#### Welcome!

#### While we wait to start, please review ways to navigate this webinar.

If you move your **cursor** to the **bottom** of **your screen** you will see a **menu**.



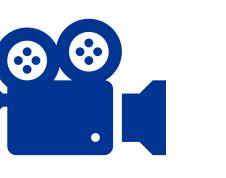
This menu allows you to **control**:

- •Raise Hand
- •Access to the Chat box
- •Access to the **Q & A** box

Camera options are not available for participants. Participants can be unmuted by raising their hand and being recognized by the presenter.



#### Housekeeping









This session is being recorded to **Tomorrow's** Healthcare If you used a forwarded link, we need your email address Pose questions in the chat to all participants Please complete the post-session evaluation





#### **Mutual Agreement**

- Everyone on every PERU webinar is valued. Everyone has an expectation of mutual, positive regard for everyone else that respects the diversity of everyone on the webinar.
- We operate from a **strength-based**, **empathetic**, **and supportive** framework with the people we serve, and with each other on PERU webinars.
- We encourage the use of **affirming language** that is not discriminatory or stigmatizing.
- We treat others as **they** would like to be treated and, therefore, avoid argumentative, disruptive, and/or aggressive language.



#### Mutual Agreement (continued)

- We strive to: **listen** to each person, avoid interrupting others, and seek to **understand** each other through the Learning Network as we work toward the highest quality services for Centers of Excellence (COE) clients.
- Information presented in Learning Network sessions has been vetted. We recognize that people have different opinions, and those **diverse perspectives** are welcomed and valued. Questions and comments should be framed as **constructive feedback**.
- The Learning Network format is **not conducive to debate**. If something happens that concerns you, please send a chat during the session to the panelists and we will attempt to make room to address it either during the session or by scheduling time outside of the session to process and understand it. Alternatively, you can reach out offline to your PERU point of contact.



#### **Acknowledgements**

- The COE project is a partnership of the University of Pittsburgh's Program Evaluation and Research Unit and the Pennsylvania Department of Human Services; and is funded by the Pennsylvania Department of Human Services, grant number 601747.
- COE vision: The Centers of Excellence will ensure care coordination, increase access to medication-assisted treatment and integrate physical and behavioral health for individuals with opioid use disorder.





## PERU

**Program Evaluation and Research Unit** 

# Using the BARC-10 as a Tool for Client Engagement



#### **Learning Objectives**

#### By the end of this module, you will be able to do the following:

- Define the concept of recovery capital and discuss its significance in substance use disorder (SUD) treatment and recovery.
- List the components of the Brief Assessment of Recovery Capital (BARC-10).
- Describe how to interpret BARC-10 scores and discuss what they indicate about a client's recovery resources.
- Discuss using the BARC 10 as a tool to engage clients



University of

School of Pharmacy PE

#### **Recovery Capital**



#### **Recovery Capital Defined**

".... the breadth and depth of internal and external resources that can be drawn upon to initiate and sustain recovery."







#### **Key Components of Recovery Capital**

Social	Physical	Human	Cultural
The sum of resources each person has because of their relationships, and includes both support and obligations	Tangible assets, such as property and money	The skills, positive health, aspirations and hopes, and personal resources that will enable the individual to succeed	The values, beliefs, and attitudes that link individuals to the community



۲

10

#### **Recovery Capital/Problem Severity Matrix**

#### High Recovery Capital

High Problem Severity/Complexity

Low Problem Severity/Complexity

Low Recovery Capital



#### **Benefits of Addressing Recovery Capital**

Improves Long-term Recovery Rates

Tailored Treatment Plans

**Environmental Impact** 

**Coping and Resilience** 

Trigger for Positive Life Changes

**Enhanced Quality of Life** 

**Goal Completion** 





### **Brief Assessment of Recovery Capital (BARC-10) Overview**



#### **Development of the BARC-10**

- Assessment of Recovery Capital (ARC)
  - 10 primary domains
  - 50 questions
  - Lengthy
- BARC-10
  - Covers primary domains
  - 2 to 5 minutes



#### **BARC-10 Domains**

Substance use and sobriety	There are more important things to me in life than using substances
Global psychological health	In general I am happy with my life
Global physical health	I have enough energy to complete the tasks I set for myself
Citizenship and community involvement	I am proud of the community I live in and feel a part of it
Social support	I get lots of support from friends
Meaningful activities	I regard my life as challenging and fulfilling without the need for using drugs or alcohol
Housing and safety	My living space has helped to drive my recovery journey
Risk-taking	I take full responsibility for my actions
Coping and life functioning	I am happy dealing with a range of professional people
Recovery experience	I am making good progress on my recovery journey





### **Using the BARC 10**



#### **BARC-10** as a Tool for Engagement

- Discussing the 10 different areas measured by BARC-10 could help broaden a client's understanding of their own recovery process.
- Questions are answered on a scale from "Strongly Agree" to "Strongly Disagree," allowing for nuanced self-assessment.
- Answers in the "Agree" range indicate strengths, while "Disagree" responses highlight potential barriers to recovery

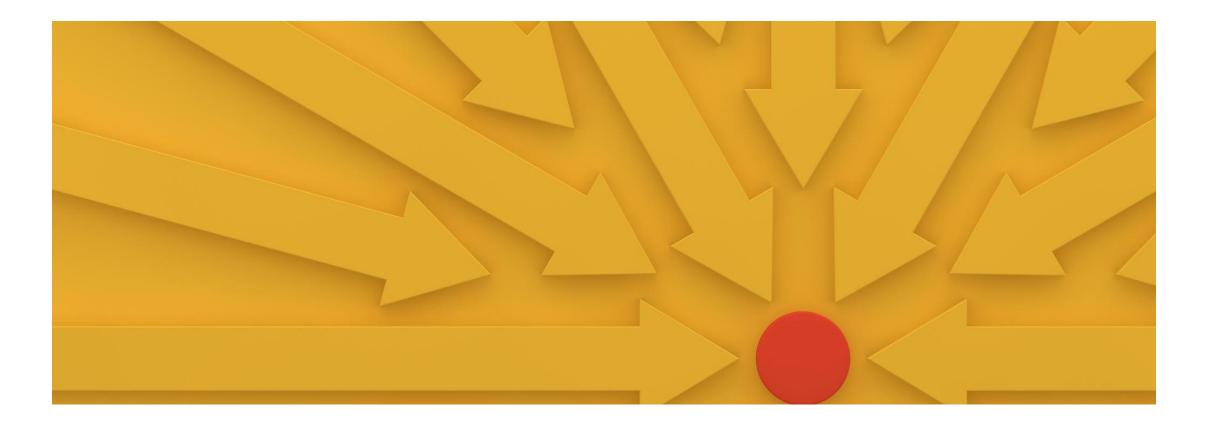


#### **MI Readiness Ruler**



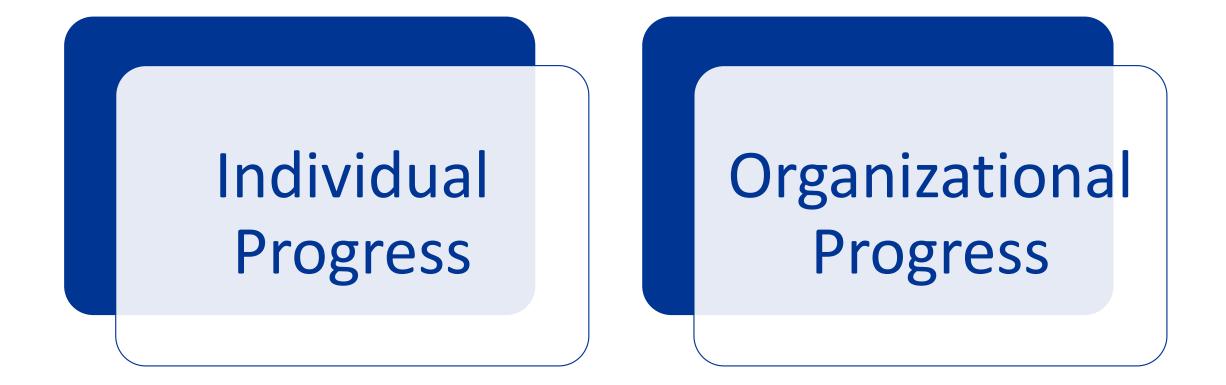


#### **BARC-10** as a Tool for Recovery Planning





#### **BARC-10** as a Tool for Measuring Progress





#### **Delivering Surveys**

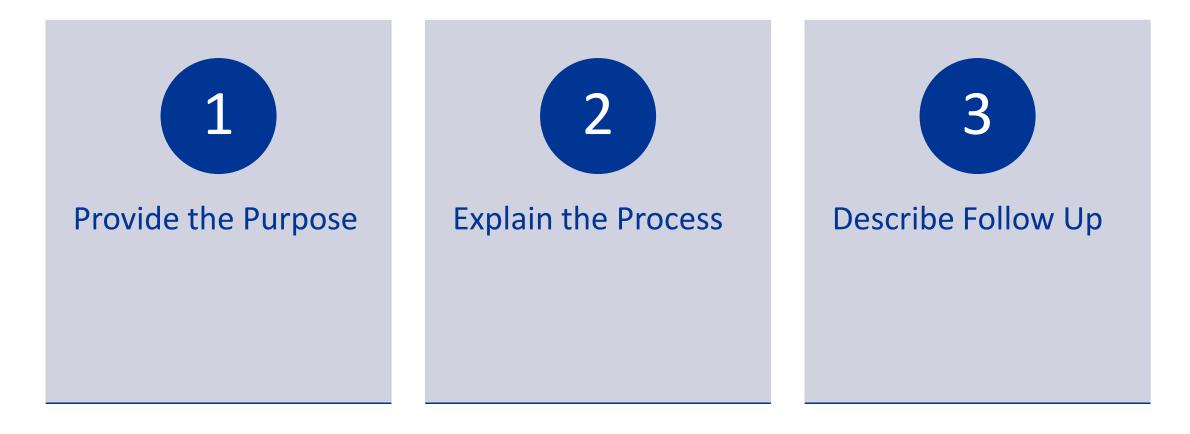


#### **Consider Literacy and Health Literacy**

- Individuals with OUD are more likely to have low literacy and health literacy compared to the general population.
- Low health literacy can make accessing and navigating healthcare systems more challenging.
- Research emphasizes the need to assess health literacy in healthcare settings for targeted support



#### **Other Survey Delivery Tips**





#### **Interpreting BARC-10 Scores**



#### **BARC-10 Exercise**

- Example BARC-10
- Follow up questions
- Possible service connections
- Recovery related goals





#### **Questions?**







#### References

- Ashford, R. D., Brown, A., Canode, B., Sledd, A., Potter, J. S., & Bergman, B. G. (2021). Peer-based recovery support services delivered at recovery community organizations: Predictors of improvements in individual recovery capital. Addictive Behaviors, 119, 106945.
- Best, D., & Laudet, A. (2010). The potential of recovery capital. London: RSA.
- Bowen, E. A., Scott, C. F., Irish, A., & Nochajski, T. H. (2020). Psychometric properties of the Assessment of Recovery Capital (ARC) instrument in a diverse low-income sample. Substance Use & Misuse, 55(1), 108-118.
- Hennessy, E. A. (2017). Recovery capital: A systematic review of the literature. Addiction Research & Theory, 25(5), 349-360.
- Sánchez, J., Sahker, E., & Arndt, S. (2020). The Assessment of Recovery Capital (ARC) predicts substance abuse treatment completion. Addictive behaviors, 102, 106189.
- Vilsaint, C. L., Kelly, J. F., Bergman, B. G., Groshkova, T., Best, D., & White, W. (2017). Development and validation of a Brief Assessment of Recovery Capital (BARC-10) for alcohol and drug use disorder. Drug and Alcohol Dependence, 177, 71-76.
- White, W., & Cloud, W. (2008). Recovery capital: A primer for addictions professionals. Counselor, 9(5), 22-27

