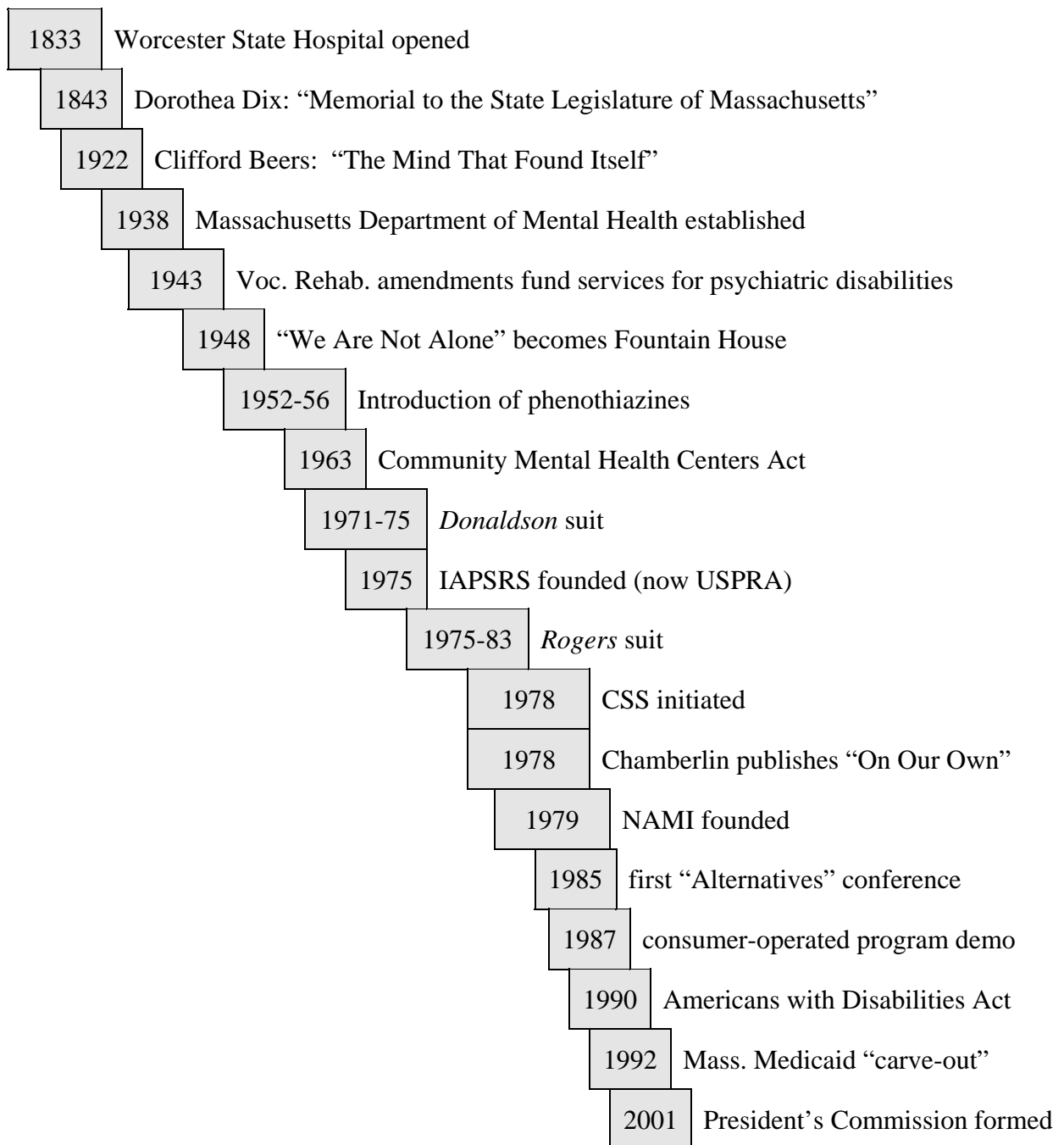


## **HISTORICAL TIMELINE**



*adapted from PSR curriculum (MassPRA, 2004)*

## **PSYCHIATRIC REHABILITATION**

### **Disability and Rehabilitation**

Every human being can experience health problems; disability is a universal human experience. A biopsychosocial model of health and disability recognizes the interaction of physical, personal, environmental, and social factors. A health condition certainly affects a person's life, but the health condition interacts with other physical factors (such as fitness), with characteristics and experiences of the individual (such as world view, gender, age, or past trauma), with the person's circumstances and immediate surroundings (such as poverty, community resources, climate or terrain), and with larger societal attitudes and policies (such as beliefs about illnesses and treatments, views on gender roles, or government-sponsored benefit programs).

Rehabilitation focuses on a person's performance and participation in the community in a neutral, non-judgmental way. The "rehab questions" ask: What can the person do? What does the person do? What changes in the environment would improve performance? What changes in the person would improve performance?

*based on The International Classification of Functioning*  
*<http://www3.who.int/icf/>*

### **The Mission of Psych Rehab**

To increase the functioning of persons with psychiatric disabilities, so they can be successful and satisfied in their environments of choice with the least amount of professional intervention.

*from Anthony, Cohen, Farkas, Gagne (2002)*  
*Psychiatric rehabilitation.*  
*Available from <http://www.bu.edu/cpr>*

### **The Goal of Psych Rehab**

Recovery is the defining goal of psychiatric rehabilitation, and represents both the hopes and difficulties of implementing effective psychiatric rehabilitation services. Because recovery is unique for each person, the guidelines for how to achieve this goal vary. One-size-fits-all services may be the easiest and most efficient to operate, but are inherently less effective in helping people recover than individualized, person-centered services.

*adapted from Pratt, Gill, Barrett Roberts (1999).*  
*Psychiatric rehabilitation. (p. 91-93)*  
*Available from <http://books.elsevier.com/>*

## RECOVERY

*“Recovery is the urge, the wrestle, and the resurrection.”*

Pat Deegan (1988)  
 Recovery: The Lived Experience of Rehabilitation  
 Psychosocial Rehabilitation Journal, 11(4), 11-19

Recovery is discovering a sense of self, meaning, and/or purpose in life that lie within and beyond the limits of disability.

Some assumptions<sup>1</sup> about recovery:

- Recovery can occur without professional intervention.
- Recovery can occur even though symptoms continue.
- Recovery demands that a person has choices.
- A common denominator of recovery is the presence of people who believe in and stand by the person in need of recovery.

<u>Phases of Recovery<sup>2</sup></u>	<u>Provider-based Barriers*</u>	<u>Provider-based Facilitators*</u>
Overwhelmed by disability	Devaluing the person Lack of opportunity Negative attitudes Lack of skill	Caring and support Resource linkage Hope Information
Struggling with disability	Low expectations Lack of knowledge Staff turnover or inconsistency	Acceptance Goal setting Skill development
Living with disability	Isolation Protection and restriction Work disincentives	Encouragement and support Goal achievement (rehabilitation) Meaningful work
Living beyond disability	Stigma and shame	Stability and consistency Intimacy and connection

*\*Cultural sensitivity is always an important facilitator. Similarly, barriers to recovery can be the result of cross-cultural miscommunication.*

<sup>1</sup>from Anthony (2000). A recovery-oriented service system: Setting some system level standards. *Psychiatric Rehabilitation Journal*, 24 (2), 159-168.

<sup>2</sup>from Spaniol (2000). *Facilitating the Recovery Workshop: A continuing education course* (<http://www.bu.edu/cpr>)

## **PSR PRINCIPLES**

*These are the 15 principles of International Association of Psychosocial Rehabilitation Services\* (additional information available from <http://www.uspra.org>)*

### **Recovery**

- All people have the capacity to learn and grow.
- Recovery is the ultimate goal of psychiatric rehabilitation. Interventions must facilitate the process of recovery.
- Psychiatric rehabilitation practices facilitate an enhanced quality of life for each person receiving services.

### **Integration**

- Psychiatric rehabilitation practices help people re-establish normal roles in the community and their reintegration into community life.
- Psychiatric rehabilitation practices actively encourage and support the involvement of persons in normal community activities, such as school and work, throughout the rehabilitation process.
- Psychiatric rehabilitation practices facilitate the development of personal support networks.

### **Respect**

- All people are to be treated with respect and dignity.
- Psychiatric rehabilitation interventions build on the strengths of each person.
- Culture and/or ethnicity play an important role in recovery. They are sources of strength and enrichment for individuals and for service agencies.
- Psychiatric rehabilitation practitioners make conscious and consistent efforts to eliminate labeling and discrimination.

### **Self-determination**

- People receiving services have the right to direct their own affairs, including those that are related to their psychiatric disability.
- The involvement and partnership of persons receiving services and family members is an essential ingredient of the process of rehabilitation and recovery.
- All services are to be designed to address the unique needs of each individual, consistent with that individual's cultural values and norms.

### **Quality Services**

- Psychiatric rehabilitation services are to be coordinated, accessible, and available as long as needed.
- Psychiatric rehabilitation practitioners should constantly strive to improve the services they provide.

*\* categories and minor edits by P. Nemeč*