



*Connecticut Community for Addiction Recovery*

# Annual Summary of Activities

October 1, 2003 – September 30, 2004

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## RCSP Grant: Provision of Peer-to-Peer Recovery Support Services

September 2004 brought excellent news to CCAR - we were honored that our Recovery Community Services Program (RCSP) grant submission was awarded funding from the Center for Substance Abuse Treatment (CSAT), a division of the Substance Abuse and Mental Health Services Administration. CCAR, and White Bison, are the only two of 18 original grantees that received a Track III award. What follows is the Abstract from our application.

CCAR, a 501(c)(3) Recovery Community Organization, will provide a variety of effective peer-to-peer recovery support services that address the needs of local recovery communities. We will build "recovery capital"—individual, relational and community resources that promote recovery. To have maximum impact and to be exemplary stewards of our resources, we will take a capacity-focused, developmental approach. The main components of our project are to:

- Draw on our extensive recovery community organizing and mobilizing experience and build our capacity delivering an array of peer-to-peer recovery support services,
- Maintain the highly effective Windham Recovery Community Center model, and replicate it in eight other communities and to;
- Honor local recovery cultures and characteristics while developing specific action plans unique to each new Center as it develops.

Over the years as an original RCSP grantee in 1998, CCAR has become the authentic recovery voice in Connecticut and holds the trust of the entire recovery community. CCAR has secured solid credibility with policymakers, providers, families and other stakeholders statewide, so recovery is a player at the service planning table. CCAR has been able to rethink its infrastructure, entire leadership approach and community mobilization framework to be ready for sustaining peer-to-peer recovery support services. And CCAR has developed the relationships and partnerships to lead a peer community collaborative well.

The story of the Windham Recovery Community Center (WRCC) and the town's transformation from "Heroin Town to Recovery Town" shows how CCAR organized and mobilized a local recovery community, and how one recovery community took it upon itself to provide peer-to-peer recovery support. The WRCC owes its existence to the voices, concerns, ideas and solutions from the local recovery community. There is a critical need to have a physical presence in local communities that brings a recovery perspective. Individuals and families can go to the Center for information, education, support and resources. The Center is a safe and welcoming place to visit, to get recovery resources, training, education, support. Maybe have a simple cup of coffee with other recovering people, maybe find a shoulder to lean and cry on. The array and mix of services delivered from this Center is impressive, and continues to grow. Replicating this model eight more times over the four year grant period will dramatically increase the number, range and availability of peer-to-peer recovery support services.

In the first year of our grant (September 2004-September 2005), the peer-to-peer recovery support services model will reach a minimum of 370 men and women. As we build capacity through Center development we estimate that in Year 2 we'll reach 570, Year 3 – 820 and Year 4 -1150. The grand total of 2900 men and women targeted over the grant cycle reflects activity in nine fully-operational Recovery Community Centers strategically located across the state.

## Volunteer Management System

CCAR knows the power of one person reaching out to another. It happens in the recovery community all the time. Keeping with the theme of organizing our ability to care, and to add formality, legitimacy and integrity to our peer-to-peer services, CCAR has worked with two extremely knowledgeable consultants in the field of Volunteer Program Development and Management, Volunteer Administration and Workforce Engagement that have over fifty years combined experience. They have helped us develop a Volunteer Management System. The scope of the project included:

- Developing a Volunteer Management System to successfully recruit, screen, orient, train and maintain the formal volunteer program essential to CCAR's mission
- Collaborating with Connecticut Assets Network and Rapid Exposure to design software to track and quantify volunteer contributions and outcome measurements (persons served and benefits derived)
- Developing a risk management system that maximizes CCAR's ability to use volunteers effectively
- Training selected staff and volunteers to implement, maintain and evaluate many phases of our system

As a result, CCAR has in place a Volunteer Management System that can be rolled out in Recovery Community Centers as they are developed throughout the state.

## **Recovery Community Centers**

CCAR's award from CSAT's Recovery Community Services Program (RCSP) for peer-to-peer recovery support services will *partially fund* eight new Recovery Community Centers (RCCs) after four years. This network will give recovery a powerful presence throughout the state. RCCs will be modeled after our Windham Recovery Community Center, which has already become more successful than we could have imagined. The story of the Windham Recovery Community Center and the town's transformation from Heroin Town to Recovery Town shows how CCAR has organized and mobilized a local recovery community. In a short time, the Windham Recovery Community Center has become a model worth replicating.

Our Recovery Community Centers will be hope-filled, nurturing environments where recovery thrives and places from which to effectively organize, access and deliver an array of peer-to-peer support services. Through our experience with the Windham Recovery Community Center, we know that having a visible, prominent location makes it easier for people to drop in and ask for help. By being openly visible, the RCC helps reduce stigma associated with addiction and recovery and in turn "softens" the community for those initiating recovery. People walking into an RCC will be embraced, inspired and filled with hope from the trained staff and volunteers running the RCC and the other people who use it. Our RCCs will deliver a wide variety of individually tailored, culturally competent, peer-to-peer recovery support services.

### *The Case for Recovery Community Centers*

Since RCCs are a major component of our four-year plan, we have pulled from our latest quarterly report to CSAT the activity that occurred in the Windham Recovery Community Center from July 1, 2004 – September 30, 2004. Imagine this activity multiplied nine times! With even more enhancements!

During the quarter noted above, more than 1830 people came to the Windham Recovery Community Center either to attend a meeting, work on the computers, find out about resources or find comfort and safety with others living the same way. Each week the Windham Recovery Community Center hosts 4 recovery meetings, a family support group and an NA meeting. 17 members have donated 212 hours of volunteer time.

Since August, the WRCC helped 5 more people into detox. One of these incidents is described by WRCC Director Diane Potvin, "We had a pretty serious issue when someone called for help. Two others and I went to his house, found him in need of serious medical help and called an ambulance and got him to the emergency room. From there, he was Life-Starred to Hartford Hospital and stayed there for three weeks where he detoxed and dealt with many health issues. After we tried to help his cats (they both died) and overcame flea infestation, the man has now been sober for 7 weeks and attends recovery meetings here. I do not think however, I will be going to anyone else's house because I bit off more than I could chew, personally."

Members met at the WRCC to make posters for and march in the July 4<sup>th</sup> Boom Box Parade representing the recovery community. One of the treatment centers allowed their clients to walk if they chose to and a couple of them had a spiritual experience. Some of them, as they walked were aware that spectators were rooting for them saying, "Congratulations!" and "Way to go!" The event was on TV a few times and the commentators were very gracious to CCAR and recovery as people in recovery walked by their station.

The WRCC applied for and won a \$2000 grant to host a Woman's Recovery Retreat. They held 5 planning meetings, with several of the participants indicating this was their first time involved in this kind of planning process. The retreat was held October 15 – 17, 2004 in the Berkshires. The WRCC is seriously looking into sustainability. They established a fundraising committee and held 2 meetings.

Positive Faces, a local cable television show produced by the WRCC, aired 6 hour-long episodes on recovery. The show, in its 3<sup>rd</sup> year of production, has experienced ever-increasing popularity. This show is serving as a model for other cable television shows throughout Connecticut, for example Recovery Speaks in New Haven.

The WRCC agreed to host the local NA group that needed a place to hold their meeting. The NA group has been meeting since late August and attendance, with 45-50 people attending each meeting. To date all seems to be going well; NA members are very appreciative of such a nice place to come to.

Another incident that Diane reports, "One of our WRCC members relapsed and had not come to a CCAR chapter meeting for a few months. She later died in a car accident, (she was not driving) and the WRCC hosted many impromptu meetings to let people deal with the loss of someone that had meant so much to the recovery community for 8 years. We also hosted a memorial service for her to allow people a time to celebrate her life in recovery. This truly meant a lot to her family and

friends, with people coming up to me on many occasions telling me, "Thank you, thank you so much." I needed to remember all the lives she touched and the people she helped. This was so positive." We also had someone else relapse and while driving had an accident and we offered the same for her. Her husband called the Center to say "thank you." Me, personally, I believe that having the Center here was a blessing for the whole community...we were here to support each other and ourselves and for this I am grateful."

## Recovery Walks!



Mary Arsenault is this year's grand prizewinner of a Dell Computer for raising the most money as an individual for Recovery Walks! 2004

CCAR continues with its successful walks with Recovery Walks! 2004 held on Sunday, September 19<sup>th</sup> at Hartford's Bushnell Park. Despite the dreary forecast anticipated due to Hurricane Ivan, the weather subsided, the sun warmed our spirits and our hearts and the people came. The entertainment, food, music, bounce houses, magicians were great. We provided 20 buses from across the State of Connecticut allowing residents from 45 residential programs to participate and witness the healing power of recovery. There were an estimated 3800 participants (persons in recovery, family members, friends and allies) who walked for Recovery. We had at least 75 volunteers that contributed their time and energy to make this celebration a success. They registered 737 people, received 55 CCAR membership forms, and surveyed 380 people."

## Recovery Training Series

As a result of focus group input, CCAR launched its Recovery Training Series in May 2003 and finished the first phase in June 2004. A refreshing way to look at the Recovery Training Series, a peer recovery support service, is to think of it in terms of 'building recovery capital' as defined earlier. We have come to believe that CCAR is indeed, building recovery capital; people ARE learning; about themselves, about their relationships, about the community of which they are a part. CCAR is impressed and enthusiastic about the recovery community's response to our Recovery Training Series. We know our GPRA (Government Performance and Results Act) data supports our perception. Here are descriptions of the 2-hour training courses offered this past year:

### ***Getting Comfortable: The Nuts & Bolts of Health Relationships in Recovery***

This training is designed as an overview to provide some basic concepts, generates remarkable comments and the discussion is consistently honest, humorous, enthusiastic and at other times, serious. Very important changes happen in recovery. As we progress many of us learn we need to be patient when it comes to getting comfortable with healthy relationships. The heart, the hope and the power of recovery are about learning to take care of ourselves during the process of initiating and forming relationships. This training focused on developing skills such as learning to look for what is good for us, taking it slow, learning to enjoy and get comfortable with healthy relationships, and removing ourselves quickly from dysfunctional ones. This training was about being open to the lessons recovery.

### ***Organized Religion & 12-Step Recovery: Friends or Foes?***

This training brought two perspectives together that otherwise would rarely associate. In an established safe environment, honest open discussions thrive and we have seen personal epiphanies over and over. By expanding people's concepts of recovery, by people demonstrating different pathways to sustained recovery, we are increasing awareness and acceptance while helping to reduce internal stigma.

### ***Celebrating Recovery: Many Voices, Many Cultures, Many Journeys***

"The joy is in the journey" is a phrase often heard among people in recovery. First and foremost, this session is about celebrating the life giving and life affirming dimensions of recovery. The course acknowledges and explores that people celebrate recovery differently given their own background, journey and culture. By defining culture and discussing components of culture we began the process of appreciating these differences. This experience deepened with the use of storytelling rejoicing in the different ways we celebrate recovery

### ***Public Speaking: It Can Actually Be Fun!***

Year after year, public speaking is ranked as America's number one fear. Many of us realize, however, that we would like to become better public speakers as we put a voice and a face to recovery. This session explored the components of successful public speaking. Topics included tips for success, common mistakes and strategies for overcoming them, designing a format for presentations and the use of storytelling.

### ***The Next Steps: Petitions for Pardon***

This training offers a lot of information; some indicated they were saddened, frustrated and disappointed at how cumbersome the pardon process is in Connecticut. Some even wanted to begin advocating for changing the process. Most wanted to get started right away and begin working on their application. This training is intended for people who want to learn about the petition for pardon process in the State of Connecticut. It is intended for Non-Inmate potential petitioners and/or their supporters and provides a hands-on overview and walkthrough of the eligibility requirements. The actual form and affidavit is made available and an individual next step action plan is completed to guide participants through the process

### ***Healing Community: Connecting with Recovery Options***

Participants learned about Infoline, the different avenues people took to reach recovery and how to connect with local recovery resources. A lot of resource information was available and participants were comfortable in sharing their resources.

### ***From Isolation to Transformation: Supporting Women's Recovery Issues***

This training is intended for people who want to expand or improve the level of support that exists for women who are struggling with addiction and/or engaged in a recovery process. In this era of competition for scarce resources, individual and community recovery support efforts sensitive to the unique needs of women are needed. This session examines the effects of stereotypes, our own beliefs about women and addiction, factors that isolate women and pose barriers for access to services, recent changes in roles and the risks and benefits of women reaching out to other women.

## **Recovery Housing**

CCAR received word that we would receive funding from DMHAS to work with the recovery houses in Connecticut. In October 2004, CCAR hired a staff person, Cheryle Pacapelli, to coordinate and improve supportive housing in Connecticut. Cheryle has experience in the development and management of recovery houses and will provide the following services:

- Inventory recovery housing in the state
- Help to organize a group of interested recovery house managers to form regional or statewide organizations and/or coalitions
- Assist in setting minimum standards of requirements to open and operate recovery houses in order that they could help monitor themselves
- Hold periodic meetings to help facilitate managers getting to know each other and to share ideas
- Provide technical assistance and training to persons interested in starting up new recovery houses such as dealing with zoning restrictions, NIMBY (Not In My Back Yard), legal issues, etc.

As we look to open more Recovery Centers we feel this access to quality, recovery housing will be a tremendous peer service that we could offer those initiating and maintaining recovery.

## Recovery Resource Bank

*“Every single person has capacities, abilities and gifts. Living a good life depends on whether those capacities can be used, abilities expressed and gifts given. If they are, the person will be valued, feel powerful and well-connected to the people around them. And the community around the person will be more powerful because of the contribution the person is making.” --McKnight and Kretzmann, 1993.*

CCAR is working with the Connecticut Assets Network and Rapid Exposure to develop a comprehensive, cutting edge, web-based Recovery Resource Bank. Imagine all types of recovery support services at your fingertips! Since, the data is web-based all our RCCs would have access. This innovative database is fluid, dynamic and easily updated and has an incredible geo-mapping feature.

With its partners, CCAR will leverage, enhance and augment existing, but incomplete, directories and databases of recovery community assets. For example as mentioned above, CCAR has recently hired a Recovery Housing Coordinator who has two main job functions – to put together the recovery housing database and to work on establishing a housing coalition that will work on standards for their own group. We can picture a Recovery Housing database similar to a real estate listing complete with on-line photos of the house, recovery information about that house - things like number of beds, rent, type of recovery support (AA, NA, Christian, etc.). “Virtual” tours and up to the minute availability of beds are in later phases of our development.

## Recovery Asset Mapping Project (RAMP)

As referred to above, CCAR, in collaboration with Connecticut Assets Network has put together an innovative Recovery Assets Mapping Project (RAMP). With this project we will take the first step on a journey of discovery, connection and transformation not only for the local recovery community but for the entire community as well. We will discover resources and build capacity by organizing our “ability to care,” thus working smarter, not harder. This project, based on the work of Kretzman and McKnight, puts technology at the service of human and community development, where supportive relationship building is the driving force behind everything we do.

Currently, the Windham Recovery Community Center has taken on this project and has worked through the “discovery” phase. WRCC volunteers have conducted over 400 face-to-face surveys that captured the needs and concerns of individuals and organizations along with their skills, resources and opportunities. Through two surveys – one for individuals and one for organizations - we have developed a comprehensive picture of both needs and resources within Windham.

WRCC’s “connection” is underway; survey information is being entered into the Recovery Resource Bank, an interactive web-based database complete with a leading edge geo-mapping feature. This database allows us to match people’s needs with individual and community resources, viewing them in layers on the geo-maps. Having this information, and being able to manage it, will greatly assist us in developing meaningful peer-to-peer recovery support services.

The “transformation” phase is where Windham neighborhoods can experience social entrepreneurship. With the Recovery Resource Bank, they will now have some leverage. Imagine the recovery community being a force for positive change in the community at large. At a recent RAMP leadership meeting, a person in recovery summed up this way: “Imagine the problem child becoming the savior of the town!”

By piloting this project in a Recovery Community Organization, we will be able to illustrate its tremendous potential. Each area where assets are mapped will bring to that area's Recovery Resource Bank richness in culture and diversity and creative solutions previously unknown. By being involved, people in recovery have an opportunity to give back, enhance their own recovery, and build recovery capital.

## **Access to Recovery**

In the summer of 2004 Connecticut received notice that they had submitted a successful bid for the Access to Recovery funding. CCAR was a key contributor to this application. Charles Curie, Administrator SAMHSA visited Connecticut to give the "golf check" to the Governor. Phil Valentine, as Executive Director, was invited to this press conference, was invited to say a few words and subsequently interviewed by a major television station that aired the clip on the evening news. CCAR was also involved with two "think tank" meetings as the state began to work on implementing the program. A key component of the state's award is the provision of recovery support services; CCAR is hopeful to have a significant role.

## **Recovery TV**

"Positive Faces" is into its third successful year of production in Windham. This live public access show hosted and produced by Windham CCAR chapter members and Diane Potvin continues to have a major positive impact in showing recovery is alive and well in that part of the state. The show has been a major asset in building the recovery community organization in Windham, as well as gaining support for recovery initiatives. CCAR members and Terri Ferraro continue to produce and host the monthly "Recovery Speaks!" television show at Citizen's Television (CTV/Public Access) in New Haven. Many persons in the New Haven Community are calling in to participate in this live show. Felix Rivera in Hartford has also begun training and hopes to air Hartford's first show in January 2005.

## **CCAR Chapters**

### **Bridgeport / Norwalk Chapters:**

Peer Services Coordinator Michael Askew organizes and facilitates these Chapters. The Bridgeport Chapter meets the 3<sup>rd</sup> Tuesday of each month at the Burroughs Community Center, 2470 Fairfield Avenue from 7:00 to 8:30 p.m. The Norwalk Chapters meets the 2<sup>nd</sup> Wednesday of each month at N.E.O.N., 98 south Main Street from 6:30 to 8:00 p.m.

CCAR put an innovative approach into place with the hiring of part time Peer Services Coordinators for the following chapters.

### **Hartford Chapter:**

Peer Services Coordinator Felix Rivera organizes and facilitates the Hartford Chapter part-time which meets the last Wednesday of each month at the Kelvin Anderson Center, 2621 Main Street from 6:30 to 8:00 p.m.

### **New London Chapter:**

The New London Chapter was formerly under Diane Potvin's jurisdiction; however it was decided that Diane needed to devote all her time to the Windham Recovery Community Center. Kimberly

Turner-Haugabook was hired as Peer Services Coordinator for the New London Chapter. In addition to those duties, Kim also became the part-time Recovery Walks! Coordinator and Volunteer Coordinator working with John Shea.

**New Haven Chapter:**

Peer Services Coordinator Terriane Ferraro organizes and facilitates the New Haven Chapter part-time which meets the third Thursday of each month at The Consortium, 205 Whitney Avenue from 7:00 to 8:30 p.m.

**CCAR Time Line**

<b>CCAR's Organizing and Mobilizing Expertise</b>	
<b>1997</b>	CCAR holds Connecticut's first Recovering Community Organization meeting
<b>1998</b>	<ul style="list-style-type: none"> <li>• Connecticut Community for Addiction Recovery officially named</li> <li>• 5 founding members spoke at statewide CT Department of Mental Health and Addiction Services (DMHAS) conference, publicly for the first time putting a face on recovery, resulting in initial funding from DMHAS</li> <li>• Mailing list topped 100</li> <li>• Awarded an original CSAT Recovery Community Support Program (RCSP) grant</li> <li>• Awarded funding from DMHAS</li> </ul>
<b>1999</b>	<ul style="list-style-type: none"> <li>• 60 members attended 1<sup>st</sup> Legislative Day at State Capitol</li> <li>• 1<sup>st</sup> Board of Directors meeting held</li> <li>• 15 members spoke at CSAT Public Hearing in Hartford "Changing Conversation, A National Plan to Improve Substance Abuse Treatment"</li> <li>• 140 attended CCAR Conference "In Celebration of Recovery!"</li> <li>• 1<sup>st</sup> video "Putting a Face on Recovery" released</li> <li>• 5 people in recovery selected to serve on DMHAS State Advisory Board, 2 appointed by Governor</li> <li>• Recovery Support Services Concept Paper submitted to CSAT for conference grant</li> </ul>
<b>2000</b>	<ul style="list-style-type: none"> <li>• Co-presented with Advocacy Unlimited, a mental health advocacy organization, on the "Recovery Basic Premises and Recovery Core Values" (Note: these values ultimately served as the basis for the DMHAS Recovery-Oriented System of Care)</li> <li>• Hosted 2<sup>nd</sup> Legislative Day, over 100 people attended</li> <li>• Started "Legacies" support group for parents who had lost children to addiction</li> <li>• Hosted training – Racism of the Well-Intended, Slaying the Dragon</li> <li>• 700 attended first annual Recovery Walks! at Bushnell Park in Hartford</li> <li>• "Putting a Face on Recovery" video distributed to 700+</li> <li>• 1<sup>st</sup> edition of The Recovery Herald newsletter published and distributed to 6500+</li> <li>• 112 people attended 1<sup>st</sup> Annual Meeting &amp; Awards Dinner</li> </ul>
<b>2001</b>	<ul style="list-style-type: none"> <li>• 1<sup>st</sup> of 7 Chapters established giving CCAR local and regional presence</li> <li>• 200+ people attended 3<sup>rd</sup> Legislative Day, 36 legislators sponsored the event with 3 talking about their own recovery</li> <li>• Non-profit 501(c)3 status granted</li> <li>• 10,000+ Recovery Posters distributed nationwide</li> <li>• Website <a href="http://www.ccar-recovery.org">www.ccar-recovery.org</a> goes live</li> <li>• "Putting a Face on Recovery" video updated; 2000+ distributed nationwide</li> <li>• Awarded CSAT Recovery Community Support Program (RCSP) Track II grant</li> <li>• 2000+ participated in 2<sup>nd</sup> Recovery Walks! held 5 days after terrorist attack of 9/11</li> </ul>
<b>2002</b>	<ul style="list-style-type: none"> <li>• 16 members testified at Informational Forum at the invitation by CT Legislature Judiciary Committee issues relating to felony conviction and sustained recovery</li> <li>• 200+ people attended CCAR's trauma/recovery forum "Recovery Speaks in the Shadow of 9/11" in New London</li> <li>• Membership topped 2000</li> </ul>

<b>CCAR's Organizing and Mobilizing Expertise</b>	
<b>2003</b>	<ul style="list-style-type: none"> <li>• 3000+ participated in 3<sup>rd</sup> annual Recovery Walks! in Hartford</li> <li>• 200+ attended 2<sup>nd</sup> trauma/recovery forum in Bridgeport</li> <li>• Code of Ethics established</li> <li>• Shifted successfully from Recovery Community <i>Support</i> Program to Recovery Community <i>Services</i> Program</li> <li>• 1<sup>st</sup> of 42 trainings in the "Recovery Training Series" delivered</li> <li>• New video "Healing Power of Recover" completed</li> <li>• 3000+ participated in 4<sup>th</sup> annual Recovery Walks! in Hartford</li> <li>• Staff invited to "Innovator's Meeting: Strategic Planning for Peer Recovery Support Services" SAMHSA/CSAT Access to Recovery (ATR) Program</li> <li>• First audit for year ending June 30, 2003 completed and earned a non-qualified opinion</li> </ul>
<b>2004</b>	<ul style="list-style-type: none"> <li>• CCAR involved in development of state ATR proposal</li> <li>• 200+ people attended Grand Opening of Windham Recovery Community Center</li> <li>• First Family Support Group met in Windham Recovery Community Center</li> <li>• Transition of leadership to new Executive Director</li> <li>• Executive Director Co-chairs state team with DMHAS Commissioner at National Policy Academy on Co-Occurring Mental Health and Substance Abuse Disorders</li> <li>• Formal Volunteer Program implemented</li> <li>• Awarded CSAT Recovery Community Services Program (RCSP) Track III grant</li> </ul>

## CCAR Board of Directors as of November 9, 2004\*

Kenneth Aligata	President
Michael Burke	Vice President
Melanie Gass	Treasurer
Denise "Dee" Georgette	Secretary
Roberto Garcia	
Linda Guillorn	
Andriana Natale	
Phillip McNally	
Anton "Tony" Taschner	

\*if Slate of Candidates as presented at the Fifth Annual Meeting on November 9, 2004 is approved

## CCAR Staff

Phillip Valentine	Executive Director
John Shea	Director of Operations
Kimberly Turner-Haugabook	Peer Services Coordinator, New London Chapter Recovery Walks! Coordinator Volunteer Coordinator
Cheryle Pacapelli	Recovery Housing Coordinator
Pat Howard	Office Manager
Diane Potvin	Director Windham Recovery Community Center
Michael Askew	Peer Services Coordinator, Bridgeport & Norwalk Chapters
Terriane Ferraro	Peer Services Coordinator P/T, New Haven Chapter
Felix Rivera	Peer Services Coordinator P/T, Hartford Chapter
Yolibel "Yoly" Lebrón	Administrative Assistant
Renee Anderson	Administrative Assistant P/T, Windham RCC
Laurie Fresher	Office Assistant P/T

