

WHO QualityRights self-help tool



Transforming services and promoting the rights of people with psychosocial, intellectual and cognitive disabilities

What is recovery?

Defining recovery

Many mental health and social services around the world are based on either a clinical understanding of recovery or, at worst, a belief that recovery of any sort is not possible for many people. On the basis of a substantial and growing body of evidence, however, it is now well established that, in the context of mental health, people can and do recover (1).

The traditional or clinical understanding of recovery is when a person is no longer behaving "strangely" or when any "symptoms" related to the emotional distress have subsided. However, for many people, recovery is not about "being cured" or "being normal again". It is about gaining control of their identify and life, having hope for their life, and living a life that has meaning for them — whether that be through work, relationships, community engagement, or some or all of these.

"What matters in recovery is not whether we're using services or not using services, using medications or not using medications. What matters in terms of a recovery orientation is: Are we living the life we want to be living? Are we achieving our personal goals? Do we have friends? Do we have connections with the community? Are we contributing or giving back in some way?" (2)

"Recovery is happening when people can live well in the presence or absence of their mental illness and the many losses that may come in its wake, such as isolation, poverty, unemployment and discrimination." (3)

Recovery is highly personal and its meaning can be different for each person. For instance, some people in recovery may find working in paid jobs very helpful for their mental health because they feel they are contributing and find meaning in their work. For some people experiencing particularly difficult times, certain styles of working may feel overwhelming and stressful and may become a hindrance to the person's recovery. It is therefore essential to consider the values and preferences of each individual when supporting people in recovery and to provide support and accommodation in line with their wishes and values in order to help them overcome barriers to achieve their life goals and dreams.

What does recovery mean to you?

People who have undertaken a recovery journey have found it helpful to develop a Personal Recovery Plan.

This might include:

- 1. How you are going to pursue your ambitions and dreams. Decide what you want to achieve in life and how you will set about achieving it.
- 2. How to keep yourself well.
- 3. How to manage difficult times. If you can identify your sensitivities and signs of distress when things are not going so well, then you can work out ways to get yourself back to feeling good again.
- 4. What you and your supporters can do when you are having a crisis.
- 5. What you can do to move on after a crisis.

How to build and use a recovery plan

- 1. You do not have to complete the recovery plan at once; you can fill out different parts of the plan as you would like and at your own pace.
- 2. You can write up the recovery plan on your own or with the help of other persons who you trust. These could include peers, family, friends or mental health or other practitioners. Remember, this plan is *your* plan and it is up to you what goes into it and with whom you share the plan.
- 3. You can make changes to the plan at any time as you learn more about yourself.

It may often feel that the challenges you experience with your mental health and well-being are completely beyond your control, and it is tempting to believe that only experts can sort them out. While mental health and related practitioners have developed treatments and therapies that can be helpful, each person can become the real expert in their own self-care.

My supporters and how they can help

It can be helpful for people to identify others who can support them to develop a recovery plan and more generally support them at different moments in their life.

A supporter can be a relative, friend, peer supporter or any other trusted person who would be willing to support you, including during times of crisis. A person may decide that they do not want support, or would like support only in specific circumstances. Also, a person can have more than one supporter if they choose.

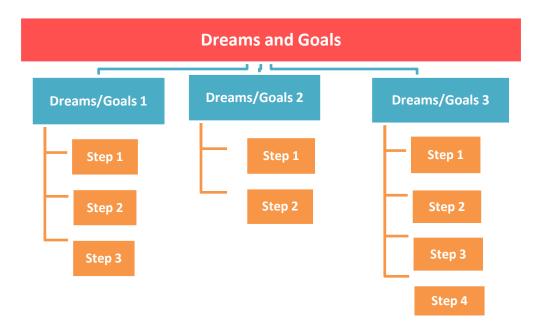
Name	Telephone	How he/she can help		
In an emergency				

Part 1: Plan for pursuing dreams and goals

Recovery is about making the most of your skills and abilities when building the life you want to live.

If you have received a diagnosis it can be very easy to focus only on the diagnosis and lose sight of your skills, assets, strengths, interests and capabilities. A very important part of your recovery plan is, therefore, to brainstorm how you will use your assets and strengths, and the possibilities open to you, to make positive changes in your life.

At this stage of developing your recovery plan, you can identify the dreams and goals you want to achieve. Dreams and goals can be what you want to achieve in the near or distant future, such as learning to play an instrument, buying a plot of land, becoming a teacher, accessing decent housing, sending the children to schools, or travelling. Dreams and goals can also be about specific things you want to achieve, such as getting a part-time or full-time job, volunteering with an organization whose work you care about, finding a friend to share hobbies with, or finishing a book you always wanted to read. Each goal can then be broken down into steps which are in essence smaller goals you can tackle one at a time. See below for a visual illustration of this process.



Below is an example:



The first step is to think about your dreams and goals.

In the box below, write or draw your dreams and goals.



Tips to help you identify your dreams and goals:

- Think about what is important to you e.g. career, education, decent housing, being part of a group or community, volunteering to help others, or religious/political beliefs.
- Think back to different activities or experiences you have enjoyed.
- Think about things that you wanted to do in your life.
- Think about what gives you joy what is your passion?
- Look at magazines, newspapers or the Internet, or talk to friends and relatives to get ideas.

Choose a smaller dream/goal to start with and break the dream/goal down into smaller steps.

The DREAM/GOAL I want to work on first is:
How long it might take to achieve this dream/goal:
Possible STEPS to take to achieve this dream/goal – write down <i>freely</i> as ideas come to your mind. You will pick specific steps on the next page:

Among the steps you listed on the previous page, select the ones that are most relevant and doable for you to achieve. List them in the box below.

The STEPS I will ned to take to achieve my dream/goal:

To plan for the STEPS for your other dreams/goals, make extra copies of the forms.
n the space below, you can take notes to gather any information or support you may need to carry out the STEPS you outlined.
Information I will need to complete these STEPS and where I will obtain it
Information I will need: Where I will find the information:
Support or help I will need: Who I will obtain support from:

In the table below there is an opportunity to list your own personal assets and strengths. This is an opportunity to reflect on the tools that can help you achieve your dreams and aspirations.

If you are having trouble thinking about your personal assets and strengths, think back to when you have achieved other goals in the past and the skills you used to achieve these successfully.

My personal strengths that will help me achieve my dreams

Part 2: My wellness plan

Routines to remain well

Having a regular routine and things to do can be helpful in maintaining wellness. This can balance your life and give you a structure to build on. Think about the day-to-day things you need to do to remain well. These may be things that you are already doing or things that you want to do because they would make you feel better.

Most routines are quite simple – for instance, things like:

- Preparing and eating healthy meals at regular times
- Going for a walk and enjoying nature
- Working in a garden
- Going to work or college
- Reading a book, newspaper or magazine.

In the following boxes, select and list things that you can do EVERYDAY and SOME DAYS throughout the week to remain well.

In the box below, write down things you can do EVERYDAY to remain well.

Things to do EVERYDAY to remain well

In the box below, write down things you can do WEEKLY or on SOME DAYS OF THE WEEK to remain well.

Things to do WEEKLY or SOME DAYS to remain well

Things to AVOID in order to remain well

It can also be helpful to think about things you should avoid in order to help you remain well. These might be things like:

- Not getting enough sleep
- Sitting around doing nothing
- Having too much caffeine through coffee, tea or soft drinks
- Drinking too much alcohol or taking illicit drugs
- Smoking cigarettes
- Meeting with people who you find difficult to get on with
- Anything else that you find unsettles you or worries you.

In the box below, list the things you need to avoid in order to remain well.

Things to AVOID in order to remain well

You can place the "things to do to remain well" into this schedule to create a wellness timetable. You can make changes to the schedule as you learn what works best for you.

WEEKLY SCHEDULE for KEEPING WELL

	Mon	Tues	Wed	Thu	Fri	Sat	Sun
Morning							
Afternoon							
Evening							

Part 3: Plan for managing difficult times

Another component of the recovery plan is to plan how to manage difficult times in life.

It may be useful to indicate in the recovery plan how you would generally describe yourself. It can help supporters to identify when you are behaving differently from usual and to check with you whether you may need support. It can also help you to remember that you are much more than perceived limitations, a diagnosis or a set of problems.

		What generally defines m	ie?
Sociable	Outgoing	Impulsive	Confident
A loner	Talkative	Quiet	Enthusiastic
Cautious	Introverted	Energetic	Opinionated
Athletic	Extroverted	A fast learner	Optimistic
Нарру	Thoughtful	Pessimistic	Industrious
Encouraging	Responsible	Supportive	Curious
Adventurous	Serious	Easy-going	Outspoken
Hard-working	g Friendly	Passionate	Independent
Humorous			
Playful			

To manage difficult times, it can also be useful to use a simple traffic light system to easily keep track of one's mood.

The green-amber traffic light system

When you are trying to work out your difficult times in life, it can be helpful to use the following traffic light system to easily keep track. See below for what each colour indicates.

GREEN = You are feeling well. You may experience stress from time to time that can be managed with coping and problem-solving skills.

AMBER = You are noticing signs of emotional distress. It would be helpful to take better care of your mental and physical health and obtain support from friends, family, or mental health or other practitioner(s).

You can use this system to monitor and manage difficult times in life:

- 1. Use the Daily Recording Chart to keep track of how you are feeling
- **2.** List your:
- Sensitivities
- Signs of distress
- Actions to take for sensitivities and to reduce distress

Tip: As you fill out your Daily Recording Chart, try to observe what happened just before your mood went up or down in order to better understand what tends to provoke changes in your mood.

3. Use the information you wrote on the "things to do to remain well" to stay at the GREEN level, and to go back to GREEN when you reach AMBER on the Daily Recording Chart.

My sensitivities

In order to manage difficult times, the first thing to do is to identify your sensitivities. Sensitivities are things that happen (external or internal events or circumstances) that may cause a person to feel anxious, scared, miserable or discouraged. For some people they might include, for example, people coming too close, not being listened to, being in crowded places, having a big workload, being teased, being criticized, feeling a lack of respect from others and so on.

Sensitivities	Actions to take for sensitivities

My signs of distress

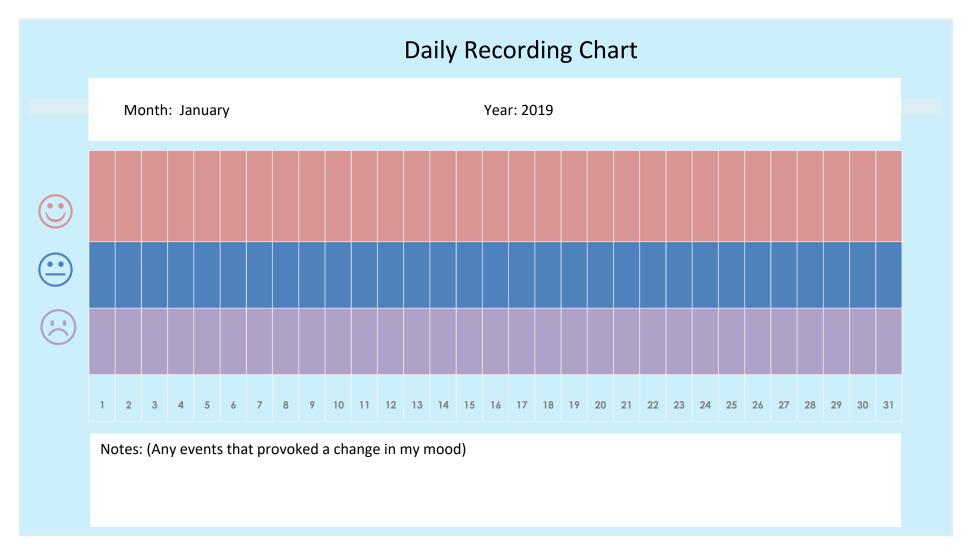
Signs of distress are changes in your feelings, thoughts or behaviour that suggest a crisis may develop. Signs of distress are important because if you recognize them and take action early you may be able to prevent a crisis from occurring. List your signs of distress in the box below. Please remember that this is not an inclusive list.

Examples of common warning signs:

- Feeling anxious or fearful
- Feeling depressed
- Not sleeping enough or waking up early.

My signs of distress	Actions to take to reduce distress

You can make copies of this **daily mood recording chart**. It is also helpful to write down any **events** that have provoked a change in your mood – whether good or not so good – to help better understand your sensitivities and to reinforce the use of your recovery skills.



Part 4: Plan for responding to a crisis

Although recovery plans encourage people to take actions in order to avoid crises when they experience high levels of distress, there may be times when crises do occur – times when, despite a person's best efforts, things continue to get worse.

It is helpful to have in writing your preferences for treatment and types of support you would like to receive from people, as well as information about the treatment, support and services that you are receiving at present. This is so that your support person and others around you can best help you when you are experiencing an emotional or mental health crisis. This is also a time to write down specifically what you do NOT want with regard to supports and services.

It is often difficult to coordinate help in the most personalized way while you are in the midst of a mental health crisis, so it is recommended that you plan ahead by filling out this document in case you experience a crisis in the future.

By filling out this document you will be able to provide directions and information on when, how, where and from whom you would like to receive support and care.

In some countries, people may make their will and preferences legally binding in certain situations. It may be interesting to check if the law in your country allows for this possibility.

About me - When I am experiencing a crisis

This section of your plan can be difficult to do and it may take some time. The aim is for you to describe the signs that might indicate that you would like to be offered more support. This is so that others can support you in keeping safe and in making decisions.

You have already listed the factors which indicate that things are not going so well and a crisis is looming in Part 3 Managing difficult times of this recovery plan. It might be helpful to look back at this and ask yourself "What happens next? What am I like when I am experiencing a crisis?"

It can often be helpful to ask your supporters, family, peers, mental health or other practitioners or friends what they notice about you when you are experiencing a crisis.

Remember, you should write down what others might notice because other people may also be using this plan to support you. For instance, "I neglect my personal hygiene", "I think I am someone I am not", and "I don't get out of bed at all". Try to be as specific as possible so people know exactly what to look for.

It is very important to continue updating this document as you grow and learn as a person, and as your needs and the way you respond to situations also change.

Signs that show I am in crisis and would like others to support me in my care, keep me safe and help me make decisions

Supporters

In the box below, you may write down 1) who your supporters are and 2) your preferred contact person(s) in times of emergency. Your supporters can be your family members, peers, friends, or other people you trust – such as neighbours or members of your faith in your community.

It is also important to discuss in advance with the supporters you list here to ensure they are willing to help in times of crisis.

Contact person in times or emergency/crisis 1.

	Person(s) to be contacted	d in emergency
Name	Their connection to me	Telephone and/or email

Supporters 2.

Name	Their connection to me (e.g. friend, relative, social worker)	Telephone and/or email

3. People I do not want involved in my care

It's important to have supporters, but it is also important to consider people you would like to avoid when experiencing a crisis.

People I do not	People I do not want to be involved if I am experiencing a crisis	
Name (relation)	Reasons why I do not want them involved (optional)	

How my supporters can help me

When you are experiencing a crisis, there may be several things that need to be taken care of – such as requesting leave from work, feeding your pets, looking after bills, telling others that you are feeling unwell, cancelling appointments, etc. In the box below, list the persons who can help you with specific tasks when you are unwell.

Things I want my supporters to take care of when I am in crisis	
Name	What I would like this person to take care of while I am in crisis

What people can do to help when I am in a crisis

When you are experiencing a crisis, there may be some things that people do which make you feel better and other things that make you feel worse. It may be useful to think back to people who you found helpful when you were experiencing a crisis in the past – what was it that they did?

Perhaps they:

- Just spent time with me without speaking or talking about the crisis
- Stayed with me when I was feeling scared or alone.

What people can do that is HELPFUL for me when I am experiencing a crisis (please list)	

What people may want to do that is NOT helpful

You might also say what people do that does not help and why. For example:

- You may not find it helpful when friends try to encourage you to manage your distress by drinking alcohol.
- Or you may not find it helpful when family members tell you that you have to "try to relax" as this makes you more upset and you would prefer people just to be with you during these difficult times.
- Or you may not like it when mental health or other practitioners offer you a new medication before finding out other ways that you can alleviate your distress.

Fill out your own list below:

What I do NOT find helpful	Why is it not helpful

Services and supports that are useful

In the box on the following page, you can list services and supports that you find useful. Such as:

- 1. Services or supports that you are currently receiving like cognitive behaviour therapy (CBT), counselling, psychotherapy and peer support groups.
- 2. Services or supports that have helped when you have been in crisis in the past, like a group therapy, mindfulness, going to the gym, anxiety management, going for a walk or having a friend stay with you.
- 3. Services or supports that you do not want and why you would prefer to avoid them. For instance, you might say "ECT (electro-convulsive therapy) because of its potential negative effects", "group therapy because it makes me feel anxious to speak publicly" or "seeing my sister because we do not get along".
- 4. Services or supports to deal with family issues or other critical situations in your social life, work, friendships or life changes.

Services or supports that you are currently receiving
Services or supports that have helped when you have been in crisis in the past
Services or supports that you do NOT want and why you would prefer to avoid them
Services or supports to deal with family issues or other critical situations

Medication

On the following page, list any information about your medication that would be helpful for your supporters and mental health and other practitioners to know when you are experiencing a crisis. This is so that they can help you in the best way possible (e.g. by avoiding medications that were unhelpful for you in the past).

In the tables below, list which types of medication you are currently taking (including medication not related to your mental health). You/your supporter can seek advice from your doctor or other practitioner if you are unsure about your medication and dosage.

Current medication (List all medications for all health problems)	
Name of medication	Dosage (mg)

Medication preferences and allergies

In the table below, write down your medication preferences and any allergies to particular medications for everyone to be aware of.

Any medication you would prefer to take in a crisis		
Type of medication	Reasons I would prefer to take it	
	Medications you will NOT take	
Type of medication	Reasons I would prefer to take it	
	Medications you are ALLERGIC to	

Where I would like to be when I am in crisis

When you are experiencing a crisis, it may be helpful to stay where help and support is available from family, friends, supporters or mental health and other practitioners until you feel well again, instead of staying by yourself. In the boxes below, list your preferences for where you would like to be when experiencing a crisis. Examples are: stay with my parents, admission to hospital, stay at home with a home treatment support team (e.g. mobile crisis unit, if available in the community), going to a respite house, staying at home with visits to outpatient services.

First preference
Second preference (if first preference is not possible)
Third preference (if second preference is not possible)

Sometimes you may want to go to a specific hospital or an acute setting on a voluntary basis. However, there may be other places where you do not want to go. It is important to remember that this choice may not always be available.

I PREFER to go to	
Name of hospital/ward/service	Why I would prefer to go there
	I prefer NOT to go to
Name of hospital/ward/service	Why I would prefer to go there

Special needs

On this page, list all your special and personal needs that it is important for other people to know about.

Health conditions
Religious or cultural needs
Food and dietary needs (including food allergies)
Things I want to have with me if I am admitted to the hospital (e.g. my spectacles, telephone)
Things I dislike
Other things people should know about me
Other special needs

Actions and situations that could worsen a crisis

Sometimes specific actions by others may worsen a situation when people are already experiencing emotional distress.

Some examples may include:

- Feeling like I am not being listened to
- Lack of privacy
- Being stared at
- Loud noises
- Room checks.

In the box below, list some of these actions or situations that your (mental) health workers and other supporters (e.g. family, friends) should be aware of in order to best help you to avoid these situations, or to help you when they occur.

Things I would like people to be mindful of

If I am in danger

Sometimes during crises people can act in ways that can be harmful to themselves. It is therefore useful to include in your plan actions that others could take to support you during such moments. In the box below write what you would like your supporters to do or not do during at these moments.

If I am doing dangerous things, I would like my supporters to
If I am doing dangerous things, I DO NOT WANT my supporters to

Remember to:

- 1. Make sure your supporters and mental health or other practitioners and other supporters (such as family, friends) have a copy of this Advanced Planning document so that they know it exists and what it says.
- 2. Keep a copy of this document for yourself so that, if you are experiencing a crisis, you can show it to people who you see.

About my plan

I developed this plan on (date):		
With the help of (list who helpe	d you to develop your plan –	if there was anyone):
Any plan with a more recent da	te on it replaces this one.	
Signed (your signature):	Date	:
Witnessed by: Name	Signature:	Date:
Ivalile	Signature.	Date.

Part 5: Plan for after a crisis

Continuing your journey after a crisis

Continuing your journey after a crisis can be hard. It is always difficult to restart things that you have not done for a while. It can take some time for these challenges to disappear completely. Your confidence may have been shaken by your crisis. Because of your crisis you may not have seen people who are important to you for some time; you may feel that you have upset some of your friends, relatives and others who you care about, or you may feel very thankful for the support others have provided while you were in crisis.

Whether you were in hospital or at home during your crisis, it is sensible to start thinking about your plan for continuing your journey after the crisis as soon as you are able to.

You do not have to be feeling fully well to start taking back responsibility for doing some of the things that you enjoy and that are important to you. Although it may not always be easy, starting to get back into your usual routines can make you feel better and can help you to move forward in your recovery. Many people find it helpful to go back to a routine gradually.

For instance:

- Start off by seeing a few close friends at home and build up to going out with a wider circle of people.
- Begin going back to work by meeting up with your manager or workmates. Plan a gradual return to work and then build up your hours and duties over a period of time.

About this document section "Part 5. Plan for after a crisis"

Whether you are home, at someone's else's place or in hospital during a crisis, it is helpful to have a plan for how to get back to your daily life and maintain wellness. This part of the recovery plan is all about planning for the few days and weeks just after a mental health crisis so that you can continue your recovery journey.

This might be the first part of your recovery plan that you fill in if, for instance, you are just recovering from a crisis and have not yet done the other parts – this is perfectly fine.

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Preparations for going home

(Fill in points 1 and 2 below only if you have been staying somewhere other than your home)

and life.
First choice
Name:
Contact information:
Second choice
Name:
Contact information:
I would like the following person(s) to stay with me when I return home or to help me settle in when I return home:
First choice
Name:
Contact information:
Second choice
Name:

Contact information:

Things I need to sort out

After a crisis, you may want to think about whether there are challenges that arose during the crisis, such as financial difficulties or medical problems that need to be resolved.

In each case it may be sensible to think about the things you need to sort out as soon as possible and deal with things that can wait until you are feeling stronger.

It can also be useful to give some thought to when you will do each thing, how you will do it and whether you want anyone to support you (e.g. receiving advice for financial difficulties; obtaining emotional support from friends or family as you sort out problems; finding transportation to certain places, etc.). You can make plans for these in the table below.

What I need to do	What help I will need	Which supporter I will need to contact	When I need to do it

Establishing a routine

Getting into a regular routine as soon as possible can help you to enjoy your life again, and many routines may be quite simple. For instance:

- Getting up by a certain time and going to bed by a certain time
- Preparing and eating three healthy meals a day
- Going for a walk or taking some exercise.

Things to do EVERY DAY to help me enjoy my life after a crisis							
Things to do	When I will do them						
Tilligs to do	Morning		Aft	Afternoon		Evening	
]
Things to do on SOME DAYS a week to enjoy on)	my life a	fter a cr	isis (and	which d	lays I w	ill do th	em
Things to do	Days I will do them on						
I IIIIIgs to do			·		ieiii oii		
	Mon	Tue	Wed	Thu	Fri	Sat	Sun
	Mon	Tue				Sat	Sun
	_		Wed	Thu	Fri		Sun
	_		Wed	Thu	Fri		Sun
			Wed	Thu	Fri		Sun
			Wed	Thu	Fri		Sun

It can also be helpful to think about things you should avoid in order to help you remain well. These might be things like:

- Getting over-tired
- Sitting around doing nothing
- Drinking too much alcohol or taking illicit drugs
- Meeting certain people you don't get along with.

Things to avoid while I am recovering from my crisis

My timetable

Some people find it helpful to draw up a weekly timetable to get themselves back into a routine and gradually add more items to it as they feel up to it.

- 1. The first timetable on the following page is for the first week after you had a crisis. You may specifically plan day by day and gradually build your schedule throughout the week.
- 2. The second timetable on the following page_is for the time following the first week after a crisis as you stabilize your life and return to the daily and weekly routines and activities that you planned in "Part 2. My wellness plan" of this document.

Use these timetables to schedule activities to keep well:

Timetable for my first week after a crisis

	Day I	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Morning							
Afternoon							
Evening							

My weekly timetable for stabilizing my life

	Day I	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
Morning							
Afternoon							
Evening							

Experiencing a crisis is a learning opportunity. After you went through a crisis, you may have learned new things about yourself, as well as new coping skills.

You can make changes to your recovery plan, as well as the Advance Planning part of the plan, to reflect the changes. You can also delete things you have previously written in the recovery plan if they are no longer meaningful to you.

What I have learned from my crisis

Section	Changes I want to make
My goals (Part 1)	
My wellness plan (Part 2)	
My sensitivities (Part 3)	
My signs of distress (Part 3)	
Plan for responding to a crisis (Part 4)	

References

- 1. Rights and recovery in mental health. SRN Briefing Paper. Glasgow: Scottish Recovery Network (SRN); 2015. (https://scottishrecovery.net/wpcontent/uploads/2015/06/srn_connectingrandr_oct15.pdf, accessed 18 January 2019).
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- 3. Mental Health Commission. Blueprint for Mental Health Services in New Zealand: how things need to be. Wellington: Mental Health Commission; 1998. (http://www.moh.govt.nz/notebook/nbbooks.nsf/0/0E6493ACAC236A394C25678D000BEC3 C/%24file/Blueprint for mental health services.pdf, accessed 18 January 2019).