Finding Pathways to RECOVERY

PRESENTER VERSION

Finding Pathways to Recovery

The Western New York Care Coordination Program (WNYCCP) developed this video as a resource for people in the community, including care providers, administrators, people receiving services, their families, and their friends. *Finding Pathways to Recovery is* an introduction to a person-centered approach to mental health.

WNYCCP has been working with care providers in six counties to champion this new way of working with people as a means to create a recovery environment for people receiving services and to engage local communities in the recovery process.

This discussion guide will give you more information about the person-centered approach and let you know where to find additional information and support.

The Western New York Care Coordination Program

Training on Person-Centered Planning

For information on opportunities for training in person-centered planning, contact the Western New York Care Coordination Program.

Western New York Care Coordination Program
www.carecoordination.org
agorges@ccsi.org

WNY CCP
Western New York Care Coordination Program
Coordinated Care Services, Inc.
1099 Jay Street, Building J
Rochester, NY 14611-0053
585/613-7653
www.carecoordination.org

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Is recovery possible?

After a year of study…the Commission finds that recovery from mental illness is now a real possibility. The promise of the New Freedom Initiative—a life in the community for everyone—can be realized.

The President's New Freedom Commission, 2003

Traditionally, mental health care had a goal of "stabilizing" individuals. Stability in this sense often meant managing an individual's symptoms through continued medication and involvement in the mental health system.

The video *Finding Pathways to Recovery* explains the use of a person-centered approach. The goal of person-centered practices, tools, and planning is to help people with a diagnosis of mental illness truly recover.

Defining recovery

Definitions of recovery in clinical studies include elements such as…

- No current signs or symptoms of mental illness
- Relating well to family and friends
- Living and working in the community
- Developing meaningful social relationships

Other definitions of recovery focus on the meaning and value that it gives to individuals.

- **Patricia Deegan**, Ph.D. and psychiatric survivor
  "Recovery is a process, a way of life, an attitude, and a way of approaching the day's challenges. It is not a process for attempting to return to who the person was before."
- **William A. Anthony**, Ph.D.
  "Recovery is a continuous, deeply personal, individual effort that leads to growth, discovery, and the change of attitudes, values, goals, and perhaps roles."
- **Judi Chamberlain**, mental health advocate
  "One of the elements that makes recovery possible is the regaining of one's belief in oneself."

In *Finding Pathways to Recovery,* WNYCCP proposes the following definition…

Recovery is the process of attaining a life worth living as defined by the individuals interests, goals, hopes, and dreams, fulfilling a valued and respected role in society, with all the attendant rights, freedoms, and responsibilities.

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How is recovery different from stabilization?*

Stability		Recovery
Symptom reduction	→	Acquisition of life roles
Compliance is valued	→	Choice is encouraged
Provider expertise and control	→	Consumer-provider partnership
Focus on deficits	→	Focus on strengths
Low expectations	→	Hope and high expectations
Learned helplessness	→	Active participation
Protection from "failure"	→	Risk is supported
Stabilization is the goal	→	Recovery is the goal

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* Adapted from *Recovery through Integration, Support, & Empowerment*, University of Arizona

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Can people recover?

It is becoming accepted in the mental health community that recovery is not only possible, but that it should be the goal of mental health programs and providers. The National Institute of Mental Health has, in fact, published these figures for treatment successes:*

Panic disorders	80%
Bipolar disorders	80%
Major depression	65%
Schizophrenia	65%
Obsessive compulsive disorder	60%

A lesson from the video:

Benny was able to address and reduce many of the problems he was having and find greater personal satisfaction.

What were some signs toward recovery for Benny?

His decision to stop collecting TVs _____

Better relationship with his landlord _____

Citations from city stopped _____

Developed a different relationship with neighbors _____

WNYCCP has seen person-centered planning help many people who have received services. Here's another example.

Beverly's Story

Beverly was a mental health patient who for years dreamed of owning her own home. Although she had a case manager working with her, no one took her dream of home ownership seriously and, because of her financial situation, was forced to live in unsafe neighborhoods for years. For all this time—35 years—she kept a scrapbook of her dream home.

Ultimately, Beverly enrolled in WNYCCP. Her care coordinator listened to Beverly and together they set home ownership as a goal in her plan. In less than a year, Beverly was able to find a house that she likes and her coordinator was able to help her qualify to purchase the $30,000 home in a safe neighborhood.

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1099 Jay Street, Building J
Rochester, NY 14611-0053
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* Courtenay Harding, Ph.D., The Center for Human Resilience.

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What is A Person-Centered Approach?

When the person receiving services is at the center of the planning process, he or she is supported in defining and setting goals, determining community and other supports, and taking personal responsibility for his or her progress.

Person-Centered Practices…

- See the individual as the expert in his or her life
- Include significant others
- Identify hopes, capacities, interests, preferences, needs, and abilities
- Provide a systematic way to align resources with the person's goals

The Core Values of Person-Centeredness*

- A commitment to know and to deeply seek to understand the individual
- A conscious resolve to be of genuine service
- Openness to being guided by the person
- Willingness to struggle for difficult goals
- Willingness to stand by values that enhance the humanity and dignity of the person
- Flexibility, creativity, and openness to trying what might be possible; including innovation, experimentation, and unconventional solutions
- To look for the good in people and help bring it out

How is person-centered planning different from traditional planning?

Traditional treatment planning looked at the individual from a perspective of what he or she *wasn't* able to do—how he or she was lacking in an ability to function.

In person-centered planning, the focus is on *capacity*. The first step is looking at people's dreams and goals and their strengths and abilities to find ways that they can participate in the community—and their own recovery process. Ideally, a group of people who know and care about the person receiving services participate in the process.

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* Adapted from Michael Kendrick.

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In Traditional Planning Meetings…

- Experts run the process.
- Experts attempt to address health and safety, needs, symptoms.
- Traditional mental health supports are planned rather than regular community supports.
- Focus on compliance and reducing risk.
- Person has a limited role, if any.
- People who really know the person have limited role, if any.

In Person-Centered Planning Meetings…

- Purpose is to discover more about the person.
- Person identifies and invites people who really know them (friend, pastor, therapist, neighbor, etc.).
- Brainstorming on strengths, interests, important to/for.
- Systematic action-planning process driven by the person's goals and aligning people in their life as collaborators.
- Moves the entire group toward a realization of the person's desired lifestyle.

In a person-centered planning process, the individual is the driving force and director of the action. The care provider and the individual *collaborate* on goals—the vision of recovery—and how to get there.

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The Power of Choice

In the past, "treatment" often meant a prescriptive process and lack of an active role for the individual in creating the plan. Any attempt to disagree with the plan was ignored. This often led to "learned helplessness."

One of the biggest differences in a person-centered approach is the ability of individuals to choose the form their journey will take.

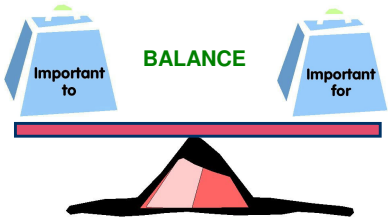
When people can choose and create their own plan, they can develop a clear vision that they are motivated to achieve.

Lesson from the video

What was Benny's motivation to act on the plan?

Because his care coordinator took Benny seriously, Benny was receptive to the idea that he might not be able to have a TV repair business and maybe should look elsewhere to make a contribution.

How does "choice" make a difference?



Choice changes the role of care providers by giving them responsibility to maintain a balance of what is important *to* the person receiving services and what is important *for* them. Care providers need to understand what is important *to* a person by actively listening to what he or she is "saying" with both words and actions.

At the same time, they must keep in mind what is important *for* a person regarding his or her health and safety as well as how to help the person become a valued member of the community.

Traditional care models often put too much emphasis on what's important *for* the individual, inhibiting the individual's own choices in their plan. This can also decrease the person's interest and motivation to make the plan a success. Person-centered plans strive to maintain a balance. They give equal priority to what is important to *and* what is important for the individual.

Lesson from the video

By looking at Benny's collection of TVs as more than a compulsion, his care coordinator was able to help Benny open up about his desire to have a TV repair business.

What was important *to* Benny?	What was important *for* Benny?

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How does a person-centered approach change the roles of people in the process?

A person-centered approach greatly changes the roles of everyone in the recovery process:

- Individuals receiving services
- Care providers (individuals and agencies)
- Family and friends of the individual
- The community

Lesson from the video

Benny's care coordinator became more involved with Benny, spending time with Benny in his environment and accompanying him on trips.

How would your role in recovery change in a person-centered process?

_____

_____

_____

_____

_____

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Does the language we use matter?

Another aspect of a person-centered approach is the language used to discuss the person and his or her situation. The language used in traditional planning often reinforces stereotypes and the idea that the person needs to change.

The use of other words can help reflect an acceptance of the individual's value and preferences on the road to recovery.

My client	→	People I work with
Referred to by diagnosis	→	Person
The mentally ill	→	People
Non-compliant	→	Not in agreement
Treatment resistant	→	Considering other options
Safety	→	Self-articulated risk

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What does transformation to a person-centered culture mean?

Instituting person-centered planning throughout the New York mental health system will require an ongoing cultural change. The accepted Hallmarks of Person-Centered Planning are:

- The person's activities, services, and supports are based upon his or her dreams, interests, preferences, and strengths
- The person and people important to the person are included in lifestyle planning and have the opportunity to exercise control and make informed decisions
- The person has meaningful choices, with decisions based on his or her experiences
- The person uses, when possible, natural and community supports
- Activities, supports, and services foster skill to achieve personal relationships, community inclusion, dignity, and respect
- The person's opportunities and experiences are maximized and flexibility is enhanced within existing regulatory and funding constraints
- Planning is collaborative, recurring, and involves an ongoing commitment to the person
- The person is satisfied with his or her activities, supports, and services

Relative to your own involvement in a recovery process—as a person receiving services, a family member or friend of someone receiving services, or a community member—do you recognize any of these hallmarks in current activities?

_____

_____

_____

What would you like to see/would mean the most to you?

_____

_____

How can you support this change?

_____

_____

_____

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If you are a professional mental health care provider:

What do you do now that promotes recovery and is consistent with person-centered planning?

_____

_____

_____

What should you keep doing?

_____

_____

_____

What should you stop doing?

_____

_____

_____

What organizational changes have to happen to support this change?

_____

_____

_____

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For more information…

Person-Centered Planning Websites

- Carol Blessing/Cornell University Person-Centered Planning Webpage
  www.personcenteredplanning.org
- Mayer Shevin's Webpage
  www.shevin.org
- Jack Pearpoint/Inclusion Press
  www.inclusion.com
- Michael Kendrick's Webpage
  www.kendrickconsulting.org
- Michael Smull /Essential Lifestyles Planning
  http://www.elpnet.net/index.html
- Articles by John O'Brien
  http://thechp.syr.edu/rsapub.htm
- Norman Kunc's Website
  http://www.normemma.com/
- Beth Mount /Personal Futures Planning
  http://www.capacityworks.com/
- Asset Based Community Development Institute
  http://www.northwestern.edu/ipr/abcd.html

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