Marianne Farkas
Professor, Boston University
Sept 17 2012
Brussels Belgium

### Psychosocial Rehabilitation Workshop

Copyright@Boston University,Farkas 2012

## What will we do today?

- What is already clear to you about PSR and Recovery?
- What is the contemporary vision of mental health, mental health care?
- What is PSR? What are the PSR approaches used in the field? How are they related/different?
- How can the delivery of PSR be integrated into a system of mental health care?

What is PSR from your point of view?

What is Recovery from your point of view?

Are they the same? Different?

### Summarizing where we are now: Contemporary vision of mental health care

## Historical Service Vision

- Deinstitutionalization
- Community Living
- Community Integration

## Service Vision of today

 Recovery from serious mental illnesses

### Understanding recovery

- So.. what is recovered?
  - A meaningful life

## Contemporary vision: Is Recovery just For Select Few? ....Longitudinal Studies

Study	Sample Size	Length	Improved
Bleuler,1972	206	23	53-68%
Huber et al., 1972	502	22	57%
Ciompi & Muller, 1976	289	37	53%
Tusuang et al.,1979	186	35	46%
Harding et al, 1987	269	32	62-68%
Ogawa et al, 1987	140	22.5	57%
DeSisto et al, 1995	269	35 Copyright@Boston	49% n University,Farkas 2012

Harding at al 1001

### Major Themes in Recovery Research

- Recovery is possible and has been documented for over 40 years
- Recovery can occur with or without professional intervention
- Recovery is multdimensional: involves resumption of valued roles, well being, physical health, reduction of symptoms, self esteem, interpersonal connections, etc.

# Major Themes in Recovery Research

- Recovery is a complex, non-linear process that can be described
- Recovery is a highly individualized process with multiple explanatory models used
- Recovery is often dependent upon a fragmented, distracted and often unavailable series of services

## Some Implications for mental health care

- Recovery is possible
- Simple maintenance is no longer acceptable
- Recovery can occur with/without professional intervention
- Leaving care may be a sign of health
- People have a level of expertise themselves

 Recovery is multidimensional

- Recovery has to be the vision for many different kinds of services—crisis intervention, case management, PSR, treatment etc.
- Reducing symptoms is not 2012 enough

# Some Implications for mental health care

- Recovery is based on a set of values
- It is not just what you do that makes a difference—but how you do it (ie. practice with evidence + values = best practice)
- Recovery is multidimensional
- Recovery has to be the vision for many different kinds of services—crisis intervention, case management, PSR, treatment etc.
- Reducing symptoms is not enough enough

# Value characteristics of recovery oriented services

 Focus on people and full human experience

not cases

Partnership

not compliance

Choice

o not coercion

Hopefulness

not helplessness

### **Role of Services**

•All should focus on one Recovery vision or goal

•Believe in person no matter what

Treatment Crisis Rehab Intervention Supported Education Rights Person's Protection Recovery Supported Vision **Employment** Peer Supported Support Housing Case Wellness Management Copyright@Boston University, raikas 2012

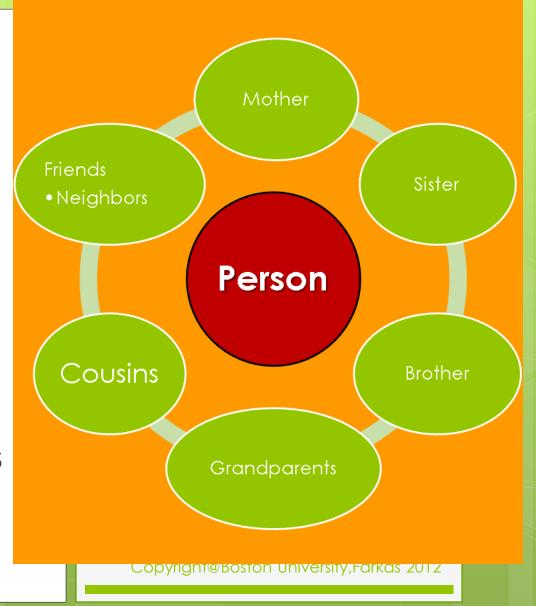
Farkas 2011

Role of Family, Friends, Community

Believe in person
& possibilities
even when person
does not

**Educate oneself** 

Role model, mentor, support as wanted & needed



### Overwhelmed By Disability

Stabilize symptoms and reduce distress.
Engage in services to determine if ready to consider future



Engage or re-engage in meaningful roles; build confidence, hope, motivation for recovery.



Living Beyond Disability

Support feelings of connection to self, to others, to living, learning, working roles; sense of meaning, purpose in life.



**Living with Disability** 

Facilitate role keeping; development of secondary roles

EXPERIENCES/HELPING TASKS FOR RECOVERY ton University, Farkas

Adapted from Spaniol, Wewiorski, Gagne, 2002

# What is the implication of this view of mental health for PSR?

- Recovery is the overall goal
- Person can achieve it with/without prof.
- Long term process
- Services need to organize around person's recovery goal
- Families, neighbors etc can play a role

- To be relevant, PSR must focus on the long term recovery goal,
- must organize a flexible process recognizing the person's expertise and
- also must include the natural community Copyright@Boston University, Farkas 2012

# What is the relationship of recovery and rehabilitation?

Rehabilitation is a systematic approach, based on recovery values, that contributes to overall recovery by:

- Developing relationships where the individual is the expert regarding his or her own recovery
- Facilitating the individual's success in choosing, getting and keeping his or her preferred role
- Involving both the person and the environment

Copyright@Boston University, Farkas 2012

Farkas 2006; Farkas & Anthony 1989

## Recovery oriented Psychiatric Rehabilitation

- Based in recovery values
- Contributing to recovery outcomes
- Based on principles and techniques of rehabilitation and client centered psychotherapies; developmental psychology; cognitive/ behavioral interventions, educational psychology

Copyright@BostoFolkroive&siAvnFlowkroys 2982

## Basic principle of Psychiatric Rehabilitation

# Success and satisfaction in a preferred valued role depends on skills and supports

### **Models/PSR interventions**

- Approaches/Models by domain
- Specific interventions
- Overall framework with interventions

# How do we know if something IS PSR?

- Are they focused on achieving a valued role?
- Can they be?
- Do they improve skills or supports to achieve success AND satisfaction?
- Do they involve the person in the process
   ? (is the practice congruent with by the values?)

# Examples: Approaches/Models by domain

• Living Domain:

Housing First;Supported Housing

• Working Domain:

 Individualized Placement & Support (IPS); Clubhouses

- Education Domain
- Mobile Education Teams; Supported education

# Examples: Interventions/Techniques

- Skills Techniques
- Cognitive Remediation
- Social Skills Training
- Motivational Interviewing
- Family Psycho-education

SupportTechniques

- Family- to-Family; Self Help
- ACT; CM
- Stigmay Reductionity, Farkas 2012

### Example: Overall Framework

- Psychiatric Rehabilitation approach
  - o aka "Choose-Get-Keep";
  - "Boston Approach";
  - IRB (in Holland)

## Describing the Psych Rehab Process



# How has the "Boston" approach been used?

- Integrated into domain models—
  - Eg. Clubhouses; IPS; Supported Ed; Supported Housing
- Integrated into support intervention models
  - Eg. ACT
- With other interventions added:
  - Eg Cognitive Remediation

## Describing the Psych Rehab Process



## Choosing: Where do I want to LLW/S? In what role?

- Am I ready to really choose? If not, how do I become ready?
- What are my personal criteria? If I don't know, how will I learn what they are?
- What are my options? If I don't really know these types of settings or roles, how will I learn about they are/mean to me?
- How will I put my criteria together with my options in a structured problem solving way?

### **Getting**

- What can I do to reduce discrimination against me? How do I cope with it?
- How do I "sell" myself?
- o Can anyone help me create more options?

## Keeping: How do I stay successful & satisfied in the role I have chosen?

- What critical skills and supports do I have/not have to be successful and satisfied there?
- How will I learn to do what I absolutely cannot do to be successful and satisfied in the chosen role/setting?
- How will I overcome the barriers to using what I know but can't do well enough?
- How will I get the specific support I need to be successful and satisfied there?

## Organizationally—

•how do you integrate PSR with other services?



Services and	Recovery as	overall	
[Outcomes]	mission		
(Adapted from Anthony, Cohen, Farkas et al., 2002)	Health Thoughts, Feelings, & Behavior	Activity Role Performance	Participation Opportunities
<b>Treatment</b> [Symptom Relief]	X		
Crisis Intervention [Safety]	X		
Case Management [Access]	X	X	X
Rehabilitation [Role Functioning]		X	X
<b>Enrichment</b> [Self-Development]		X	X
Rights Protection [Equal Protection]			X
Basic Support [Survival]		Copyright@Postor I	X Iniversity,Farkas 2012
Peer-Peer Services [Empowerment,		Copyright@Boston ( <b>X</b>	X
Support]			

#### What does it take to deliver PSR?

- Culture of recovery
- Commitment across all levels

   (eg administrators, managers, supervisors, providers; resource partners, funders etc.)
- Capacity (ie knowledge, attitudes, skills)

### **Brief Summary**

- What is recovery?
- What is PSR?

- What 2 areas doesPSR focus on ?
- What framework can you put PSR models/interventions in?

- Reclaiming a meaningful life
- Promotes recovery by facilitating gaining/regaining their chosen valued roles
- Skills & supports for success & satisfaction
- Is this technique helping the person choose-getkeep a valued role, congruent with the values?

Copyright@Boston University,Farkas 2012