Protect Virginia's Office of Recovery Services (ORS)

Preserve Peer Leadership — Protect Recovery Voice

What's at Stake?

The Virginia Department of Behavioral Health and Developmental Services (DBHDS) is reorganizing its internal framework. This includes dissolving the Office of Recovery Services (ORS) and redistributing its team into less prominent positions within adult mental health and substance use divisions. This shift threatens the core mission of DBHDS: "Supporting individuals by promoting recovery, self-determination, and wellness in all aspects of life." ORS has been a national model for elevating peer support, lived experience, and trauma-informed care. Eliminating its autonomy contradicts DBHDS's own vision of "a life of possibilities for all Virginians."

Why ORS Matters:

- Created over a decade ago to embed the voice of lived experience into Virginia's behavioral health system
- When ORS was formally established in 2015, it reported directly to the DBHDS Commissioner
- Oversees training and support to hundreds of Certified Peer Recovery Specialists (CPRS)
- Ensures trauma-informed, recovery-oriented practices at all levels of service delivery
- · Bridges policy and community experience to improve outcomes for individuals and families

The Harm of Restructuring:

- Peer voices become marginalized in policy decisions (SAMHSA, 2014)
- Trauma-informed culture deteriorates without visible leadership (CHCS, 2021)
- Trust and engagement decrease among individuals and families seeking services (National Council, 2020)

A National Call to Action:

Virginia's restructuring contradicts best practices and undermines the intent of the Peer Support Act, a bipartisan federal bill introduced by Senator Tim Kaine. The bill recognizes peer specialists as essential to modern behavioral health systems and calls for formal inclusion in public policy.

The Peer Support Act directs the federal SAMHSA Office of Recovery to provide guidance, technical assistance, and oversight to ensure full integration of peer services and lived experience across systems.

Virginia must not regress. We must preserve and elevate ORS.

Our Requests to Virginia Leaders:

- Keep ORS autonomous with direct reporting to the Commissioner
- Establish dotted-line relationships to all DBHDS divisions—including Mental Health, Substance Use, Child & Family, Housing, and Crisis Services
- Publicly recommit to recovery, peer voice, and trauma-informed leadership

Take Action Today:

- Sign and share the petition: https://chng.it/NDnN9NnNG7
- Watch real conversations with DBHDS officials: https://youtu.be/pfVvp-FDBcw
- Join the conversation via petition comments to connect with advocates

#SaveORS | #NothingAboutUsWithoutUs | #RecoveryVoiceMatters

Sources:

- SAMHSA (2014). SAMHSA's Concept of Trauma and Guidance for a Trauma-Informed Approach.
- Center for Health Care Strategies (2021). Advancing Trauma-Informed Care.
- National Council for Mental Wellbeing (2020). Peer Support in Behavioral Health Care.
- U.S. Senate (2023). Peer Support Act (introduced by Sen. Tim Kaine)