discussion** (for example, fears, stigma, learning difficulties, recovery issues) (20 minutes).
3. Each participant will receive a **‘Challenges to Learning’** worksheet **(3.2A)**. The assignment is to find constructive ways of thinking and acting to overcome the challenges. This will require skills already used in recovery, such as facing conflicts, problem-solving, rethinking a situation in positive terms, assertive communication, and so on (30 minutes).
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| **Unit 3.3: Orientating for Access Education** |
| **Introduction**Adults in recovery who plan to go to back to learning need to prepare well. They should be fully informed and clear as to what is involved and be working to an individual educational plan (IEP). Remember: ‘failure to plan is planning to fail’. This is in contrast to the built-in tendency of people in addiction to be impulsive and have a low tolerance to frustration. A big part of accessing adult learning is orientation, making sure you know about the course, the learning environment, opportunities to continue learning, formal education and other relevant issues. This is especially important for adult learners as they may be many years out of the formal education system and the system and regulations may have changed. Also people can discover new skills and talents as they are evaluated in the process of vocational education.**Content**1. Participants will undertake a vocational test to identify what professional field will be more suited to their personal characteristics and type of personality.
2. Participants will have the opportunity to talk about their experiences and reflect on these in order to plan a course of action and enhance their self-awareness and vocational decision-making abilities.

**Activities**:1. Complete a **Vocational Test** (20 minutes) to identify what employment may best suit participants. **Links for Vocational Tests** are provided for the UK, Cyprus, Italy, Ireland and Romania (**3.3A)**. A full test is also provided for Romania **(3.3B – Vocational Evaluation Test-Romania)**.
2. Following on from the test, scores will be interpreted and participants will be invited to share their scores with the group. (20 minutes)
3. Participants will receive a practical ‘**Do’s and Don’ts**’ handout for Getting Back into Learning **(3.3C)**, and as a group, they will process the items that are relevant to them. (15 minutes)
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| **Unit 3.4: Learning Using Study Skills** |
| **Introduction**Learning requires the fulfilment of certain factors such as opportunities for learning (formal, informal, vocational education) and study skills. Study skills and study strategies can make learning simpler, more fun and more effective. They are generally critical to success in education. Study skills help people to:* Organise and take in new information
* Retain information
* Deal with assessing new information

Normally, study skills are acquired by repeating learning experiences and being exposed to group learning activities. Since adults in recovery have generally had other priorities in their life than education, they may not have had an opportunity to exercise these skills. This means they need specific training on how to study effectively and maximize their results. This will also help to raise their self-esteem.**Content**1. Facilitate a group session producing a mind map to identify how to study effectively. The session should cover study place, study techniques, study materials, grammar and language, exam issues, essays and referencing, presentations, and use of resources including student support and libraries.
2. Participants will make an inventory of their personal study skills to see which skills they need to develop.
3. Participants will go through a practical exercise and develop a mind map for a topic that they want to study in their life.
4. Participants will identify vocational resources either in one of the areas identified in the Vocational Test carried out in the previous unit, or in another vocational area they are interested in.

**Activities**1. Participants will watch a PowerPoint presentation on **Study Skills (3.4A)** (20 minutes)
2. Participants will receive a **Study Skills Worksheet** **(3.4B)** on identifying their own study skill needs. They will work on this for 5 minutes then present it to the group (15 minutes).
3. **Mind Map** **Worksheet (3.4C)** for participants to study a topic of interest (e.g. vocational education, football, gardening) (10 minutes). Completed worksheets will then be presented and discussed within the group (20 minutes). Participants will also receive a handout on **Resources for Vocational Training** in their community **(3.4D)**.
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# MODULE 4 – OUTLINE

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| **Module Name**  | **Lead Partner** |
| Recovery and Community  | Staffordshire University, UK |

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| **Module 4 – Units** |
| Unit 4.1: What is a Recovery Community? **CORE** |
| Unit 4.2: Functions of Recovery Communities **CORE** |
| Unit 4.3: What is a Recovery Coach? **CULTURAL** |
| Unit 4.4: Next Steps – Personal Action **CULTURAL** |

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| **Module Overview**Effective recovery communities have access to housing, work, education, mutual aid and peer support. The UK’s National Treatment Agency (NTA) acknowledges that recovery is a personalised journey and goes on to say that “recovery is not just about tackling dependence but about enabling people to successfully reintegrate into their communities. Recovery support needs to be done in a holistic way: developing personal relationships, housing, access to education/ training/employment, effective aftercare, and peer support are essential to deliver a recovery community” (NTA, 2002). The Recovery and Community module introduces ideas about how to integrate into drug-free communities and about the benefits of mutual support and recovery coaches. These social mechanisms represent opportunities to strengthen and sustain recovery through social networks. The module is designed to facilitate discussion and to develop thinking about how each individual may move forward with their recovery. **Module Objectives**Upon completion of this module participants should be able to:* Provide definitions of ‘Recovery Communities’
* Demonstrate understanding of ways to become involved in Recovery Communities
* Discuss the role and boundaries of a Recovery Coach
* Develop a personal action plan around community involvement

**Learning Elements*** PowerPoint presentation
* Group Activities
* Building Recovery Communities in the UK
* Recovery Communities across Europe
* Personal Action Plan
* Professional Boundaries Worksheet
* Experiential Knowledge and Experiential Expertise
* Daily Inventory of ‘My Recovery’ Worksheet
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| **Unit 4.1: What is a Recovery Community?** |
| **Introduction** The benefits of becoming involved in a community that celebrates addiction recovery and recognises the contagious nature of recovery has been identified as a vital aspect of sustaining personal recovery. We will start by defining our understanding of what community is, then go on to explore some key ideas about how recovery communities have developed, and introduce the idea of a ‘Community of Practice’. **Content**Using a PowerPoint presentation, the NTA consultation on Recovery Communities and the work of Best, Laudet and White, we will discuss as a group our understanding of what a community is and what it means to be involved in a Recovery Community, and how people may be members of different communities through shared experiences. * PowerPoint presentation **(Module Introduction PowerPoint covering: 4.1A – Module Introduction, 4.1B – What is a recovery Community? and 4.1C – Building Recovery Communities UK-NTA)** (30 minutes)
* Discussion (30 minutes). The handout **(4.1D – Recovery Communities across Europe)** considers partner country approaches to Recovery Communities and can be used to supplement discussion around people’s experiences of recovery and community. This may be helpful to engage participants in discussion around their own experiences.
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| **Unit 4.2: Functions of Recovery Communities** |
| **Introduction** Participants will consider different ways they are and can become involved in a Recovery Community. Using the Professional Boundaries Worksheet participants will explore different roles they have in their lives and communities before discussing how they can maintain personal boundaries and stay safe. **Content** The trainer will facilitate discussion and help people to identify the roles they have through group work. The key issue to explore here is the difference between experiential knowledge and experiential expertise. This is the way we can use our experience to inform our work, thus supporting others whilst developing expertise as a coach. While recognising that what works for us may not work for others, we can provide examples from our experiences to provide hope and inspiration to maintain change and sobriety.Participants will consider their own personal boundaries and strategies for self-care before sharing with the group and addressing areas of difficulty. It may be useful to work on different roles; friend versus coach, sponsor versus coach, for example.* PowerPoint presentation **(Module Introduction PowerPoint slides, 4.2A – Functions of a Recovery Community)** (20 minutes)
* Group discussion (20 minutes)
* **Professional Boundaries Worksheet** **(4.2B)** (20 minutes)
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| **Unit 4.3: What is a Recovery Coach?** |
| **Introduction**Participants will be introduced to recovery coaching as a function in the community, the idea of recovery as contagious and how this may be helpful. The role a Recovery Coach may have in supporting change, and providing ideas about how to manage and acknowledge difficulties, are important issues to be discussed in this unit.**Content*** Presentation **(Module Introduction PowerPoint slides, 4.3A – Experiential Knowledge and Experiential Expertise, 4.3B – The Recovery Coach Role).** This session considers the role of the Recovery Coach and the need for people in recovery to develop expertise in sharing their experiences. The concepts of experiential knowledge and experiential expertise are explored to develop thinking around the idea that what works for one person in addiction recovery may not work for a different person. This is termed experiential knowledge. Experiential expertise refers to the skills people can develop to transfer their knowledge of addiction recovery into the role of helping others. (20 minutes)
* Group discussion (40 minutes). Based around individual experiences and how this information can be shared with others without imposing ideas or strategies that work for one individual onto a different person, who has different experiences and potentially different motivations to maintain recovery.
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| **Unit 4.4: Next Steps – Personal Action** |
| **Introduction**Participants will explore their own learning and prepare an action plan to take forward.**Content*** **Daily Inventory of ‘My Recovery’ Worksheet** **(4.4A)** (20 minutes)

 Working individually or in smaller groups, participants should first complete this worksheet before discussing this with their own group or the whole group. This is designed to prompt participants into exploring the range of strategies that may work for different members of the group.* Group discussion on ‘Key Learning For Me’ (40 minutes)

Participants are invited to contribute to a short group discussion about what they will take forward from the unit in terms of their own learning. This can begin with the question ‘What is the key learning for me?’ in discussing recovery communities and recovery coaching. Participants will be encouraged to produce a short list of 2 – 6 actions to help them to develop their understanding of the topic, to engage more broadly with their communities, or to learn more about recovery coaching. * Final Thoughts group discussion **(Module Introduction PowerPoint slides, 4.4B – Group Tasks: Final Thoughts)**

If times allows, participants can present their plans for taking their learning forward or offer their thoughts about their learning over the course of the module.  |

# MODULE 5 – OUTLINE

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| **Module Name**  | **Lead Partner** |
| Recovery and Employability  | SANSAT, Italy |

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| **Module 5 – Units** |
| Unit 5.1: People in recovery and employability skills – finding a job **CORE** |
| Unit 5.2: Understanding the social enterprise **CORE** |
| Unit 5.3: Applying the social enterprise model to recovery **CULTURAL** |
| Unit 5.4: Designing a recovery social enterprise **CULTURAL** |

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| **Module Overview**This module aims to give people in self-defined recovery a clear insight into their employment potential and how to go about preparing for work. Using the social enterprise model participants can explore supports, rights and responsibilities that will equip them for work while contributing to their recovery capital and vocational development. **Module Objectives**Upon completion of this module, participants should be able to:* Discuss employability skills
* Access and use the employment services
* Explore career guidance options
* Be aware of their competencies and limits
* Be aware of their rights and responsibilities
* Decide if working in a social enterprise is a realistic path for them
* Develop a personal project to deepen their knowledge and skills, plan a process of learning, and undertake a work placement
* Understand at a deeper level what is involved in social enterprise
* Understand if they have the right motivation to work in a social enterprise
* Consider whether they have sufficient motivation to work in a social enterprise
* Consider a range of social enterprise options
* Design a recovery social enterprise

**Learning Elements*** PowerPoint presentations
* Video: Interview featuring representatives of social enterprises
* Group discussion
* Group exercises, Thought Shower, role play
* Project work
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| **Unit 5.1: People in Recovery and Employability Skills** |
| **Introduction** Employment is an important step on the recovery path but it can present several difficulties for people in recovery due to internal barriers (e.g. low self-esteem and knowing how to explain any breaks in studies and career) and external barriers (e.g. stigma). Moreover, people in recovery often come to vocational guidance services/employment services with unrealistic expectations: to find a job immediately, to get a job without having the required skills, to get a high-level position quickly or to earn a high salary. Awareness of the reality of the employment market is vital.**Content*** Job research for people in recovery: sharing personal experience
* Searching for a job using the employment services
* Building a CV
* How to write a cover letter
* Job interview: how to plan, present and review the interview
* How to reply to a job advertisement and upload applications onto a job website

**Overview** * PowerPoint presentation about employability **(5.1A – Finding a Job)** (10 minutes)
* PowerPoint presentation on how to build an effective CV and write a covering letter **(5.1B – Build Your CV)** (20 minutes)
* PowerPoint presentation **(5.1C – Replying to a Job Advertisement)** (10 minutes)
* PowerPoint presentation and video on preparing for a job interview **(5.1D – Preparing for a Job Interview)** (20 minutes). The video on how to deal with a job interview can be found at: <https://www.youtube.com/watch?v=GmzYrjAsDng>
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| **Unit 5.2: Understanding the Social Enterprise** |
| **Introduction** Many people in recovery say they want to start their own business because of the difficulty they experience in finding a job. However, setting up and running a business requires people to be highly motivated and able to work both on their own and as part of a team. It is important that participants understand that starting a business is not the same thing as working in the black economy (doing odd jobs such as repairs, often outside the law). Guidance can be useful to understand this issue. A social enterprise is a business which has social or environmental objectives as well as commercial ones. The profits from a social enterprise are reinvested in the business or community rather than being distributed to shareholders and/or owners. Working in a social enterprise can offer advantages due to the greater sensitivity and the aims of solidarity, but it requires the same commitment as working in any other enterprise. **Content*** General information about entrepreneurship and the different forms of enterprise (profit and non-profit).
* Working in a social enterprise: rights and duties, risks and benefits.

**Overview** * PowerPoint presentations about enterprise and social enterprises, the issues related to the work organisation in a social enterprise, and the rules and the rights of the workers.

**(5.2A – Understanding Enterprise and Social Enterprise)** (20 minutes)**(5.2B – Working in a Social Enterprise)** (10 minutes) * PowerPoint presentation **(5.2C – Networks)**. Using the matrices presented with 5.2A, participants will undertake a mind mapping exercise to help them to visualise the resources that they have within formal/informal networks. (30 minutes)
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| **Unit 5.3: Applying the Social Enterprise Model to Recovery** |
| **Introduction** Social enterprise can be a great way for people in recovery to re-enter the workforce. It enables personal growth and empowerment but also offers a way to build a ‘community’ and solidarity awareness. Working in a social enterprise enables people to develop their professional skills, personal skills, organisational skills and social skills.**Content*** The meaning of social enterprise: job opportunity and a source of personal improvement.
* Working in a social enterprise: requirements and ‘soft’ skills.

**Overview** * The trainer will summarise content of the previous unit and encourage discussion about social enterprise as a resource for people in recovery (10 minutes)
* PowerPoint **(5.3A – Applying the Social Enterprise Model to Recovery)** (15 minutes)
* Group discussion: participants will assess their availability to engage in a social enterprise (as an employee or as a volunteer), evaluate their skills (both personal and professional) and identify their own strengths and weaknesses. (30 minutes)
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| **Unit 5.4: Design a Recovery Social Enterprise – Agriculture, Café, Shop or Business** |
| **Introduction** Participants will be introduced to different types of social enterprises such as agriculture (social farms), cafés, shops and businesses. Organising a visit to a social enterprise or inviting a representative to speak to the group can be a very useful way of learning more about the reality within different sectors. For example, people in recovery do not want to work in the agriculture sector because they think it is hard work and they usually do not know how it is organised. However, in reality, social farms offer employment to many disadvantaged people. Participants will design a project (or a business plan) for a social enterprise in one of these sectors based on the information acquired in the previous units.**Contents*** In-depth analysis of various social enterprise sectors
* How to develop an idea and convert it into a concrete project
* How to create a project plan

**Overview** * Group discussion on the opportunities within different social enterprise sectors (15 minutes)
* The trainer will explain how to plan a social enterprise/an enterprise. Using **5.4A – Business Plan Example**,theywill outline how to construct a Project and develop a Business Plan. (25 minutes)
* Group discussion for feedback (20 minutes)
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# GLOSSARY

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| **Abstinence** | Not using any addictive psychoactive substance. |
| **Addiction** | A dependency characterised by the continued use of one or more psychoactive substances causing physical, psychological or social harm. |
| **Amortization** | The process of paying off a loan through specifically structured periodic payments. Amortized payments are calculated by dividing the principal — the balance of the amount loaned after down payment — by the number of months allotted for repayment. |
| **Behavioural therapy** | A psychological treatment in which you and your family and/or partner meet with a therapist. |
| **Business plan** | A plan outlining how a business will be set up and run together with details of the viability of the business. The essential ingredients of a business plan include an executive summary (typically written last); description of the company, the management team, and the products or services being offered; an analysis of the market, the competition and the industry; a marketing plan; an operations plan; a financial plan (with cash flow projections); and a **risk analysis** (the most important part of the plan). The most effective business plans contain no more than 20 – 30 pages of narrative plus financial information. |
| **Cognitive behavioural therapy (CBT)** | A psychological treatment in which you work with a therapist to look at how your problems, thoughts, feelings and behaviour fit together. CBT can help you challenge negative thoughts and change behaviours that cause problems. |
| **Collaborative** | Working together to complete a task.  |
| **Collaborative learning** | A group of people working together to learn a new task. |
| **Core module** | You must complete this module. |
| **Course Pack** | The outline, contents and extra information for the course. |
| **Cultural specific module** | A section of the programme that is specific to a particular country. |
| **Dependence** | Defined in two ways: 1. Physical dependence – this is where your body adapts to a substance and you experience withdrawal symptoms if you stop using it, which may be relieved by re-using the substance.
2. Psychological dependence – this is where you feel you need a specific substance, either for its positive effects or to avoid negative effects associated with its abstinence.
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| **Detoxification** | A process of removing yourself from a specific psychoactive substance using a safe and effective method. |
| **Dissemination** | Spreading information widely.  |
| **Empowerment** | Helping you to understand and act on your rights and responsibilities. |
| **Entrepreneurship** | The process of designing, launching and running a new business. This typically begins as a small business, such as a start-up company offering a produce, process or service for sale or hire. |
| **Experiential** | Based on [experience](http://dictionary.reference.com/browse/experience). |
| **Equality**  | Fairness – recognising that everyone is entitled to the same rights, no matter what their age, sex, race, religion or background. |
| **Exploration** | Examining or investigating something. |
| **Facilitator**  | People who help groups to work together effectively |
| **Fellowships**  | Support groups for people recovering from addiction, for example Narcotics Anonymous (NA), Alcoholics Anonymous (AA), Gamblers Anonymous (GA). |
| **Family intervention** | A form of intervention involving your family which is designed to benefit both you and your family members. |
| **Grundtvig** | The European Union’s Lifelong Learning Programme. |
| **Guidelines** | A guide on how to deliver the course content. |
| **Holistic**  | Looking at the whole rather than the parts (for example, looking at health, family, housing, education, work, not just looking at addiction). |
| **Induction** | Introduction or initiation of a topic, subject, module or programme. |
| **Learner** | A student, pupil or trainee.  |
| **Literacy** | Being able to read and write. |
| **Mandatory** | Compulsory, something that must be done. |
| **Marketing and Marketing Plan** | Marketing is not a business function – it is the business, and it begins with decisions about what products and services to offer and what target markets to pursue. Development of a marketing plan begins with the answers to five questions: * What must happen for the organisation to be successful?
* Who must be involved?
* What must they do?
* What must they *believe* before they will do it?
* What do they believe *now*?

The goal of marketing, therefore, is to win a share of the client/customer or stakeholder mind, and the people being targeted must be led through four stages:* *Awareness* (getting their attention)
* *Understanding* (making sure they comprehend what the organization is saying)
* *Credibility* (do they *believe* what the organisation is saying?)
* *Persuasion* (in the light of equally credible claims from others, will they do what the organisation needs it to do?)
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| **Material** | Ideas, facts or data that form part of a programme. |
| **Methadone** | A synthetic opiate prescribed for heroin addiction. |
| **Module** | A section or part of a programme, for example a mathematics module. |
| **Multidisciplinary** | Involving a range of experts with different backgrounds/knowledge that comes together to make a team. |
| **Negative thinking** | Always complaining and looking for someone or something to blame for your problems. |
| **Not-for-profit** | An organisation which is operated as nearly as possible at cost, on a cost-recovery basis; an organisation not seeking profit.A not-for-profit organisation is formed for the common good of the public. Not-for-profit organisations are usually formed for some specific religious, charitable or educational purpose.  |
| **Outreach** | Providing services to people who might not be able to access services themselves. |
| **Personal development** | Discovering and developing your potential. |
| **Person-centred** | Based on your needs, not just a ‘one-size-fits-all’. |
| **Pilot** | A test or first run to identify any gaps in the course material. |
| **Poor self-image** | Having a negative view of yourself and your abilities; believing you’re worthless. |
| **Prescribed medication** | Medicine that a doctor has prescribed for you. |
| **Prevention** | Social, economic, legal, medical or psychological measures aimed at reducing your use of addictive substances, lowering your risk of dependence and reducing other negative consequences of substance use. |
| **Problem-solving** | Examining problems and developing solutions. |
| **Process** | A series of planned developments resulting in change for someone. |
| **Psychosocial interventions** | A holistic approach to help you stop using drugs and/or remain abstinent. It includes psychological treatments and other techniques (such as self-help, therapies involving families and carers, incentives programmes and education about drug problems). |
| **Recovery education** | Exploring the obstacles to recovery and learning how to overcome them. |
| **Recovery**  | The process by which you move from problem drug use to a drug-free life and become a contributing member of society. |
| **Referral** | Connecting you with another service. |
| **Rehabilitation** | Interventions helping you to return to a normal life. |
| **Relapse** | Using drugs consistently again after getting clean. A lapse is a one-off use. |
| **Sample** | A small part of something, intended to show quality, style or nature of the whole. |
| **Self-efficacy** | Belief in your ability to complete tasks and reach goals. |
| **Self-esteem**  | How a person feels about them self. |
| **Self-help** | Providing for or helping yourself without relying on others |
| **Session or group** | Working with others on a particular topic, for example, relapse prevention or personal development. |
| **Social enterprise** | Social enterprises are businesses trading for social and environmental purposes. Many commercial businesses would consider themselves to have social objectives, but social enterprises are distinctive because their social and/or environmental purpose is absolutely central to what they do – their profits are reinvested to sustain and further their mission for positive change. |
| **Social entrepreneurship** | Building a business around solving a social problem. Though social entrepreneurs seek to generate a profit, providing social value is equally important. |
| **Social inclusion** | Proving certain rights to people and groups in society, such as employment, adequate housing, health care, education and training. |
| **Support network** | People you can call on for help during your recovery. |
| **Trainers**  | People who give training to groups. |
| **Transformational** | The act or process of transforming (changing). |
| **Treatment** | Addiction treatment, usually in a residential centre. |
| **Unit** | Any group of things or people regarded as an entity. |
| **Withdrawal syndrome** | Symptoms following the stopping or rapid decrease in dosage of a psychoactive substance. |

# BIBLIOGRAPHY

NTA (National Treatment Agency; 2002). *Building recovery in communities: A summary of the responses to the consultation*. NHS National Treatment Agency for Substance Abuse. Available at: <http://www.nta.nhs.uk/uploads/bricresponsefinal17052012.pdf>

More information on the theoretical basis of these units can be found in the resources and links below:

**Relational Model**

Faris, A. and Van Ooijen, E. (2012). *Integrative Counselling and Psychotherapy: A Relational Approach*. London: SAGE Publications.

<http://www.goodtherapy.org/relational-psychotherapy.html>

<https://www.leedsbeckett.ac.uk/hss/docs/Relational_Approach_Article.pdf>

**Relapse Prevention Models**

<http://dbhdid.ky.gov/dbh/documents/ksaods/2014/grinstead2.pdf>

<http://liferecovery.weebly.com/uploads/1/5/6/6/1566324/relapsepreventionworkbook.pdf>

<http://pubs.niaaa.nih.gov/publications/arh23-2/151-160.pdf>

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