Faith-based recovery
Transforming lives one inmate at a time

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“I would not be alive today if it were not for Celebrate Recovery.” That is a statement made by more than one individual who has attended Celebrate Recovery (CR) meetings while incarcerated at the Gallatin County Detention Center (GCDC). Since June 2013, Celebrate Recovery has been offered to inmates in the GCDC as a voluntary intervention program for recovery from addiction. Annual surveys reveal that three out of four (75 percent) inmates attended one or more of the 40 programs offered at the GCDC. A similar percentage found the programs helpful and plan to continue attending one or more programs in the community upon release. The GCDC employs a full-time re-entry coordinator who works one-on-one with inmates during incarceration to facilitate successful re-entry into the community and reduce recidivism.
Recovery matters

Recovery from addiction matters. Recovery without relapse matters. Why? Because relapse is a significant predictor of recidivism, not to mention future health problems and premature death. It has been reported that 85 percent of all inmates in jails and prisons across the United States have a substance abuse and addiction disorder. A total of 65 percent meet the strict diagnostic criteria for substance abuse and addiction diagnosis, according to the Diagnostic and Statistical Manual of Mental Disorders 4th Edition DSM-IV, plus an additional 20 percent were under the influence of alcohol or other drugs at the time of their offense. Sadly, only 11 percent of all inmates with a substance abuse and addiction disorder receive any treatment during incarceration. During the first two weeks after release, former inmates are at high risk for death – 12.7 times that of the general population – due to drug overdoses, cardiovascular disease, homicide and suicide. Addiction to drugs, alcohol and tobacco, plus suicides, constitute an epidemic in America that claims 77 lives every hour (Table 1). It is of paramount importance that effective addiction recovery interventions be implemented during incarceration and continues post-release.

Celebrate Recovery (CR)

Celebrate Recovery is a program founded by Pastor John Baker and his wife Cheryl of Saddleback Valley Community Church in Lake Forest, California. Pastor John joined Saddleback’s staff in 1990 as the pastor of recovery and small groups. With encouragement from Saddleback founder Pastor Rick Warren, Pastor Baker launched the program with the following summary statement:

“The vision for Celebrate Recovery is for the church to provide a safe place where families could find healing and restoration; where moms, dads, and their children of all ages could find freedom from their hurts, hang-ups and habits.”

The first meeting of CR was held at Saddleback Church on November 21, 1991, and 43 people attended. Once the word got out to other churches, requests for the CR curriculum began pouring in. In 1998, because of the increasing requests, Zondervan took over printing, publishing and distributing the CR participant’s guides and the leader’s guides. Today, the CR curriculum is published in 23 languages.

Celebrate Recovery Inside (CRI)

Celebrate Recovery Inside (CRI) is the prison and jail extension of CR. CRI was birthed in 1998 when a faith-based prison program in New Mexico named “Crossings” began to use CR at the Southern New Mexico Correctional Facility in Las Cruces. The program became very popular and it quickly grew to be used in five prisons in New Mexico. The New Mexico Department of Corrections became the first state corrections system to adopt CRI as part of their inmate treatment programs for addiction recovery. Currently, over 600 jails and prisons have adopted and implemented the CRI program.

The type of CRI program to be delivered in a correctional setting depends upon the time and space provided by the facility. There are three basic time-sensitive curriculum models of CRI:

- Short-Term/Jail Curriculum Model — 30-120 days incarceration.
- Long-Term Curriculum Model — 120 days plus incarceration.
- Peer-to-Peer Curriculum Model (Long term/short term).

Any of the aforementioned CRI curricula may be presented in a two-hour weekly session. To supplement the three curricula, CRI has a re-entry model for those who are transitioning back into their community under correctional supervision. This model provides the participant with a sponsor and an accountability support team. In addition, CRI has a family ministry model that reaches out to family members and encourages their involvement in the re-entry process. The CR and CRI ministries are
essentially the same program, targeting different populations. Through CR (local churches) and CRI (jails and prisons), lives are changed as experiences, strengths and hopes are shared with one another. Whether in churches or correctional settings, programs are “group-based” and all groups are gender-specific. There are no online CR or CRI groups, only face-to-face group meetings. In addition, CR and CRI are not advertised per se but are promoted largely by personal testimonies from those on the road to recovery, living a transformed life and joyfully sharing their experience with others by word-of-mouth.

**Hallmarks of CR/CRI ministries**

There are a number of aspects that make CR/CRI Ministries one of the most effective and unique transitional programs for inmates re-entering the community. First and foremost, CR/CRI groups are led by volunteer leaders who are in recovery themselves. Leaders must have completed a continuous year of sobriety in their recovery area, completed a CR Step Study, be in good standing as a consistent healthy attendee of a CR group and approved by the Ministry & TEAM leadership. Several special training modules cover all aspects of running an authentic CR program outlining the “DNA” of CR, which can bring about a life changing recovery. Leaders are encouraged to use the CR study bible that corresponds directly to the CR curriculum. All volunteers are held accountable for maintaining their recovery, adhering to CR guidelines, observing strict confidentiality regarding information shared that is of a personal or sensitive nature.

Table 1: Preventable premature deaths in the US

<table>
<thead>
<tr>
<th>Cause</th>
<th>Deaths per Year</th>
<th>Deaths per Day</th>
<th>Population Affected</th>
<th>Health Care Costs</th>
<th>Overall Costs</th>
<th>Reference(s)</th>
</tr>
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<tbody>
<tr>
<td>Drug Overdoses</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Illicit Drugs</td>
<td>22,000</td>
<td>60</td>
<td>28.6 million</td>
<td>$11 Billion</td>
<td>$216 Billion</td>
<td><a href="https://www.drugabuse.gov/related-topics/">https://www.drugabuse.gov/related-topics/</a></td>
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<tr>
<td>Opioids</td>
<td>42,000</td>
<td>115</td>
<td>2.1 million</td>
<td>$26 Billion</td>
<td></td>
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<tr>
<td></td>
<td>64,000</td>
<td>175</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Suicides</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<td>Completed</td>
<td>45,000</td>
<td>123</td>
<td>&gt;1.1 million</td>
<td>$69 Billion</td>
<td>$24.5 Billion</td>
<td><a href="http://www.wefaceittogether.org/it-s-a-disease/">http://www.wefaceittogether.org/it-s-a-disease/</a></td>
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<tr>
<td>(Attempts)</td>
<td>1,125,000</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>costs-of-addiction</td>
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<tr>
<td></td>
<td>123</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td><a href="https://afsp.org/about-suicide/suicide-statistics/">https://afsp.org/about-suicide/suicide-statistics/</a></td>
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<tr>
<td>Alcohol</td>
<td>88,000</td>
<td>241</td>
<td>136.7 million</td>
<td>$27 Billion</td>
<td>$249 Billion</td>
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<tr>
<td>Tobacco</td>
<td>480,000</td>
<td>1,315</td>
<td>51.3 million</td>
<td>$168 Billion</td>
<td>$300 Billion</td>
<td>costs-of-addiction</td>
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<td></td>
<td></td>
<td></td>
<td>cigarette smokers</td>
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<td><a href="https://www.drugabuse.gov/related-topics/">https://www.drugabuse.gov/related-topics/</a></td>
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<tr>
<td>Totals</td>
<td>677,000*</td>
<td>1,854**</td>
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<td></td>
<td>$858.5 Billion</td>
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* Does not include 17,793 deaths due to homicides and 146,571 deaths due to unintentional injuries (National Center for Health Statistics, Center for Disease Control and Prevention) https://www.cdc.gov/nchs/fastats/accidental-injury.htm

** Approximately 77 lives lost per hour, 24/7
avoiding critical comments and providing encouragement and prayers on a regular basis. Volunteer leaders do not teach from a position of superiority, but rather as a fellow member in recovery, healing from their own addiction(s) and brokenness.

**Partnership with a purpose**

In January 2005, Saddleback pastor Rick Warren and Prison Fellowship (PF) founder Charles Colson met at the National Prayer Breakfast in Washington, D.C. They talked about how their programs could collaborate to address addiction recovery by using CR’s power to open doors of a vast number of churches to addiction recovery programs and PF’s large mission field in America’s prisons. Founded in 1976 by Colson, PF had grown into the nation’s largest Christian nonprofit serving prisoners, former prisoners and their families in addition to being a leading advocate for criminal justice reform. Currently, CR is in partnership with PF adding CRI programs in prisons where PF has a presence. It is projected that by the end of 2018, CRI programs will be offered as an addiction recovery intervention in approximately 700 correctional facilities across America.

**Role of chaplains**

Correctional chaplains are strategically located to initiate and facilitate CRI/CR programs and meetings. For those who have been incarcerated because of addiction problems, CR and CRI provide a hands-on, compassionate continuity of recovery care, bridging the transition back into the community from a correctional facility. Correctional chaplains can play a key role in facilitating faith-based reintegration into the community by working with local pastors and family members. Currently, approximately 30,000 churches offer weekly CR meetings. In addition, there is an opportunity for the family of an incarcerated individual to receive help as they become involved in CR programs at the local level during and after their loved one’s incarceration.

**Becoming the person God intended**

Celebrate Recovery Inside is the administrative arm of CR for jails and prisons. There are CR initiatives adapted for other target populations working on recovery – Native nations, mental health, teens (The Landing), youth (Celebration Place) and university/college students. The overall goal of CR is to instill lasting recovery while maintaining the trademark guidelines and unique CR “DNA,” regardless of the population served.

CR covers a broad spectrum of hurts, hang-ups and addictive habits, from co-dependent relationships to eating disorders, tobacco addiction, sexual addiction, pornography addiction, victims of sexual and/or physical abuse and those suffering from post-traumatic stress disorder. CR and CRI are holistic ministries that deal with the whole person. For example, a person may have both alcohol and drug addictions as well as struggle with sexual addiction, difficulty in overcoming a history of physical or sexual abuse or anger and co-dependency issues all at the same time. All such issues are addressed with CR and CRI through compassionate fellowship and celebration of Christ’s healing power in the lives of people as they work their way along the road to recovery to become the person God created them to be.

**Acknowledgements**

The authors wish to thankfully acknowledge the review, suggestions and input from Pastor Danny Duchene, National Director of CRI; Pastor John Baker, founder of CR and CRI; Vance Drum, D.Min., retired Director of Chaplaincy Operations, Texas Department of Criminal Justice; and Kent Whitaker, CRI Northwest Region Lead.

**ENDNOTES**


For more information about CR, go to: http://www.celebraterecovery.com/
For more information about CRI go to: http://www.cr-inside.org/