



MENTAL HEALTH RECOVERY: WHAT HELPS & WHAT HINDERS

Nanette V. Larson, BA, CRSS

Deputy Director

Ambassador for Wellness & Recovery Services

IDHS/Division of Mental Health

TAKE HOME POINTS



- “First, do no harm.” – Hippocratic Oath
- “Don’t let the pressure exceed the pleasure.” – Joe Maddon
- “Culture eats strategy for breakfast.” – Peter Drucker
- “Sticks and stones may break my bones, but words can crush my spirit.” – Shellie Arnold



LANGUAGE MATTERS



YOUR WORDS
HAVE POWER

○ Having vs. Being

- **I have bipolar** vs. I am bipolar
- **He has schizophrenia** vs. he is schizophrenic
- **She has a mental illness** vs. she is mentally ill

○ Singular vs. Plural

- **Person with a mental illness** vs. the mentally ill
- **People with mental illnesses** vs. people with a mental illness



IT'S CLINICALLY CORRECT!

- Labels have the potential to:
 - Promote bias
 - Devalue others
 - Express negative attitudes
- Attentional / attitudinal biases can be acquired through the frequent use of certain words
- Person-first language adopted by the United Nations Convention on the Rights of Persons with Disabilities (2006)
- American Psychological Association adopted person-first language “to maintain integrity (worth) of all individuals as human beings... do not focus on the individual’s disabling or chronic condition” (2010)



The Power of Language and Labels: “The Mentally Ill” Vs. “People with Mental Illnesses.” (Journal of Counseling & Development; 2014)

TEN GUIDING PRINCIPLES OF RECOVERY



- **Hope**
- **Person-Driven**
- **Holistic**
- **Peer Support**
- **Many Pathways**
- Relational
- Culture
- Addresses Trauma
- Strengths/Responsibility
- Respect

- SAMHSA (2012)



DEFINING RECOVERY: SAMHSA

A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.



DEFINING RECOVERY: THE NEW FREEDOM COMMISSION

❖ The process in which persons are able to:

- Live
- Work
- Learn
- Participate fully
 - ...in their communities



RECOVERY DEFINED (NFC - PART 2)

- **For some** individuals recovery is the ability to live a fulfilling and productive life despite a disability.
- **For others**, recovery implies the reduction or complete remission of symptoms.
- Science has shown that having **hope** plays an integral role in an individual's recovery.





- Recovery emerges from hope.
- Hope is not “true” or “false.”
- Hope is motivational. It is the catalyst of the recovery process.
- Hope can be fostered by... *you!*





HOPE

WHAT HELPS

- Hopeful staff
- Role models
- Positive expectations
- Meaningful service choices

WHAT HINDERS

- Stigma, prejudice, discrimination
- Dreams, goals, desires demeaned
- Coercion
- Fostering dependency



PERSON-DRIVEN



- Self-determination and self-direction are the foundations for recovery
- Goals defined by the individual
 - Paths toward those goals also defined by the individual
- Informed decision making
- Dignity of risk





PERSON-DRIVEN

WHAT HELPS

- Making own choices (re: housing, finances, meds, etc.)
- Self-directed planning
- Role models
- Coordinated services across settings
- Wellness Recovery Action Plan (WRAP)

WHAT HINDERS

- Paternalistic orientation of the system
- Stereotyping, prejudice, discrimination, labeling
- Coercion



HOLISTIC

- Recovery is holistic.
- Encompasses an individual's whole life
 - Mind/emotions, body, spirit, community
- Services and supports should be integrated and coordinated
 - Housing, employment, education
 - Mental health and addictions treatment
 - Primary healthcare
 - Complementary & alternative services
 - Faith-based & spiritual supports
 - Community participation





HOLISTIC

WHAT HELPS

- Recovery-oriented system with vision of recovery
- Extending support beyond traditional boundaries
- Increased tolerance for diversity
- Whole Health Action Management (WHAM)

WHAT HINDERS

- Pathology-focused system
- Lack of information
- Lack of consumer voice on personal and system level



PEER SUPPORT

- Recovery is supported by peers and allies.
- Sharing of experiential knowledge and skills
- Sense of belonging
- Supportive relationships
- Valued roles
- Giving back



WHAT'S UNIQUE ABOUT PEER SUPPORT?



- The installation of hope through **positive self-disclosure**
- The **role-modeling** function to include
 - Self-care of one's illness
 - Negotiating daily life, not only with the illness, but also with
 - Little or no income
 - Unstable housing
 - Overcoming stigma, discrimination and other trauma
 - Negotiating the complex maze of the human service system
- The nature of the relationship, characterized by
 - Trust, understanding, and the **unique use of empathy** based on having been in the same shoes he or she is in now



PEER SUPPORT

WHAT HELPS

- Diverse models of peer support
- Role models
- Sharing common experiences

WHAT HINDERS

- Professional mistrust of peer support
- Limited leadership development opportunities
- Limited participation



RELATIONAL

- Recovery is supported through relationships and social networks.
- Hope, support & encouragement
- ***Healthy*** relationships lead to a greater sense of:
 - Belonging
 - Individuality
 - Empowerment
 - Autonomy
 - Social inclusion
 - Community participation





RELATIONAL

WHAT HELPS

- Volunteerism
- Faith communities
- Social choices
- Mutual support groups

WHAT HINDERS

- Stigma, prejudice, labeling, negative media portrayals
- Lack of social skills training



TAKE HOME POINTS

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- Ten Guiding Principles of Recovery

<http://content.samhsa.gov/ext/item?uri=/samhsa/content/item/10007447/10007447.pdf>

- Mental Health Recovery: What Helps & What Hinders?

<http://www.nasmhpd.org//sites/default/files//MHSIPReport%281%29.pdf>

- Peer Support Among Persons with Severe Mental Illnesses: A Review of Evidence & Experience

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3363389/>

CONTACT US...

- Nanette Larson (statewide)
- 309-346-2094, x407
- Nanette.Larson@illinois.gov

- Virginia Goldrick (Cook Co.)
- 773-794-5680
- Virginia.Goldrick@illinois.gov

