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Abstract

Recovery capital has been defined as the breadth and depth of internal and external resources available to individuals to support their recovery journey. It is seen as a strengths-based phenomenon involving the dynamic growth across three domains – personal, social and community. In this paper we argue that the primary model of growth is ‘outside-in’ and so, particularly for those individuals with low (or negative) levels of baseline personal/family and social capital and high levels of problem severity/complexity/chronicity, the starting point for intervention is through community capital – those resources and assets that create the conditions for social and then personal capital growth. In this paper, we outline a conceptual framework for how this happens, using the example of Recovery Oriented Systems of Care and Inclusive Recovery Cities to demonstrate not only how this approach can create the conditions for individuals to grow their recovery capital but that the ultimate aim is to contribute to overall community wellbeing through creating a model of ‘reciprocal altruism’ and building collective efficacy across communities and across diverse cultural contexts. We supplement this with some examples from Middlesbrough, the first UK Inclusive Recovery City.