Recovery Oriented Leadership

a beginning dialogue...

Using the principles of Recovery to create hope, commitment, and action in your organization.

Community Activators and MHA Village
with sponsorship from Stanislaus County Behavioral Health and Recovery Services
Many organizations are using the powerful principles and practices of Recovery to assist others in healing and improving their lives. What if we have missed what is right in front of us—what if Recovery is for us, too? What would happen if a leader worked to intentionally create a culture of Recovery in their organization?

In 2004, five respected mental health leaders in California, known for their commitment to Recovery and leadership excellence, met to talk candidly about this idea. This booklet captures their dialogue and introduces the principles of Recovery-Oriented Leadership.

We encourage you to use this booklet to begin or continue the conversation about how to use the principles and practices of Recovery as a tool for creating hope, commitment, and action in your organization.
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What is Recovery-Oriented Leadership?

ROL is a leadership and organizational development tool whose benefit comes from exploring how the principles and processes of Recovery can be used by an organization to improve its own health and the quality of services it provides. ROL is inclusive of generally-accepted best practices for leadership, and offers a unique and expanded capacity to leaders by emphasizing four primary Recovery Principles as a basis for dialogue, planning, and action to increase organizational excellence.

ROL is built on a foundation of respect for individuals in recovery, acknowledging we have much to learn from the citizens being served by our organizations. It is in the discovery of our shared struggles and accomplishments that organizations can build a unified approach to helping that taps both the experience and wisdom of people with psychiatric disabilities and the employees of helping organizations.

ROL can be used in at least three primary ways: as a tool for leaders and employees to discover and/or reaffirm their own passion and commitment to their work, as a platform for dialogue which increases understanding and compassion between citizens in recovery and organizations providing support, and as a framework for planning and action to increase quality of services.

ROL pursues organizational health and service delivery improvement by asking and answering two questions:

**How are we alike?**
What are the interests and struggles in each of the four Recovery principles that are common to both our organization and the individuals we serve?

**What can leaders learn from people in recovery?**
In each of the four Recovery principles, what strategies and solutions available to the people we serve are also available to our organization?

**FOUR FOCUS AREAS FOR ROL**

**What are the shared interests and struggles between recovery-oriented organizations and the people they serve?**

**HOPE**
Having a vision that is worth working towards. Believing that things can improve and the vision is achievable.

**HEALING**
To acknowledge the parts of us that need healing, and receive compassion and encouragement as we work towards finding wholeness and health.

**COMMUNITY ENGAGEMENT**
Being a part of the community we live in—making our contribution and being accepted for who we are.

**AUTHORITY**
We have the power to decide our future and take meaningful action based on our beliefs and desires.
Principle One: HOPE

Having a vision that is worth working towards. Believing that things can improve and the vision is achievable.

Bruce: What is hope, and how do you keep hope alive?

Martha: I think hope is a sense of better possibilities for you and for others. I always think that family members have the deepest knowledge about a person, but it is very narrow. As service providers we have a much wider, but perhaps not as deep, perspective. When I’m seeing some disaster happening, I can also look over here and see someone else who is thriving and doing really well. Family members just have this one person to gauge their hope by. They can’t generalize a lot from their experience, so I try to remember that when I’m dealing with families.

AL: For me, hope comes from experiencing the privilege of working with people. What I try to constantly communicate is that it is a privilege for me to sit down with you and support you in sustaining optimism about your life—your present, your past, and your future. People are complicated, and it is not just a few dogmatically outlined principles that result in engaging effectively and successfully. It is a privilege to communicate with the people I work with.

Bruce: The feeling of privilege produces hope in you?

AL: Yeah, absolutely.

Marcelo: Hope is probably one of the few tools that I have. Not just to keep me working, but also to keep me alive. Really, I don’t have much faith. I am a very pessimistic guy. I grew up in a third-world country in a poor family. I starved at times in my life, and had to steal to survive. I had to do things I’m not proud of to be able to eat but, more than once, I was able to get to a point where I could relax. But every time I got comfortable, I put myself in a position of having to start over. In Brazil, I managed to become a licensed psychologist. At that point, I dropped everything, moved to the U.S., and became a dishwasher at Sizzler. For some reason, I have that hunger to be challenged.
“Everybody around me can be bummed out, and I’m still going. It’s not optimism, because I always think it’s going to go to hell. But I’m the guy who will buy the house that the airplane hit. I can make something of it. Is that hope? I don’t know.”

John Allen

**BRUCE:** It sounds like the hunger you are talking about is one of the things that keeps you hopeful.

**MARCELO:** There are times you need to be hungry. Like a lion or a tiger, you never eat until you feel completely full because otherwise you would be sleepy and not alert. Like a feline, I feel that I should always keep a little bit of hunger, so I keep going.

**HEIDI:** Besides the future looking bright, in terms of the definition of hope for me, it’s making each moment really good. I try to live a lot just in right now, and support others in doing the same. I know that can be cliché, but the way I work with people is to help them make this moment rich no matter what is going on. I’ve been through a lot of things in my life. I left home quite young—younger than most. What has always helped me was to focus on the moment.

**MARTHA:** You’re bringing something up for me. One of the things I’ve always found is—when there is a problem—I just search and search to find what makes this moment bearable. I know there is something that I can tolerate; I just need to figure out what it is.

**BRUCE:** So I’m assuming in that, Martha, that you don’t mean a way to turn lemons into lemonade, but that there is some richness in it that is…

**MARTHA:** Yeah, what can I hang onto? Because it seems so awful, I’ve just got to figure out what it is that will sustain me through it. Maybe it’s not that I am looking for it to be full, but I am looking for it to be survivable. What is making this situation survivable?

**JOHN:** This hope thing—I always pooh-pooh people when they say they’re burned out and have no hope. I say there is no such thing. Come on, let’s get going.

**MARTHA:** I like this man!

**JOHN:** Like Marcelo, I’m not an optimistic person in the way people would normally talk about it. I’m always preparing for bad things to happen, gearing up for it, and trying to figure my way out of it. I love to escape things. I talk to myself, “I’m not going to let them beat me, I’m going to beat them.” I try to rally my own people to that same feeling.

**BRUCE:** This is very interesting to me, John, because I’ve known you for a lot of years. You are saying you’re not optimistic, and yet you are one of the most relentlessly cheerful people I have ever met.

**JOHN:** Everybody’s orientation is part of their story. I was born after my brother died. I was born into this family that was totally bummed out. That gave me this certain kind of resiliency. Everybody around me can be bummed out, and I’m still going. It’s not optimism, because I always think it’s going to go to hell. But I’m the guy who will buy the house that the airplane hit. I can make something of it. Is that hope? I don’t know.
AL: I concur with what John said initially about burnout. I don’t have a lot of tolerance for people who say that they’re burned out. You should go home and take a day off, but don’t tell me you are burned out. Observe the person at McDonald’s—now there’s a burned out person whose fingers are singed from flipping too many burgers. When you’re flipping a burger you can be somewhere else and flip the burger—but you can’t do that when you are working with people. You have to be present, and people who state they are burned out aren’t present.

BRUCE: So I hear you say you’re not very patient with this burnout thing. Do people actually get burned out and, if so, why?

AL: I have a different view on the phenomenon of burnout than many other people. I think people sometimes need to take vacations, but if you’re saying you are burned out from work, get another job. Now! I think that we allow people to use burnout as an excuse to do work that is substandard. Consequently, I am intolerant of it. I don’t like to frame it as burnout, because that’s what gets accepted in our industry—the message is that it’s supposed to happen to practitioners.

MARCELO: I explain burnout like this: If you are the flame, you won’t get burned. If you let your flame die, and you are around passionate people that are burning, you’re going to get burned out. Be the flame.

HEIDI: I think one way that I instill hope is to push people to live up to their own expectations, even when they think they can’t. Because I think they really can. Otherwise, they need to go somewhere else where they can be committed to being their best. I believe in excellence. If we keep getting back to that core why are we here, then it motivates all of us to be as excellent. There can be a lot of resistance, but I don’t believe in resistance.

BRUCE: What do you mean by you “don’t believe in resistance”?

HEIDI: Well, I think people are just protecting themselves. When they say a situation is hopeless and there is nowhere else to go with it, they get to stop; the payoff is not having to look at the situation from all vantage points. They don’t have to do the hard work of change.

JOHN: I want to go back to what Martha said about the family’s knowledge being much deeper, but narrower, and ours is wider, but not as deep. We’ve seen a thousand people in the situation a person is in, and that knowledge has a kind of hope in it. When we give up, they give up. Everybody at this table is Management in one way or another, and we’ve got to remember it’s easier to be Management and have hope because you don’t have the direct responsibility and you’re not at ground level fire with the person—with the kid who punches and flails around and everything else. That’s why, in Management, you have to be the keeper of the hope.

When somebody dies that we are working with, it really gets to me. But it puts me in a zone where I can speak about how we are involved in work that is very sacred. This is life and death, and you better think about stuff, you better know it, you better encourage people, and you better be watching everything. Those terrible moments are the opportunity to bring people back into it—to remind them what’s at stake, and renew them.

BRUCE: So are you saying one of your jobs is to get people focused on the gravity of the business—this is more than “case management”?

JOHN: Well, we have to find moments when we can knit together the whole community. To find out what’s going to move the whole thing. It can’t just be the gravity around death. It’s also celebrating. Both are opportunities to increase hope. As a manager, you’ve got to remember you are pulling the sled. Find the moments.

HEIDI: One of the things I am hearing is that we each have our own way to provide inspiration.

BRUCE: In thinking about the structure of your organization...are there any rituals or routines that happen in your organization that have the net effect of helping people be hopeful?

MARCELO: We are very culturally diverse. One of the ritual things that we do is celebrate our cultures.

BRUCE: And how does that contribute to hope?

MARCELO: I think hope is a celebration of your identity. If you are able to share your life stories and tell folks where you are coming from, it tends to increase the flame of passion.

... hope comes from citizenship—from people being able to realize all the fundamental tenets of citizenship. I’m going to promote whatever it takes to help people be citizens in whatever way they aspire.”

AL
BRUCE: What else do you do?

MARCELO: We are a homeless program, so a lot of our folks have never lived independently. Every time someone moves into a new place, we throw a huge party. It’s about the small steps. We also do some clinical measuring and outcome kinds of things that show small amounts of success. Those measurements help to prevent burnout because you can see that people are changing over time.

HEIDI: I’m relatively new where I’m at, and I’ve been thinking a lot about how you institute meaningful rituals within a department of close to 400 people.

MARTHA: We just completed an ethnographic study of the Village and one of the features they described about us they called “Quality of Heart.” One of the rituals that contributes to quality of heart is our Wednesday morning meeting. To me, these meetings are slam-bang informational...what’s happening here, who got a job, this or that. The weirdness of this is that there is a subgroup of staff that hates the Wednesday morning meeting, and yet every week we have people coming for trainings at the Village who really love the meetings when they observe them.

MARCELO: I was at the Village for a training, and I went to that Wednesday morning meeting. It made me teary. I was like, “Wow.”

MARTHA: One visitor said it was about the power of applause. They just couldn’t get over the power of applause. I also think the emphasis we’ve had—from day one—on outcomes so staff really have a sense of what they are doing, and whether it works or not: I think that provides hope.

AL: I think it’s one of the things that makes the Village unique.

MARTHA: Well, it’s not outside the capability of any organization. When I talk, I tell people I don’t care if anybody is asking you to measure outcomes, just start. Anything you can measure has an impact on the commitment and the passion in your organization.

JOHN: I have the same experience with our regular meetings. People hate it—they just loathe it. I make them come. Periodically, I ask myself why I keep doing these meetings. It seems ridiculous, given how much people hate coming. But you gotta keep doing them, because the bad news travels and the good news won’t move a foot. The meetings are a chance for staff to know the miracles they are pulling off. People sit around and think, “Wow, that’s incredible.” It’s my job to act like a bee,

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Examples of Benefits of Recovery-Oriented Leadership

- Offers a unique perspective for organizational improvement that is aligned with and respects the current social movement for individuals with psychiatric disabilities.

- Provides common ground for shared language, learning, and dialogue between organizational leaders, service providers and the people they serve.

- Promotes retention and deepens commitment of employees by emphasizing their own passion and interests with the organization’s mission of recovery.

- De-mystifies and de-stigmatizes healing processes in both individuals and organizations.

- Confirms the organization’s commitment to ongoing improvement.

- Increases compassionate understanding in employees for individuals using services.

- Deepens the organization’s commitment to the recovery movement.
As a leader, you are either confirming or disconfirming hope in every action you take. You either confirm all the prejudices that people have about people with psychiatric disabilities or you disconfirm them in some way that frees the thing and helps people realize there’s more possibilities here than meet the eye. It has a very liberating effect on people. It’s almost like, hey, there might be some kind of roller skates after this deal. It can get people moving differently and acting differently.

**BRUCE:** Sounds like one of the things you do constantly is to disconfirm…

**JOHN:** Yeah, I think it’s really crucial and you have to do it consciously. You have to disconfirm people’s prejudices, staff prejudice, my prejudice, everybody in the world’s prejudices about people. You’ve got to get it going out of the chute.

**BRUCE:** Anything to add, Al? You’ve been quiet.

**AL:** Yes, really quickly. I’m going to describe a hope characteristic that must be present within the organization—“whatever it takes.” Do you get it done, no matter what, or do you find reasons why you can’t do it? I believe that we are the organization in our community that must ascribe to this tenet and demonstrate it. Also, hope comes from citizenship—from people being able to realize all the fundamental tenets of citizenship. I’m going to promote whatever it takes to help people be citizens in whatever way they aspire.

**HEIDI:** Another thing that builds hope is full inclusion. Including everyone on every level as you develop infrastructure or policies. Everything we do gets eyeballed first by everybody who has the opportunity to give input. I think that creates hope. I think people feel like they will have a say even if it doesn’t go their way. They feel their voice has been heard.

**JOHN:** The part we’ve left off is about how much support we need, as leaders, to keep hopeful. When I had Bob Moody as my boss, I had a lot of free rein and a lot of encouragement. Even if he thought I was absolutely daft about whatever risk I was going to take, he was willing to go along. Now with my new boss, Vick Montoya, I get the same kind of thing. If I had somebody who was going to hit the brakes all the time, I’d be screwed. Part of my own feeling, and why I can keep going, is knowing that if things go bad, there’s not somebody who’s going to fight me or blame me. They are going to be there to help me.

**HEIDI:** So it sounds like the challenge is: How do you build an organization that gives the arena where people can do these things that build hope? I’m hearing that there are two levels of responsibility we have as leaders. One is developing an infrastructure where those hope-building moments can emerge. I think that’s where we’re at right now in my organization. The second level of responsibility is figuring out how you help people take advantage of that in real ways.

“I explain burnout like this: If you are the flame, you won’t get burned. If you let your flame die, and you are around passionate people that are burning, you’re going to get burned. Be the flame.”

Marcelo

“When I talk, I tell people I don’t care if anybody is asking you to measure outcomes, just start. Anything you can measure has an impact on the commitment and the passion in your organization.”

Martha
Principle Two: HEALING

To acknowledge the parts of us that need healing, and receive compassion and encouragement as we work towards finding wholeness and health.

BRUCE: When we were deciding on the four recovery principles to use in Recovery-Oriented Leadership, there was considerable disagreement about using the word “healing”.

MARCELO: What’s the problem with the word “healing”?

JOHN: It’s corny and sappy.

MARTHA: It sounds too new-agey, it sounds too...

JOHN: You’ve got to make room for that. You have to cure people of their ambivalence—you have to make them fight for either using or not using the word. If you let people wrestle with it and go through it, the genuine power of it will come through.

MARTHA: These words really affect people. We’ve had the experience at the Village of training participants walking out when they realized we were going to talk about “harm reduction.” They got up halfway through it, picked up their stuff, and left. The word was so threatening. I do see that changing now, but...

HEIDI: If we want to use the word “healing”, then we have to prepare people. We have to do introductory stuff around what healing is and the history of it. Mental health comes out of healthcare, and what is healthcare if it's not healing? Healing is not a new-age word—it’s really what we do in the healthcare profession.

JOHN: I think we’ve lost touch with that.

MARTHA: I think confusion over what the word means may be part of it. I was talking about healing as the regeneration of tissue, not as a cure. I think there’s a lot we can do for people that doesn’t mean the illness is cured—there are states of mind and functions you can restore. Wouldn’t you call that healing?

The process of recovery is more complicated than “getting back” something that has been lost. It involves the “uncovering” of the person’s story to locate the places which are causing the person to feel suffering of some kind—whether due to feelings of unworthiness, confusion about direction, lack of relationships or community places to belong, or loss of hope. After the uncovering comes the “recovering” of those hurtful places in the person’s life with new hope based on a vision of a life that is worth going towards. Recovery is about healing—it is about discovering the parts of ourselves that feel incomplete or broken, and committing ourselves to discovering our own path towards wholeness.

FOR RECOVERY-ORIENTED LEADERS:

For many leaders, using the word “healing” in the same sentence with “organization” causes considerable wariness. What does it mean to heal an organization? The Recovery-oriented leader views the organization as a living organism that goes through cycles of illness and health, just like the people the organization is serving. Organizations, and the people in them, can face difficulties from unresolved conflicts, lack of commitment to a shared vision, employees who bring too much of their personal life with them to their work, and a host of other common organizational issues. What parts of your organization are not functioning in a healthy way? What parts of your organization would benefit from being whole once again? The Recovery-oriented leader focuses on regular practices that encourage employees to share and release the tremendous weight of the stories of others they are carrying, have opportunities to share their own stories of success and frustration, gather to celebrate success, and uncover and resolve blocks to healthy employee interaction and service delivery methods.
JOHN: Bruce, why do you think it’s necessary to have this discussion about healing?

BRUCE: If the word is uncomfortable to use, then let’s scratch that itch and find out why. I know each one of you, and I don’t believe it’s an accident that you are in this line of work. I would say what you are doing is more than a job—it’s a calling. People choose callings to fill a desire—they are getting something out of it and there is integrity in admitting that. It’s not just about serving others—we are also, consciously or unconsciously, trying to heal ourselves. If you are paying attention, you can get stronger and healthier from doing this work. Why is that so hard for leaders to talk about? Why do we have to appear so strong and beyond needing healing for ourselves?

JOHN: I think we’re more in touch with that earlier in our careers. It’s fresher in your mind. It’s easier to apply. If you’re talking about addressing this to mental health managers, I think it’s hard because you are really asking them to talk about their soft spots and what they may see as their inferiorities.

HEIDI: They need it though. I need it.

JOHN: I’m not saying it’s not a freeing thing for them. It’s a good thing. There’s a way in which this becomes less and less accessible in a direct way the longer you are in this business. I’m not saying you can’t still get in touch with it, but you become much more defended and less able to tap into the whole wellspring.

BRUCE: So, if I got a group of brand new, fresh out of college, clinicians or therapists or case managers, they would have no trouble launching into this conversation?

JOHN: Less trouble.

BRUCE: There is a leadership obligation at work here. You are leading people for whom this topic is an invigorating and fresh idea, yet you’re in the second part of your career and these ideas may not be on the front burner for you. That doesn’t mean you don’t have a responsibility to keep it burning for them.

MARTHA: I remember Al saying that, as he gets older, he feels more pressure to be efficient. I think that’s what we’re up against here. Is talking about healing the most efficient use of my time as a leader? I’ve got sixty zillion people to attend to and things to do. We are talking about taking time for a discussion amidst a list of demands that seem to have endless importance.

BRUCE: But if there is no time to talk and understand—in a meaningful way—about how your work connects to your own healing and path, people don’t genuinely commit to changes in a sustained way. They will change as long as the boss is looking, but go right back to their old ways as soon as they aren’t being watched. The pace and demands of this work are sending the message to all of us that there is no time to talk—talk is a frivolous and wasteful use of our time. Just do it! We are getting to the point where we only value action, but people are forgetting that talk is a specific kind of action—an absolutely necessary component for lasting change. Edicts from above about what is expected, with no time to process and understand, just bring resentment, false allegiance, and an undercurrent of mistrust that will eventually sabotage the organization’s work. I see it everywhere I go.

JOHN: Even if you’re not sending edicts from above, as a
leader you’re still removed in a palpable way from the whole direct service experience, and that’s what connects you and reminds you about what the work really is.

HEIDI: But that’s the challenge of leadership—to not be removed. As an administrator and a bureaucrat, it’s my responsibility to stay connected so I can be of service that is really useful. That’s why we need to talk about this stuff. It’s one of the ways we stay in touch with what the work really is. It’s essential.

JOHN: It’s a difficult thing to ask leaders to do, but it’s necessary.

BRUCE: Well, let’s see how difficult it is. How does your job as a leader contribute to your own healing?

HEIDI: O.K., I’ll go. Growing up, I found the world to be a pretty harsh place, and I had a hard time finding places to fit in. From a pretty early age, I remember just wanting to have a little corner of the world somewhere where I could be a part of making the world the way I thought it should be. I think my role as a leader has realized some of that desire in me. I am trying to do my part to create a world that I would want to live in. That’s a big, driving factor in what I do.

BRUCE: How do you define healing?

HEIDI: Healing is mending the wounds. Recognizing wounds by paying attention, focusing, and giving voice to wounds.

BRUCE: Given that description of wounds and healing, then how is your work healing for you?

HEIDI: It’s actually the content of the world that makes it a healing place. Within my job, I can have some impact on how we respond to people, the policies we make, and how we do our business. I believe we can create an organization that is healing for all the people involved—the staff and the people who come to us for service. When I do my work, it’s with that in mind.

BRUCE: So Al, how is your work related to your own healing?

AL: That’s probably a more personal question for me, so…

BRUCE: That’s the way I meant it!

AL: I mentioned my faith earlier in our discussion. For me, healing involves subordinating myself to attend to what people’s needs are so they can realize the aspirations they have for themselves. Some people just want to get through the day. Okay, how can I support you? How do I subordinate myself? You want to be President? Well, that’s a lousy job, but if that’s what you want, how can I subordinate myself and support you in getting there? It is healing for me to support others in meeting their aspirations.
MARCELO: I might be a good one to go next because my vision is very different from Al’s. Like I said before, I have no faith, no religion, and I don’t have a lot of hope, either. But I’ve been through a lot of things and I somehow heal myself.

BRUCE: And you define healing as…

MARCELO: As surviving and staying in the here and now. In the context of healing, the word recovery is kind of tricky. I see it more as “cover, uncover, and recover.” I’ll give an example: In Brazil, I had this group of friends, 13-14-year-olds, and we did all sorts of stuff to try and survive. There were about fifteen of us. We used to rent a little room, and all of us would do whatever we could during the day to get money to pay for the night. One time, we rented an old dentist office, a little room that had a hole right in the middle of the room where the dentist chair used to be. Someone before us had put a cover over the hole, and put a table and a lamp over it. With all fifteen of us in there, it was difficult to maneuver around because that table was right in the middle of everything. I actually came and moved the table, moved the carpet, and showed that there was a hole there. In my life, that summarizes my experience of healing. When someone is hurting, the usual thing they want to do is to put a band-aid over it, like the table and lamp in that room. That just makes it hard to maneuver in your life. It’s much better to uncover it, see how big the hole is, and “re-cover” it in a way that makes you whole again.

BRUCE: So, your work… how is it healing for you?

MARCELO: First, yes, it is healing for me. It keeps my flame going. I never felt so sick as when I quit my healing work in Brazil and moved to Utah to study linguistics. I said to myself, “I’m just going to do research… forget about all that clinical stuff.” As soon as I moved to California and got my hands in healing work again—there are no words to describe it—I just knew I was feeling the healing continue in myself.

JOHN: I’m more arrogant than Martha. I think I’m healing. In our field, you have amazing privileges to see people, in spite of their trauma and pain, get up off the mat. It’s like a fighter who gets knocked down three times in the first round. You’re thinking, “The guy is still going… this is amazing.” I just think it’s enormously powerful and healing for me to have the chance to be close to that, to be a part of it—in any way. It happens to me all the time, whether it’s a confrontation or holding somebody’s hand while they cry. It’s an amazing extrareligious kind of thing—a much more powerful thing than religious people get most of the time, in terms of its intensity and frequency. My life is enriched by it.

AL: It’s not about religion, by the way, it’s about faith. It is about the privilege to have a relationship with someone where you are absolutely able to attend to their needs. It’s something that I can’t measure…the value that I place on being able to do that.

MARTHA: Al, I noticed your emphasis on subordination when you talked about healing. I don’t know that I would use that word, but I do incorporate some of your thinking. So often, it is a shock to our staff to realize, “Oh, this is not all about me.” I remember I was a little insulted...
when a staff person came to me and said, “Well, anybody who works at the Village knows that staff come second.” I don’t think she meant it in a flattering way. I reacted strongly, and then thought, “You’re exactly right.”

**AL:** There’s a reason staff people say that, and it warrants a follow-up question. That’s the elephant in the room. I ask people to tell me, “What does being second mean to you?” It is a privilege to be second.

**MARCELO:** Maybe this question about our own healing is so difficult for us because we enjoy the privilege of being second. We are supposed to be focusing on the people we are serving, so we don’t look at ourselves.

**BRUCE:** Is there anything you can do in an organization to promote employee healing and healing of the organization as a whole? I’ve found many leaders to be both frightened and intrigued by the idea of organizational healing. They can see the obvious benefits of having healthy employees and a healthy workplace, but aren’t sure how to go about it.

**HEIDI:** We’re developing a wellness program. Instead of being punitive towards people with unhealthy behaviors, we’re trying to provide all of us with tools that will help us to be well and participate as a healthy team member and model “wellness” for the people we serve. All the staff are going to be developing their own individual wellness plans. Each of the teams is going to develop their wellness plan as a team and how they support each other in wellness.

**JOHN:** The staff are doing this? Really?

**HEIDI:** Yes. We’ve had a couple flops in terms of trying to institute something like this. We’ve gone through a couple of different consultants that just didn’t really quite get to what we were looking for because, in the beginning, we didn’t know exactly what we wanted. We were experimenting. It needed to be a mix of professional work skills and personal wellness types of stuff, and it’s difficult to do that in a big organization. We’re just walking down that path right now and starting over for the third time, and this time I think we’re going to get it.

**MARTHA:** I think you said something so important when you said you had to flop a couple of times. I think you empower staff enormously if you can identify the learning from those flops and you can change what you do without coming down on people. When I first came here there was no history—everybody was new. The thing I found most crippling was that I didn’t have any reputation for being responsible and reliable, so people didn’t know if they could trust me or not. Under those circumstances, it’s very hard to get them to tell you whether something is working or whether it’s going to go bad.

**HEIDI:** And not stay on that path, if it’s not working.

**AL:** This goes back to subordination again. You model that it is all right for people to ask, “Is this making sense to you?” You have to give people permission to tell you if something is not working for them. It’s important for you to tell me about something I said or did that wasn’t helpful. It’s the only way I can learn. In that way, you promote healing because—when people find out what is not helpful—they are discovering what is preventing them from subordinating themselves to the person they are serving. Also, it’s important for me to ask myself, “Why don’t I want to ask or find out if I’m being helpful or not?” What, really, is stopping me from asking that question? I believe it’s because I’m not in touch with my own healing—with how difficult something was in my life—and I just don’t want to deal with that.

Hey, I’ve had folks trying to persecute me—who didn’t want me to live where I was living and who were constantly harassing me. They didn’t want to deal with me. One day, I had a breakthrough. I finally got it that the folks I am working with are experiencing the same frustration with me, because I am not in touch with who they are. I’ve got to be honest—there’s stuff I don’t want to talk about or deal with.

**MARTHA:** I feel like this has been a healing discussion. It’s nice to be able to sit and talk with each other.

**JOHN:** This healing topic is a tricky one.

**HEIDI:** I’m realizing I’ve got more questions than answers. I’m glad we talked about this.

“**HEALING**

“I never felt so sick as when I quit my healing work in Brazil and moved to Utah to study linguistics. I said to myself, ‘I’m just going to do research…forget about all that clinical stuff.’ As soon as I moved to California and got my hands in healing work again—there are no words to describe it—I just knew I was feeling the healing continue in myself.”

Marcelo Cavalheiro
Principle Three: Community Engagement

We all live within the life of our community, however we define that. The process of recovery often includes either rebuilding or developing connections with other people and places in the community. The essential result of stigma—isolation and feelings of not-belonging—can only be overcome when a person finds relationships and places to belong outside of mental health and other social service systems. More than simply places to hang out, the person needs people within those places who value his/her presence and actively welcome them. We all need purpose in our lives, and it is within the context of community that we locate the opportunity to give and receive acknowledgement for our contribution.

FOR RECOVERY-ORIENTED LEADERS:

Recovery-oriented leaders understand that building relationships is the underlying task of all planning and interventions carried out by the organization. A commitment to community development compels the leader to expand the strategies of the organization beyond “personal preparation” (focusing solely on service-users’ skill development and symptom management) toward community preparation (locating and developing welcoming individuals and groups). There are several significant challenges within this for the Recovery-oriented leader: 1) How can leaders expect service-users to assume meaningful roles and overcome stigma and isolation when they themselves are so often isolated? 2) How does the leader effectively encourage staff to overcome their fear of community work? and 3) How does the leader locate opportunities to contribute to the community rather than focusing solely on how the community can serve the organization?

BRUCE: Mental health organizations have a mission of supporting the people they serve in becoming included in their community, whether that means getting a job, a place to live, or however else they want to be successful. Al talked earlier about supporting people in being full citizens, and that struck a chord with me because it is tied directly to people being engaged in community life. There are two different questions I have related to this topic. First, how engaged are you in the community around you? By that, I don’t mean collaborating with the police, the welfare department, or other social service agencies—but rather with the general community. As a paid leader, how much are you engaged in the life of your community? Second, what is the relationship between how much you ask the community to give you, and what you perceive you and your organization are giving to the community? Most social service organizations believe the community should be supporting what they are doing, but I’m interested in the reciprocal part of it too: what are you giving back?

HEIDI: I think community engagement is this huge hole of an area that we’re just now beginning to promote as a value. And it means something so different than what I thought it meant. I thought it meant going around and collaborating and having partners that are diverse. But what it’s coming to mean for me, and I’m sure people at this table know much more than I do, is going out and joining with the community and helping them to embrace the people we work with as a unique part of the community. That’s a different idea than collaborating with other organizations. That’s a big, revolutionary idea I really like, but we’re just at the infant stages of understanding how you go about doing it. It’s about social justice. We’ve always focused on the consumer. But there is a whole other side—focusing on the community so that the consumer doesn’t have to change as a condition for being accepted. We want the community to see what a benefit it is for them to accept people with mental health and drug and alcohol conditions as they are and make a place for them.
JOHN: In many regards, we are failing. When you think about all these new jail projects that have started, the only reason the people are in jail is because mental health failed. That’s the deal—they failed, we failed, and I failed. There just is no education about this stuff—we aren’t telling the stories about what works. It’s just like I said before—good news doesn’t travel. They see the person at the school who has a mental illness and is raising holy hell—that’s their vision and they don’t want the guy around. They don’t see the person that goes back to school and they don’t see the person who goes back to work. The community doesn’t really have any sense of our accomplishments, or what we do, or where the money goes.

MARCELO: But a lot of this is about how we choose to do our work. It is much easier to work within our own walls and within our agencies than out in the community. I just bought a house in Culver City, the first I have owned in my life, so I am trying to be very invested in my community. I went to my local council meeting on a night when the discussion was about homelessness. I’m the clinical director of a homeless program, so I figure I should show up. The police were there along with a lot of concerned citizens. The discussion was mainly about how we could get the homeless people out of our area. The solution they were coming to was to call the police every time you see someone. They’ll go over there and give them a ticket—for an open container or whatever—and they won’t have money to pay the ticket and then we can take them to jail. I stood up and said I thought we should have a little bit of compassion. People started screaming at me, saying, “Take them home to your neighborhood if you like them so much.” I saw one of the people at that meeting at the Costco a week later, and he turned away when he saw me. If we want to see the people we’re serving more in the community, we can’t forget about the majority of people in the community who don’t think like we do. Community work is the missing component and, if we don’t do anything, there’s a good chance none of this is going to get better.

BRUCE: As leaders, I hear you saying this is an emerging thing. So what can you do?

MARTHA: I heard a presentation by some mental health folks from Rhode Island some years ago at a conference. They had decided that they wanted to get all of the faith-based organizations involved with mental health, so they sent out several mailings to the entire clergy list. They got nothing…zip. Then they went out and started talking and meeting with the clergy. What they learned was that they assumed they were going to have to educate these poor clergy and laypeople who wouldn’t know what to do with people with mental illness. But as the program developed they realized that the people in the mental health community had much to learn from the faith community. We’ve got to find out what we can learn from the community and not be in this superior role. That’s why I’ve been very interested in the project going on in Santa Cruz where a woman, who has been a consumer of mental health services, is doing a big project around what makes Santa Cruz a mentally healthy community. I think one of the things that we need to do is back away from our expertise that we’ve worked so hard to try and develop, and start asking other people what we need to know from them. That’s a very different idea than I would have approached this with until recently.

AL: I heard a professor say, “Why is the incidence of mental illness lower in third-world countries than it is in the United States?” The incidence might not really be greater in the U.S., but we place a great emphasis on identifying and labeling people’s illness. In developing countries they place more emphasis on identifying the resources each person can bring and putting those to use. One of the things that I get challenged by, all the time, is: How do I get the community to appreciate the strengths, resources, and skills of the people that I am privileged to work with? Let’s talk about that. Because when we spend all our time talking about people with psychiatric disabilities staying in the role of clients rather than assuming a role as a
citizen, that’s a tougher sell! Especially because we’re all indoctrinated by social service systems to look at people in ways that marginalize them.

JOHN: Friday, I went to a stigma conference. It was at the Presbyterian Church, because one of the leaders in the recovery movement is part of that church. There was a guy talking from the University of Chicago, and my job was to handle any crisis stuff that happened. There were twenty or thirty people hanging around outside who weren’t able to take in the content or wanted to smoke. At one point, the woman who was the Director of the Church came up to me, irate, talking about how the parents who were dropping kids off at their preschool were complaining about the people hanging around outside smoking and making a lot of noise. I realized, at that point, we’re doing this conference, and the stigma is happening all around us. I’ve been wrestling with this the whole weekend. When you can really work this stigma thing is when somebody who is already part of the Church, Mable, can talk about it with other people in the church because they already know Mable—her kid played in little league with their kids and he did first communion with them. That’s how you’ve got to get your foot in the door. You can’t just make speeches about stigma at the Rotary Club.

BRUCE: Is that useful at all?

JOHN: I don’t think so. I think the people that are involved in those speaker bureaus think they are, but I don’t think it changes people’s minds.

MARTHA: I agree, and I also think we ought to be careful in this because I am seeing organizations trying to build professional advocates. They fly up to Sacramento and testify, and talk to different groups, but what are they actually doing in their own communities? We are really talking about a different level of involvement and work.

BRUCE: Why doesn’t it work to send people in recovery to the Rotary to speak?

JOHN: Because you get exceptionalism. You know…it’s a sweet person…it’s not the person who they saw digging in the garbage.

“... you have to start right there, right then, and very aggressively say to them, ‘Hey look, we need you to help us change the community.’ You’d be amazed by how perplexed and astonished kids are that you would ask them to help.”

Al

BRUCE: So I hear you saying we know how to make it happen on an individual basis with the landlord or a cop who’s taken someone under his or her wing...

JOHN: Or a church...

BRUCE: So my question is: As a leader, is there anything that you can do with your time that operates at a larger systemic level in the community?

HEIDI: Well, we need to create a forum where people are used to us and we integrate ourselves into the community. We’re pretty insular as a Department in terms of what we do, and we’re just starting to put ourselves out there. I noticed when I came to Santa Barbara County that everyone else was defining who we were and we didn’t proactively go out there and say, “No, this is who we are, this is what we do, and here are the stories.” We’re in the process of putting together public relations strategies and ideas that will connect us in a very strong way with the bigger community.

BRUCE: Okay, what other ideas are there?

AL: I think we have to very aggressively interface with the educational community. When young people become adults, they carry with them all the preconceived notions they learned along the way. We have to shape those notions.

JOHN: The research shows that by Junior High they already have the same opinion as their…

AL: So you have to start right there, right then, and very aggressively say to them, “Hey look, we need you to help us change the community.” You’d be amazed by how perplexed and astonished kids are that you would ask them to help.

MARTHA: I think we, personally, need to be known in the community. I’m almost totally pessimistic about stigma. I just think, frankly, the only way we’re going to get anywhere is when people know us because we are involved with them and they can approach us. I made a point to live in Long Beach when I moved here, because this is where our organization is located. You can’t get much response when you go to the City Council and ask for something and then tell them you live in some other place.
JOHN: You’re dead in the water.

MARTHA: They’re not going to pay a lot of attention. My feeling is that stigma is best combated by the individual accomplishments of people in recovery. The other thing I do know is there is something about sending people to the City Council, in particular when there’s not a problem…to tell them about the progress you are making…just sort of reporting. They are not going to come and ask you for it, but I think we should be doing it.

JOHN: One of the things I am just amazed by is what a bad job we do educating. I mean really educating, as opposed to just getting political support. We do almost nothing to really educate politicians so that they really have an idea about what it is we’re struggling with and what we’re involved in. There isn’t a very deep emotional understanding of what the issues are. I agree with Martha. I think the stigma thing, the way it’s currently being talked about, does not have a strategy yet that’s going to be effective. We’ve identified something that’s crucial, but we haven’t figured out how to give it legs. We just haven’t.

HEIDI: What’s at the core of this? When we ask staff to go out in the community and do this work, there is so much hesitance. One of the things you said, Bruce, that stuck with me and I’ve given a lot of thought, relates to this conversation. You said that people who get into the mental health field generally have felt like outcasts and outsiders themselves and that maybe one reason why we aren’t very good at community work is that we haven’t dealt with that as an organization. I think there’s a lot of truth in that. So how do you apply that in an organizational way? That sounds to me like an organization in recovery.

BRUCE: I think there’s a huge unspoken fear going on in mental health employees that, because we believe the community doesn’t want the people we are helping, they’re not going to want us either. We don’t want to go out in the community because we don’t want to experience the rejection…it’s just an affirmation of other times in my life I haven’t felt welcome.

HEIDI: So how do you tackle that as an organization? I think that’s where we’re trying to get to.

BRUCE: The first task is to build the skill of the leader to talk about this issue in a way that’s not too therapeutic, that’s practical in terms of outcomes, and that has clear expectations. One way to start is for the leader to make the connection in his/her own life with times they have felt excluded, and the effect it had on them. Every leader has those stories. The leader, at that point, can connect at an emotional and experiential level with people using the services of the organization, because the experience of disability is primarily about feelings of not belonging and broken dreams. When the leader connects with service-users at that level, he/she will have an increased passion for doing community work because they have remembered that the work we are all doing is primarily about loneliness and getting people reconnected to community life. It’s not primarily about disability, although that can be an important component. We try to make it all about disability issues, but I think that’s because we are afraid to acknowledge that the experience that people with psychiatric disabilities have of feeling like they don’t belong is, in many ways, our own story too. Who wants to remember that? Once the leader has done that work for themselves, they are prepared to help staff go through that same process. Trading stories of not-belonging and acknowledging the fear around not being wanted is the first step—getting the truth out. This is the deal, Heidi: the only way to get staff to switch from working in their cubicles to working in the community is to get them to acknowledge their own fears around not-belonging and how those feelings shape their behavior in the workplace.

Heidi: So, as leaders, we have to learn how to lead an organization through recovery. We’re on the outside of community, and we have to get on the inside.

BRUCE: Yes. The second step is for the leader to locate and work personally with the seed staff in their organization who carry the vision and passion for working in the community. The leader has to personally commit to mentoring and developing that staff person. The third step for the leader—and this almost never happens—is to set clear expectations that people will be out in the streets and not in their cubicles. Otherwise, there is no motivation for the reluctant staff to listen to the seed person. As soon as reluctant staff get the message that the leader expects them to be out there, they are going
to begin to try and learn from the seed person so they can be successful. I see passionate seed people all the time in organizations, but there’s almost never an organizational framework that legitimizes what they do, or leaders who make it an expectation for all staff.

MARTHA: I’m just thinking of something that I hadn’t even thought about before, in terms of the technology of how we can do this work. It’s occurring to me right now that one community we’re able to pull on quite a bit now—that we never had any real access to before—is apartment managers and owners. We’ve had one employee—a person in recovery—who has built these amazing relationships. She has had me call owners and apologize when tenants damaged buildings… I can tell you I did it gritting my teeth thinking they weren’t going to want to talk to me. It was just amazing how responsive they were when I just extended some sympathy. Over a couple of years, we now have 20 landlords and managers that come to our Golden Ducky ceremony and are, in effect, sponsoring people in recovery who are residents in their buildings. What I’m thinking about is how powerful this is… that’s a huge way to get people out in the community. It has been able to happen because there have been relationships developed over time.

MARCELO: I think what you guys have done in Long Beach is to aggressively carve your way into the community. Folks tend to see us, both folks that work in mental health and people we serve, as not a productive crowd. In Western societies you’ve got to produce something. I’m a native South American and, in my tribe, the more voices you had in your head, the more status you have. So the medicine man and the chief were the people with the most voices in their heads. People that hear no voices were at the bottom.

BRUCE: So I hear from this dialogue that this is the area we really know the least about. That’s interesting, because there’s mountains of research and well-fleshed-out applications in community organizing, but I don’t think we’ve really even begun to tap into what is already known that works. It’s energizing to think of what lies ahead.

MARCELO: The gay and lesbian community uses the rainbow as the symbol. Each color of the rainbow is one stage of recovery—your coming out, as their community puts it. The last color on the right is “Pride,” which means that you are now proud and are ready to go out into the community and do outreach.

BRUCE: Using that analogy, it makes sense that the psychiatric disability movement is just getting to the stage of having enough pride to begin to do community engagement in a way that is not based in charity and pity—because “those people” need help.

MARTHA: I heard a Supervisor in Santa Cruz, who welcomed the group to their Mental Health Summit meeting, make that exact analogy of the gay and lesbian community—how 15 or 20 years ago you may have known some people who were gay, but it wouldn’t be a subject of general conversation. It was avoided. This is a very hopeful thought. Maybe our time is coming.

“I stood up and said I thought we should have a little bit of compassion. People started screaming at me, saying, ‘Take them home to your neighborhood if you like them so much.’ I saw one of the people at that meeting at the Costco a week later, and he turned away when he saw me.”

Marcelo

“You said that people who get into the mental health field generally have felt like outcasts and outsiders themselves and that maybe one reason why we aren’t very good at community work is that we haven’t dealt with that as an organization. I think there’s a lot of truth in that.”

Heidi
Principle Four: AUTHORITY

We have the power to decide our future and take meaningful action based on our beliefs and desires.

Recovery requires action because altering our life requires action. Whether it is changing a long-held belief about ourself or another person, or doing something different during the day, recovery requires a person to take responsibility for their place in the world by claiming both the authority to make decisions and the responsibility for those decisions. Self-pity, the best friend of those who want to stay stuck in their life, is the enemy of personal authority and powerful action. When a person has authority over their life, they recognize that their current difficulties do not describe all of who they are—they have gifts and talents that are needed in the community. Having authority means having access to information, making choices that can heal and bring you more fully into the world, and then acting on those choices.

FOR RECOVERY-ORIENTED LEADERS:

More than what a leader says, others watch what a leader does. Who am I? What is my genuine authority in this organization? These are two essential questions for leaders to answer within themselves and support others in answering within the context of the organization’s work. This requires an acknowledgement of both the positional authority—the job tasks assigned—and the genuine wisdom—the gifts and talents—the person is bringing to the group. Leaders are actively asking questions of themselves and others that encourage meaningful roles to be identified and given. How do I use my work as an opportunity to discover and contribute the best of who I am? What parts of who I am conflict with my role in the workplace? Beyond my skills and education, what is the source of my desire to do this work? What is the essence, the most essential gift, I am bringing to the workplace?

BRUCE: I want to split authority into two basic types: the positional authority you get from being the boss, and the other kind of authority—your wisdom, talents, and gifts—that you bring to the workplace. I want to ask you first about your positional authority as a boss and particularly what you’re trying to get better at right now.

MARTHA: I’m trying to learn how to differentiate between when we need to innovate and when we need to look at old lessons and see if there is still value in them. I think, as you get more experience, it becomes so easy to say “we tried that already.” The struggle is knowing when to try something in a fresh way, and when to re-listen and re-evaluate my prior experience.

HEIDI: All my life, I’ve been a very defiant, rebellious person. Now I have a lot of authority in my job, and I have to figure out how to use it. I know I have a natural ability to lead, but I want more cognitive understanding. I want to do a lot more reading and learning. At an executive level of leadership, the impact you can have on people’s lives is pretty awesome, to be honest. You can start to feel like you’re really important, but you also understand how unimportant you really are. There’s always that paradox that I like to stay in tune with—to keep balanced.

AL: I’m learning to be more efficient. Not just efficient with the organization of my time and resources, but also efficient in attending to relationships. We should take a lot of time in owning and maintaining the relationships we have. The organization has grown a lot in a brief period, and the expectation for those that are promoting the growth is that you can’t compromise the relationships as your organization gets larger. So I constantly evaluate how I can be efficient without compromising important relationships.

MARCELO: The difference between genuine and positional authority has been a struggle for me. My last job lasted for eight years, and I started from the bottom as a therapist. When I was promoted, people still remembered the genuine authority I had before I became the boss. At...
“It is an expectation in the company that you demonstrate the ability to subordinate yourself to constituents that you have the privilege to work with. If you can’t, you’re not going to be successful in our organization.”

Al Rowlett

this job, I entered the company as the Clinical Director. The staff didn’t have the experience of me as a therapist. At times I struggle with that because I feel that they are listening to me from a position of authority, not from my genuine authority as a therapist. One thing I try to do is spend a good amount of my time doing the things that everybody does. I try to save time every week to do what a Personal Services Coordinator does—to keep that alive in me. People just don’t know how much this work is a part of me. In Brazil, I worked with children that suffered from autism, Down’s Syndrome, spina bifida, and blindness. I did that for a few years, but I was very young and it was just too much for me. I moved to Utah to get a PhD in linguistics and I thought, “All right, I’m free now.” But it was impossible to get away from what I knew I should be doing. I ended up moving to Chula Vista and working with undocumented suicidal immigrants, because that was what made me feel like I was doing something. It’s this truth I have, and will always have. I want to be regarded for my gifts, not for being the boss.

MARTHA: We all play different roles in our life. As a member of the family we have one role, certain friends expect you to be like this or that, and I think we mostly try to fulfill the expectations different people have of us. I don’t know that it’s an either/or. I think you can be genuinely the boss and genuinely wise.

HEIDI: It’s a growth step in leadership. I’ve struggled with that same thing in my work life. I think you’re also saying there’s a role for positional authority. There’s a lot of good you can do with it—at some point you have to embrace it and understand it. In Solano County—I worked there for many years—I was a line worker and worked my way up accidentally. I never intended to be the boss. So I’ve always had to struggle with authority. Let’s face it—we all have authority issues.

AL: When I inquire, I find that people are convinced that I’m invested in them realizing their goals. They, consequently, sustain the kind of effort necessary to produce in an exemplary manner. That’s what we both want. People do not follow out of fear or positional authority. For example, the people in the clerical positions are not just clerical people. They are the gatekeepers for our company. When a clerical person knows that I value them in a way that underscores their importance, they often say “Thank you, nobody’s ever said that to me before.”

MARTHA: I think sometimes there’s a wonderful synergy that happens when we do a little better because we are trying to lift ourselves up to the level of the people we are working with.

JOHN: The part of it that I find odd is, even when I’m not being the boss, to everybody else I am still the boss. It never stops. I move around a lot to get out of the boss role. I have a lot of conversations in the parking lot, where I can be less in the role. I’m less in the boss role when I’m in the team’s rooms. There’s always a tension between trying to build a community and being the boss. If there’s a personnel issue, all of a sudden I have to say, “I can’t talk about it.” That puts a choker on the community thing. For those of you who watch the Sopranos, it’s like that episode where Tony realizes everybody has to laugh at his jokes because he’s the boss. Things like that are hard to tease out.

MARTHA: One time, long ago, we were in a big budget crunch and I was on the phone for days and in meetings trying to figure it out. Everybody was coming up and saying, “Are you okay?” And my thought was, “Am I completely responsible for the emotional tone of this place? Does it rest solely with me?” If that’s the case, I need to do something different so that people can sustain each other more. It was just astounding to me. I don’t know what I had been communicating, but apparently it was nothing good.
JOHN: A mother came in to complain about what was happening with her kid. The staff person said to me, “You’re the person who makes all the decisions here.” I thought to myself, “If that’s true, we’re in deep trouble.” I was struck by the discord between how I thought everybody’s acting independently and how, all of a sudden, it’s all mine to deal with.

HEIDI: But we look to our leaders to be responsible and to make the hard decisions. I think that’s one of the positive things that positional authority represents. Even though we use an egalitarian approach, in the end you really are responsible if it’s your organization or your program. Even if it’s people operating independently—and I promote that—I’m responsible for all of their decisions.

JOHN: Isn’t that a scary thing to you? You have 400 people running around and you don’t have a clue, really, on a day-to-day basis what actions are being taken. How do you live with that—feeling the responsibility yet not knowing the specific actions happening on a daily basis?

HEIDI: I think I’m pretty comfortable with it. Let’s say somebody makes a bad decision and it results in a bad impact. That’s not the end of the story—that’s just the beginning of the story. You’ve got this thing that falls in your lap and you’ve got to grow with it into a good outcome…or an okay enough outcome.

AL: We have 350 employees, and I attempt to instill values and qualities in people so their decisions reflect our agency goals and values. I should be able to go out to one of our residential programs and see things that really do reflect values that I deem important. For example, one of the things I think is important is that you teach leaders how to subordinate themselves to others. Then they can teach the people they supervise, who have the privilege to work with their constituents, how to subordinate themselves. I think it’s important to avoid power-oriented interactions where we refuse to subordinate ourselves to others. That’s not what effective leaders do, and that’s not what I teach. What I say to leaders is, “I want you to practice subordinating yourselves and let people direct you as a resource.” Leaders can get very uncomfortable with that.

BRUCE: That’s so interesting, because we have heard Heidi and John talk about how much they use their rebellious spirit to thrive. They’re renegades at heart. For leaders to learn how to subordinate themselves, and then teach that to other people, seems to be in opposition to rebelliousness.

AL: My organization holds me accountable for that. I go and visit employees that I don’t know very well or don’t work directly with, and observe them to see whether or not they are comfortable with this style. It is an expectation in the company that you demonstrate the ability to subordinate yourself to constituents that you have the privilege to work with. If you can’t, you’re not going to be successful in our organization.

“there’s a role for positional authority. There’s a lot of good you can do with it—at some point you have to embrace it and understand it.”

Heidi

“The part of it that I find odd is, even when I’m not being the boss, to everybody else I am still the boss. It never stops…For those of you who watch the Sopranos, it’s like that episode where Tony realizes everybody has to laugh at his jokes because he’s the boss. Things like that are hard to tease out.”

John
MARTHA: I’m jumping on, because there is another side to this. Sometimes the very fact I have a leadership position causes people to consider my suggestions. Lots of times the ideas that I have are nothing fancy. I just figure I can use my authority to get people to believe that things are possible. We had a young person that the staff couldn’t get to articulate a goal. They had been trying for months. I said, “Okay, I’ll talk to him.” Well, I just asked him, “What would make your life better today?” He said, “Well, I’d like a place to live.” The staff nearly dropped on the floor. It wasn’t magic, but we were in the Director’s Office. That’s when authority can really be a useful tool.

JOHN: There is another kind of authority that can be useful—just stepping up to the plate and taking action. It’s funny, we’re in the middle of budget cuts and layoffs, and I’m getting creamed. But, at the same time, I am scrambling to find opportunities to do new things. When there is chaos, it’s time to make your move because people get paralyzed. There are openings to do things that aren’t available in more stable times.

BRUCE: Let’s change gears a little. I want to ask you to describe another kind of authority—the essential gift you’re bringing to the workplace. It’s really the primary gift you are bringing to all parts of your life, and work is just one place where it reveals itself. If I asked 50 people who know you, what would they say you bring to the show?

MARTHA: I think that what I do, more than anything else, is say to people, “I know this can work, I’ve seen it work.” To me, this is the one gift I’m really able to give.

MARCELO: What I bring is the ability to be subordinate myself and, at the same time, go against the man. If you can’t do that, how can you work the system within and change it? If I can pass that to my staff…

AL: I hope what people would say is that I am willing to lead.

HEIDI: My gift is to hold a vision and inspire people. I’ve got a vision of what could be, and I use inspirational moments with others to build it into a shared vision.

JOHN: I’m pretty confident about where I’m going. I think everybody knows that, aside from being the boss, I’m really confident about where I’m headed. I’m bringing everybody along. Not that they would fight…

BRUCE: I’m always struck by the tremendous desire good leaders have to keep learning. You can spot bad leaders in a second, because they are desperately trying to bluff everyone into believing that they’ve pretty much got their job figured out, and now their task is just to get everyone else to be competent. Each one of you, even though you are strong leaders, brings a humble recognition of how much there is for you to learn. Thank you for that.
Ways to Use Recovery-Oriented Leadership

ROL can be used in at least three primary ways: as a tool for leaders and other employees to discover and/or reaffirm their own passion and commitment to their work; as a platform for dialogue which increases understanding and compassion between citizens in recovery, organizations providing support, and the community; and as a framework for planning and action to increase quality of services. The following are examples of the variety of uses.

COULD YOU?

1. Integrate the four recovery principles as part of the framework for your strategic planning process.

2. Choose one of the recovery principles as a focus for organizational learning for the next year. Distribute readings, encourage dialogue, and sponsor workshops within this focus area.

3. Have Executive Team dialogues about each of the four recovery principles: what each person has learned about the principle, how it affects their performance at work, and what they are trying to learn about each one.

4. Move the above-mentioned dialogue to all levels of the organization, both within teams and between different levels or departments in the organization.

5. Create story-sharing and dialogue opportunities about each of the recovery principles between users of services and employees.

6. Co-sponsor, with a non–mental health organization, a community-wide dialogue for all citizens about one of the recovery principles.

7. Identify current behaviors and beliefs in your organization that conflict with the four recovery principles. What action can you take to further align the organization with recovery?

8. Create core belief statements about each of the four recovery principles. Post them in community gathering places within the organization.

9. Include the four principles as part of the individual planning process with service-users. Does the person have any goals, or want any help, in a particular principle area?

10. Have employees identify which of the four recovery principles they are most passionate about. Have those groups meet and discuss the sources of their passion, their mutual interests, and how they can help the organization deepen its commitment to that principle.