



**Mini-Grant
Request for Applications (RFA)
January 2025**



YOUTH RECOVERY CT MINI-GRANT OPPORTUNITY

Brief Summary

Youth Recovery CT is currently accepting applications for five new organizations to join the statewide Youth Recovery CT Grantee Network. Each of the selected sites will receive up to \$10,000 in funding to establish and maintain:

1. A weekly SMART Recovery meeting for youth (ages 16-18).
2. A monthly Alternative Peer Group (APG) activity specifically for youth (ages 16-18). APGs may include families/guardians and/or recovery allies, however the primary intention must be to create an intentional peer support space for youth in recovery.

Awarded organizations will become members of the statewide Youth Recovery CT Network. Network members receive free SMART Recovery facilitator training for two staff members, ongoing technical assistance, a monthly newsletter, networking opportunities, assistance with promoting their SMART Recovery meetings and APGs, and may become eligible for future sustainability funding. The deadline for completed applications is Friday, January 24, 2025.

Background

Nationally and in Connecticut, the development and implementation of statewide systems for youth substance use recovery support lag behind those for adults with substance use or mental health disorders. The Youth Recovery CT initiative is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA) through the Connecticut Department of Mental Health and Addiction Services (DMHAS). DMHAS has contracted with the Connecticut Department of Children and Families (DCF) to implement a statewide substance use recovery support system specifically for youth aged 16-24 years. DCF has contracted with Wheeler to administer this initiative.

The goals of the Statewide Youth Recovery Network are to increase youth and family involvement in addressing substance use disorders in Connecticut, reduce stigma associated with substance use problems, and increase options and access to recovery supports for young people and their families.

SMART Recovery is the leading, evidence-informed approach to overcoming addictive behaviors and leading a balanced life. Alternative Peer Groups (APGs) are positive, facilitated, safe, and supportive groups for youth to engage in fun, substance-free, pro-social activities together and may serve as an introduction to the recovery community.

Eligible Applicants

Eligible applicants are private and public non-profits in Connecticut, including but not limited to community-based organizations, schools or school districts, healthcare agencies, libraries, youth service

bureaus, and faith-based organizations. Preference will be given to organizations that have never received CROSS or Youth Recovery CT mini-grant funding.

Funding Period

February 15, 2025 - September 15, 2025. The intention of this funding is to assist programs in developing their capacity to provide sustainable recovery supports for youth and to onboard with the Youth Recovery CT network. Youth Recovery CT Network members may be eligible for future opportunities to apply for funding to support their SMART Recovery meeting and APG efforts.

Submission and Award Dates

- Proposal submission deadline: Friday, January 24, 2025, 4:00 PM
- Awards announced: Friday, January 31, 2025

Deliverables

All awarded agencies will be required to:

- Facilitate and host one weekly SMART Recovery meeting for youth (ages 16-18).
- Offer a monthly APG prosocial activity for youth (ages 16-18). APGs may include families/guardians and/or recovery allies, however the primary intention must be to create an intentional peer support space for youth in recovery.
- Collect and report participation, satisfaction, GPRA, and budget data as requested by Wheeler.
- Participate in monthly Youth Recovery CT Network meetings, currently held virtually on the first Wednesday of each month at 9 AM.
- Provide a final report with measured goals and outcomes, developed in partnership with Youth Recovery CT and Wheeler, along with final expenses by September 29, 2025.

Application Guidelines

Proposals must include:

- Application face sheet
- Work plan
- Budget
- Project narrative (three pages maximum) detailing:
 - The organization's qualifications and experience working with youth (ages 16-18). Please note that any requests for exceptions to the age requirement for SMART Recovery meetings and APGs will be considered on a case-by-case basis.

- Plans for starting and sustaining the weekly SMART Recovery group, including engagement and retention strategies and proposed facilitator(s) name(s) and qualifications.
- Plans for creating monthly, engaging APG activities that support youth in recovery. Possible activities could include but are not limited to substance free social events such as self-care activities, game nights, sports events, concerts, karaoke, dances, amusement parks, bowling, mini-golf, biking, yoga, mindfulness, talent shows, exercise groups, field trips, and skill-building workshops.
- A specific, detailed plan for sustainability for SMART Recovery meetings and APG activities beyond the start-up funding period.

The application packet, consisting of the application face sheet, work plan, budget, and project narrative, must be emailed to lczeppieri@wheelerclinic.org or delivered to the address below no later than the stated deadline of Friday, January 24, 2025, 4:00 PM. Any application packets that arrive after the deadline will not be considered for funding.

Laura Zeppieri, MS, LPC, LADC, AADC, ICOGS
 Connecticut Center for Prevention, Wellness and Recovery
 Wheeler Clinic
 334 Farmington Avenue
 Plainville, CT 06062

A committee established by Wheeler's Connecticut Center for Prevention, Wellness and Recovery will review and approve proposals. The grantee must agree and warrant that in the performance of this contract they will not discriminate or permit discrimination against any person or group of persons on the grounds of race, color, religious creed, age, marital status, national origin, gender, mental impairment or physical disability, including, but not limited to blindness, unless it is shown by such grantee that such disability prevents performance of the work involved, in any manner prohibited by the laws of the United States or of the State of Connecticut.

Youth Recovery CT MINI-GRANT RFA - PROPOSAL FACE PAGE

Date _____

Organization Name _____

Federal Tax ID# _____

Address _____

City _____ **State** _____ **Zip Code** _____

Contact Name _____

Contact Title _____

Phone _____ **Fax** _____

Email Address _____

Town/City/Region Served by Proposed Services _____

Age Group(s) Served by Proposed Services _____

Name of Authorized Official/Administrator _____

Title of Authorized Official/Administrator _____

Signature of Authorized Official/Administrator

_____ **Date** _____

Youth Recovery CT RFA Narrative (3 page maximum)

Youth Recovery CT Mini-Grant RFA Budget

Applicant Name:	
Item	Amount
TOTAL BUDGET REQUESTED	\$10,000

YouthRecoveryCT Mini-Grant RFA Application		Work Plan	
Organization:		Project Lead:	
GOAL:			
Activity	Staff Responsible	Target Completion Date	Measured Goals And Outcomes