

RELATIONAL RECOVERY IN MENTAL HEALTH AND ADDICTION

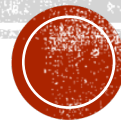
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EARLY SUCCESSES OF THE RECOVERY MOVEMENT

- Recovery has been adopted as the overarching aim of mental health care in a growing number of countries
- Peer support has virtually exploded across the country (30 states now bill Medicaid for peer support; the VA has hired over 1,200 peer staff alone in the US: in Norway 152 peer staff employed in the services)
- Person-centered recovery planning is being implemented to extend the benefits of care beyond symptom reduction to a life in the community
- Restraint and seclusion use has been reduced significantly
- People are no longer being told to abandon all hope.



FIRST, A PROBLEMATIC DEFINITION

“A deeply personal, unique process of changing one’s attitudes, values, feelings, goals, skills, and roles. It is a way of living a satisfying, hopeful, and contributing life even with limitations caused by the illness. Recovery involves the development of new meaning and purpose in one’s life as one grows beyond the catastrophic effects of mental illness” – Bill Anthony, 1993.

Anthony, W.A. (1993). Recovery from mental illness: The guiding vision of the mental health service system in the 1990s. Psychosocial Rehabilitation Journal, 16(4), 11-23.



KEY DEFINITIONS

- ❑ **Recovery** involves a process of restoring a positive sense of identity and meaningful sense of belonging apart from one’s condition while rebuilding a life despite or within the limitations imposed by that condition.
- ❑ **Recovery-oriented care** identifies and builds upon each individual’s assets, strengths, and areas of health and competence to support the person in achieving a sense of mastery over his or her condition while regaining a meaningful, constructive, sense of membership in the broader community.



RECOVERY IN THE BIN

- This User Led group is for MH Survivors and Supporters who are fed up with the way co-opted 'recovery' is being used to discipline and control those who are trying to find a place in the world, to live as they wish, trying to deal with the very real mental distress they encounter on a daily basis. We believe in human rights and social justice!
- <https://recoveryinthebin.org/>



- **Recovery is not (just) an individual journey**

▪ **RELATIONAL RECOVERY**

- Relational beings
 - Social justice
 - Relational hope
 - Relational ethics



GUIDING PRINCIPLES OF RELATIONAL RECOVERY

- *Recovery emerges from hope (relational hope)*
- *Recovery is person- and relational driven*
- *Recovery occurs via many pathways*
- *Recovery is holistic*
- *Recovery is supported by peers and allies*
- *Recovery is supported through relationship and social networks*
- *Recovery is culturally-based and influenced*
- *Recovery is supported by addressing trauma*
- *Recovery involves individual, family, and community strengths and responsibility*
- *Recovery is based on respect*



PERSONS WITH LIVED EXPERIENCE OF MENTAL HEALTH PROBLEMS SAY:

- Medications nor psychotherapy are on the top list of what supports their process of recovery



LIFE IS NOT AN OUTCOME

- Many people with serious mental illnesses will recover **from** the disorder over time (but it may take years)
- Many other people will learn how to manage and lead a safe, dignified, and gratifying life **with** the disorder in the community
- Learning how to live with the disorder is important when the illness will not go away and may contribute to it remitting



TWO DIFFERENT FORMS OF “RECOVERY” IN RELATION TO SERIOUS MENTAL ILLNESSES

Clinical, Symptomatic, or Functional Recovery (or remission)

Human and Disability Rights, Independent Living Movement (self-determination)



TENSIONS

- Recovery is what happens in the community, not the hospital or clinic.
- People are too acutely ill to talk about recovery in the hospital.
- Recovery doesn't become relevant until after treatment is effective.
- Recovery services are provided by people with less professional training than clinicians (e.g., peer staff). Clinicians are only trained and paid to treat illnesses.



IMPLICATIONS

- ◆ Recovery is not something that anybody else can do for the person.
- ◆ Recovery is what the person with the mental illness does to manage his or her condition and reclaim his or her life in relationship to oneself and others.
- ◆ The most health care practitioners can do is offer recovery-oriented care in support of the person's efforts toward his or her recovery and enhance the person's access to opportunities and resources to learn how to manage his or her condition and pursue his or her own hopes, dreams, and aspirations.



IMPLICATIONS, CONTINUED

Rather than look at what we can do to promote recovery, we will look first to what people need to do in order to pursue recovery and then work backward to our role as practitioner or supporter in relationships.



HOW DO YOU HELP A PERSON 'RE-LEARN' TO BE A PERSON?

- First and foremost, by treating them as if they are one already and always have been (through micro-affirmations)
- By not perpetuating the culture and practices which contributed to their losing their sense of being a person to begin with. (avoiding micro-aggressions)
- By not making decisions for them, doing things to them, or doing things for them without asking (or at least informing or explaining what you are doing and why).



GUIDING PRINCIPLES

Demonstrate and convey respect for the person's dignity and worth as a fellow human being.

Common courtesy works because it's common; it's something every human being gets just because they're human. Things like saying "excuse me" when you reach over someone to reach for a piece of paper, like saying "God bless you" when someone sneezes, things like asking you if you'd like some water when you get up to get some for yourself. It's basic, but it means so much to someone who's been treated like an unhuman for decades. It's basic, and it may seem trivial to you, but to people like me, it's water to a dying parched husk of a person. Interactions like the[se] ... have more positive impact on the consumer than any elaborate treatment plan ever could. (Amy Johnson)



GUIDING PRINCIPLES

- **Ensure the person's safety and other basic needs are being addressed and offer him or her hope that things can get better.**

- Be a carrier and conveyor of hope, offer "surrogate hope"
(Patricia Deegan)

- *"You need a little love in your life and some food in your stomach before you can hold still for some damn fool's lecture about how to behave"*

(Billie Holiday)

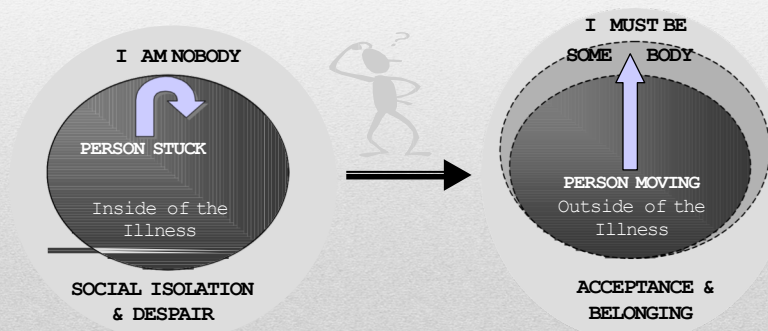


GUIDING PRINCIPLES

- **Strive to reach, access, identify, and promote the person's sense of self in relation to one self and others**
- **Elicit and reinforce the person's passions, interests, and strengths. Help the person to rediscover who he or she is and can be.**
- **Involve the person in everything you do for him or her, including explaining decisions, actions, etc. and their basis. Do psychotherapy with, not to, the person.**



ESTABLISHING A SELF OUTSIDE OF THE ILLNESS IN RELATIONSHIPS AND SOCIETY



HOW RECOVERY BECOMES A POLITICAL FORCE AND POSSIBLE FOR EVERYONE

- A person can be “in recovery” regardless of the duration and severity of the ***disability***.
- This is the right of every citizen.
- People do not have to wait to recover from the disorder in order to reclaim citizenship.
- Rather, reclaiming citizenship promotes recovery.



ONE EXAMPLE

The right of Social Inclusion: People with mental illness are entitled to a life in the community *first*, as the foundation for recovery—not as its reward. For example,



It is very hard to recover if you don't have a place to live (a home). Housing cannot be contingent on compliance or improvement in one's condition (“*Housing First*” 80% success).



Another Example

While work may, in fact, be stressful for some people with some mental illnesses some of the time ...



Being out of work and poor is sure to be stressful for most people with most mental illnesses most of the time (And working decreases symptoms)



KEY QUESTION

Can individuals become integrated into their communities through individual means? (e.g., IPS)

--or--

Does it perhaps take social means to promote social inclusion?



CHALLENGES AND CAUTIONS

- Avoid segregation in artificial forms of community
- Offer opportunities for people to develop valued social roles beyond their disabilities and illness-related identities
- Build on strengths and cultivate an ambition for a meaningful life
- Make sure people feel welcomed in the broader community

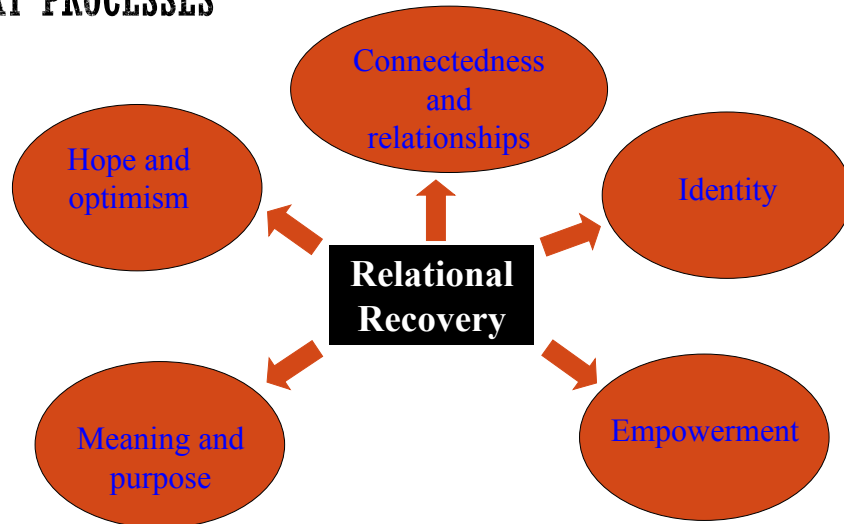


RELATIONAL RECOVERY

- **Being supported by others:** other people have to value me beyond my being a patient
- **Becoming involved in meaningful activities together with others:** I have to feel welcome and accepted in social, recreational, educational, or vocational activities
- **Overcoming stigma:** I need to no longer be discriminated against due to having a mental illness
- **Becoming an empowered citizen:** I need to have my voice and actions noticed by others



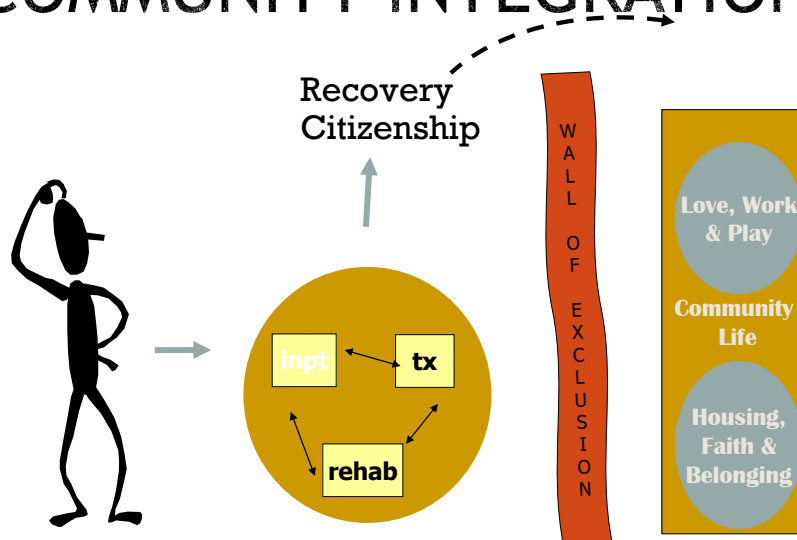
RECOVERY PROCESSES



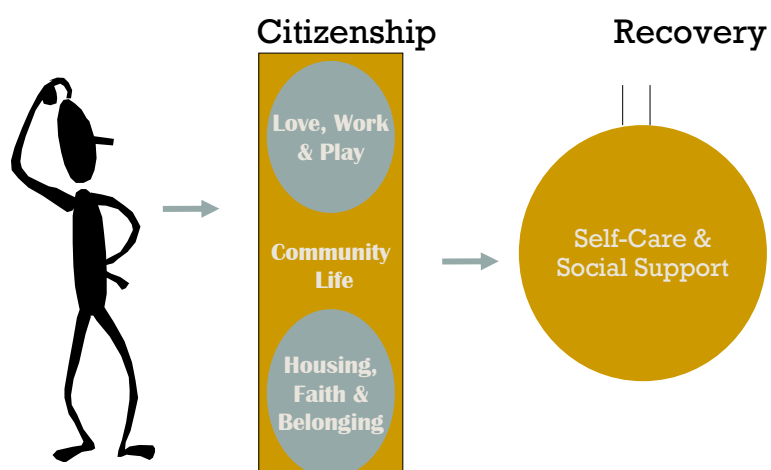
Leamy M, Bird V, Le Boutillier C, Williams J, Slade M (2011)
A conceptual framework for personal recovery in mental health: systematic review and narrative synthesis,
 British Journal of Psychiatry, **199**, 445-452.

- Recovery may “happen” wherever the person happens to be at the moment.
- Recovery doesn’t come about through people talking about “recovery.”
- Recovery can happen inside or outside of treatment, and can provide a foundation for treatment to be effective – with or without professional help
- Everyone who provides care (services and/or supports) should be promoting recovery—it is the aim of all mental health care.

COMMUNITY INTEGRATION



COMMUNITY INCLUSION (RELATIONAL RECOVERY)



CIVIL RIGHTS AS FOUNDATIONAL TO RELATIONAL RECOVERY

"Where, after all, do universal human rights begin? In small places, close to home - so close and so small that they cannot be seen on any maps of the world. Yet they are the world of the individual person; the neighborhood he lives in; the school or college he attends; the factory, farm, or office where he works. Such are the places where every man, woman, and child seeks equal justice, equal opportunity, equal dignity without discrimination. Unless these rights have meaning there, they have little meaning anywhere. Without concerted citizen action to uphold them close to home, we shall look in vain for progress in the larger world."



Eleanor
Roosevelt
U.N. 1958



WHAT ARE THE IMPLICATIONS FOR PRACTICE?

- Persons with serious mental illnesses have the same right to be a citizen and live in the community as everyone else
- Persons with on-going mental illnesses, like others with disabilities, have the right to environmental modifications and supports to optimize access to community life



For the people that don't hear
the music....
....the dancer looks mad

▪ African saying



<https://vimeo.com/62705552>

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24:45



FORESIGHT FIVE WAYS TO RELATIONAL RECOVERY

- **Connect**
 - Connect with the people around you...Think of these as the cornerstones of your life and invest time in developing them.
- **Be active**
 - Go for a walk or run. Step outside. Exercising makes you feel good. Most importantly, discover a physical activity you enjoy.
- **Take notice...**
 - Be curious. Catch sight of the beautiful. Remark on the unusual. Be aware of the world and the relationships around you.
- **Keep learning...**
 - Try something new. Rediscover an old interest. Sign up for that course. Set a challenge you will enjoy achieving.
- **Give...**
 - Do something nice for a friend, or a stranger. Thank someone. Smile. Volunteer your time. Join a community group. Look out, as well as in.



RELATIONAL RECOVERY

“By helping others you’re not totally worthless. Like it’s a natural, human characteristic that if you’re able to help others than you’re worth something ... It’s essential to life for people to feel necessary... Giving something to someone else makes you feel worth something yourself.”

