

# CareCertify LLC

## Behavioral Health Series

### BHS-009

## Substance Use Recovery & Harm Reduction

### Participant Guide

Group: Group 2: Clinical Knowledge | Credit Hours: 1.5

For Home Health Aides, CNAs, PCAs, DSPs & Direct Care Staff

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## Learning Objectives

Upon completing this course, you will be able to:

- Define recovery and harm reduction frameworks in substance use care
- Identify the stages of change and how to support each stage
- Apply harm reduction strategies in daily caregiving interactions
- Recognize signs of relapse and respond without stigma or judgment
- Support individuals in building recovery capital and community connections

## Section 1: What Is Recovery?

Recovery from substance use disorder is not a single event — it is a long-term process of change. SAMHSA defines recovery as a process through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

### Four Dimensions of Recovery (SAMHSA)

Health: overcoming or managing the disease

Home: a stable, safe place to live

Purpose: meaningful daily activities and independence

Community: relationships and social networks that provide support

## Section 2: Harm Reduction: A Practical Approach

Harm reduction is a set of practical strategies that reduce the negative consequences of drug use without requiring abstinence. It meets people where they are and prioritizes their safety and dignity.

- Non-judgmental, person-centered approach
- Focuses on reducing risks — overdose, infection, injury
- Recognizes that some people are not ready to stop using
- Builds trust that supports long-term change
- Saves lives immediately while supporting recovery goals over time

### Section 3: Stages of Change Model

The Transtheoretical Model identifies five stages that people cycle through during behavior change. Understanding these stages helps caregivers meet individuals where they are rather than pushing them forward before they are ready.

#### Five Stages of Change

1. Precontemplation — not yet considering change
2. Contemplation — thinking about change
3. Preparation — planning to change
4. Action — actively changing behavior
5. Maintenance — sustaining the change

Relapse is normal and does not mean failure — it is part of the process for many people.

### Section 4: Supporting Recovery in Daily Care

As a home care worker, your daily interactions powerfully shape how clients feel about themselves and their recovery. Your attitude, language, and responses matter enormously.

✓ DO	X DON'T
Use person-first language: "person with a substance use disorder"	Use terms like "addict," "junkie," or "drunk"
Celebrate small wins and progress	Lecture or moralize about their choices
Maintain consistent routines that support stability	Threaten or give ultimatums
Ask open-ended questions about their goals	Ignore or minimize their efforts
Connect clients to peer support and community resources	Share their recovery status with others

### Section 5: Recognizing and Responding to Relapse

Relapse is a common part of recovery, not a moral failure. Recognizing early warning signs allows you to respond supportively rather than reactively.

#### Early Warning Signs of Relapse

- Withdrawing from supports and routines
- Increased stress, irritability, or anxiety
- Romanticizing past use
- Missing appointments or stopping medications
- Reconnecting with people associated with past use

If you notice these signs, express concern calmly and notify your supervisor.

 **SCENARIO**

Your client, who has been in recovery for 8 months, seems withdrawn and mentions thinking about the old days. His mood has been low all week.

Response: Acknowledge his feelings without alarm: "It sounds like things have been heavy lately. Would you like to talk about it?" Notify your supervisor about the observed changes. Do not confront, shame, or make ultimatums.

### Section 6: Building Recovery Capital

Recovery capital refers to the internal and external resources that help a person sustain recovery. Home care workers can help build recovery capital by reinforcing positive relationships, supporting meaningful activities, and connecting clients to community resources.

- Internal capital: self-esteem, coping skills, hope, motivation
- Social capital: family support, peer recovery groups, mentors
- Community capital: housing, employment, treatment access
- Cultural capital: spiritual practices, cultural identity, values

### Quick Reference Summary

<b>SAMHSA Recovery Helpline</b>	1-800-662-4357
<b>Harm Reduction Coalition</b>	<a href="http://www.harmreduction.org">www.harmreduction.org</a>
<b>SMART Recovery</b>	<a href="http://www.smartrecovery.org">www.smartrecovery.org</a>
<b>Naloxone Access</b>	Ask your supervisor for local resources
<b>Stages of Change</b>	Precontemplation > Contemplation > Preparation > Action > Maintenance