Enhancing Concurrent Capability Toolkit Comprehensive Interventions Quick Reference Sheet

Recovery-Oriented Care

What is recovery-oriented care?

It empowers the person to address a wide range of needs outside of their diagnosis. This includes supports for housing, employment, education, family, healthy eating and basic health promotion in order to build a meaningful, hopeful and successful life.

Recovery-oriented services do not address addiction and mental health problems sequentially, and do not use exclusion criteria or impose treatments.

Recovery-oriented providers:

- Work with people at their current state
- Respect people's choices, autonomy, dignity and self-determination
- Focus on people's safety and offer support for harm reduction, positive risk-taking and continual personal growth

What do recovery-oriented interventions look like?

Recovery-oriented interventions are shaped around many factors. They are unique to each person and dependent on their stage of treatment.

Examples of interventions that address different aspects of recovery are:

- Supported housing
- Supported employment
- Continuing education
- Collective kitchens
- Art therapy
- Music therapy
- Pet therapy

What factors affect recovery?

Below are the 10 elements of mental health recovery identified by the American Psychological Association.



Figure 1. Components of Recovery. Reprinted from American Psychological Association. Retreived from <u>http://apa.org/pi/mfp/psychology/recovery-to-practice/index.aspx</u>)

Other components considered in recovery may include:

- Past addiction related issues
- Work, school and financial responsibilities
- Spirituality and support groups
- Recreational and leisure activities
- Interpersonal relationships
- Physical wellness
- Self-management
- Emotional and mental wellness
- Goals and aspirations
- Empowerment
- Social inclusion
- Culture



Promoting full citizenship

When providing recovery-oriented care, it is essential to:

- Work to remove barriers to social inclusion
- Support people to live fully engaged lives within their communities

People don't need to get well before they can participate as full and equal citizens in meaningful social and economic roles. In fact, such participation is a fundamental pathway to recovery.

This approach shifts the focus of service beyond simply managing symptoms, and works to support positive evolution in all aspects of people's lives-social, psychological, cultural, sexual and spiritual.

Recovery-oriented practice strives to ensure that people have a choice in accessing a full range of service options, including specialized psychiatric services, psychosocial rehabilitation, cognitive and behavioural therapies, substance abuse treatment and trained peer support workers. Psychosocial rehabilitation, for example, is an evidence-based practice that uses tools recognized for promoting recovery that should be made available as early as possible.

Treatment options and strategies can include various types of approaches and target different types of people and situations, including families. Comprehensive interventions for people with concurrent disorders must offer options for both mental health and substance use issues.

Other treatment considerations

How an intervention is delivered, who delivers it, where it is delivered, and what the intervention is targeting all affect how well it will meet someone's recovery goals.

The delivery mode, locations and settings of interventions come in many forms, including:

- Individual, family, or group therapies
- Professional/clinician-led or peer-led therapy
- Privately or publicly managed and funded
- Formal or informal
- Wellness-focused or treatment-focused
- Prevention-focused or action-focused
- Cultural interventions

There are other aspects of interventions to consider with a person's recovery goals, stage of change, and stage of treatment. These include:

- Personal goals and motivations
- Cultural sensitivities
- Concurrent issues and the severity of the issues
- Availability of services (for example, rural or urban settings)
- Access to services (such as transportation, mobility, and cognition to navigate)
- Social environment or milieu (for example, services provided in schools, inpatient or outpatient settings)
- Family involvement or support
- Community or cultural settings (such as friendship centres for Indigenous people or families, or community organizations)
- Setting (such as residential, community, inpatient, or outpatient)
- Social determinants of health (such as age, gender, and sexual orientation)

You will get a better sense of these factors as you work with the person through screening, assessment and treatment planning, and by understanding the health system and service options available.

Remember: Choosing interventions must happen collaboratively with the person and family who will be treated, and it must fit with **their** recovery plan and needs.

