

Psychological Recovery

Beyond Mental Illness

Retta Andresen,
Lindsay G. Oades,
Peter Caputi



Psychological Recovery

Psychological Recovery

Beyond Mental Illness

Retta Andresen
Lindsay G. Oades
Peter Caputi

 **WILEY-BLACKWELL**

A John Wiley & Sons, Ltd., Publication

This edition first published 2011
© 2011 John Wiley & Sons, Ltd

Wiley-Blackwell is an imprint of John Wiley & Sons, formed by the merger of Wiley's global Scientific, Technical and Medical business with Blackwell Publishing.

Registered Office

John Wiley & Sons Ltd, The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, UK

Editorial Offices

The Atrium, Southern Gate, Chichester, West Sussex, PO19 8SQ, UK

350 Main Street, Malden, MA 02148-5020, USA

9600 Garsington Road, Oxford, OX4 2DQ, UK

For details of our global editorial offices, for customer services, and for information about how to apply for permission to reuse the copyright material in this book please see our website at www.wiley.com/wiley-blackwell.

The right of Retta Andresen, Lindsay G. Oades and Peter Caputi to be identified as the authors of this work has been asserted in accordance with the UK Copyright, Designs and Patents Act 1988.

All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted, in any form or by any means, electronic, mechanical, photocopying, recording or otherwise, except as permitted by the UK Copyright, Designs and Patents Act 1988, without the prior permission of the publisher.

Wiley also publishes its books in a variety of electronic formats. Some content that appears in print may not be available in electronic books.

Designations used by companies to distinguish their products are often claimed as trademarks. All brand names and product names used in this book are trade names, service marks, trademarks or registered trademarks of their respective owners. The publisher is not associated with any product or vendor mentioned in this book. This publication is designed to provide accurate and authoritative information in regard to the subject matter covered. It is sold on the understanding that the publisher is not engaged in rendering professional services. If professional advice or other expert assistance is required, the services of a competent professional should be sought.

Library of Congress Cataloging-in-Publication Data

Andresen, Retta.

Psychological recovery : beyond mental illness / Retta Andresen, Lindsay G. Oades, Peter Caputi.
p. ; cm.

Includes bibliographical references and index.

ISBN 978-0-470-71143-9 (hardback : alk. paper) – ISBN 978-0-470-71142-2 (pbk. : alk. paper)

1. Mentally ill—Rehabilitation. 2. Psychotherapy. I. Oades, Lindsay G. II. Caputi, Peter. III. Title.
[DNLM: 1. Mental Disorders—rehabilitation. 2. Mental Disorders—psychology. 3. Models, Psychological. 4. Outcome Assessment (Health Care) 5. Recovery of Function. WM 400]
RC439.5A53 2011
616.89'14—dc22

2011006418

A catalogue record for this book is available from the British Library.

This book is published in the following electronic formats: ePDFs 9781119975151; Wiley Online Library 9781119975182; ePub 9781119975168

Set in 10.5/13pt Minion by Thomson Digital, Noida, India

Dedication

This book is dedicated to all those people who have experienced mental illness and have generously shared their stories in print or taken part in research in order to further the understanding of mental illness and recovery.

Contents

About the authors	xi
Foreword by Jon Strang	xiii
Preface	xvii
Acknowledgements	xix

Part I Recovery in Historical Context

1 Introduction: Recovery from schizophrenia	3
<i>Overview</i>	3
<i>Early conceptualizations of schizophrenia</i>	4
<i>Diagnostic systems and prognostic pessimism</i>	6
<i>Empirical evidence for recovery</i>	7
<i>The persistence of a pessimistic prognosis</i>	13
<i>The real possibility of recovery</i>	17
<i>The emergence of the 'recovery' movement</i>	18
<i>What do we mean by 'recovery'?</i>	20
<i>Conclusion</i>	22
<i>Summary</i>	22
2 Conceptualizing recovery: A consumer-oriented approach	23
<i>Overview</i>	23
<i>Developing a consumer-oriented model of recovery</i>	24
<i>The search for common ground</i>	25
<i>Meanings of recovery in the literature</i>	25
<i>Consumer descriptions – psychological recovery</i>	28
<i>Diverse opinions on some aspects of recovery</i>	31
<i>Four component processes of recovery</i>	34
<i>A definition of psychological recovery</i>	40
<i>Steps along the journey of recovery</i>	41
<i>Five stages of psychological recovery</i>	45
<i>Conclusion</i>	45
<i>Summary</i>	48
<i>Appendices</i>	48

Part II Elaboration of the Model: From Hopelessness to Flourishing

3	Moratorium: The first stage of psychological recovery	53
	Overview	53
	<i>Negative symptoms or psychological sequelae?</i>	53
	<i>Hope in the Moratorium stage: Hopelessness</i>	54
	<i>Responsibility in the Moratorium stage: Powerlessness</i>	57
	<i>Identity in the Moratorium stage: Loss of sense of self</i>	59
	<i>Meaning in the Moratorium stage: Loss of purpose in life</i>	63
	Conclusion	65
	Summary	66
4	Awareness: The second stage of psychological recovery	67
	Overview	67
	<i>Hope in the Awareness stage: The dawn of hope</i>	67
	<i>Responsibility in the Awareness stage: The need to take control</i>	70
	<i>Identity in the Awareness stage: I am not the illness</i>	72
	<i>Meaning in the Awareness stage: Need for a purpose in life</i>	74
	Conclusion	76
	Summary	76
5	Preparation: The third stage of psychological recovery	77
	Overview	77
	<i>Hope in the Preparation stage: Mobilizing resources</i>	77
	<i>Responsibility in the Preparation stage: Taking autonomous steps</i>	79
	<i>Identity in the Preparation stage: Taking an internal inventory</i>	81
	<i>Meaning in the Preparation stage: Reassessing goals</i>	83
	Conclusion	85
	Summary	85
6	Rebuilding: The fourth stage of psychological recovery	87
	Overview	87
	<i>Hard work and hopefulness</i>	87
	<i>Hope in the Rebuilding stage: Active pursuit of personal goals</i>	88
	<i>Responsibility in the Rebuilding stage: Taking control</i>	90
	<i>Identity in the Rebuilding stage: Self-redefinition</i>	93
	<i>Meaning in the Rebuilding stage: Valued goals</i>	96
	<i>Risk-taking, perseverance and resilience</i>	99
	Conclusion	100
	Summary	101
7	Growth: The fifth stage of psychological recovery	103
	Overview	103
	<i>Hope in the Growth stage: Optimism about the future</i>	103
	<i>Responsibility in the Growth stage: In control of life and wellbeing</i>	105
	<i>Identity in the Growth stage: An authentic self</i>	107

<i>Meaning in the Growth stage: Living a meaningful life</i>	109
<i>Resilience, personal growth and wisdom</i>	111
<i>Conclusion</i>	113
<i>Retrospective overview</i>	114
<i>Summary</i>	114
8 Common questions regarding the stage model of psychological recovery	115
<i>Overview</i>	115
<i>Ten questions that have been raised about the model</i>	115
<i>Conclusion</i>	120
<i>Summary</i>	120

Part III Measuring Recovery

9 Recovery-oriented outcome measurement	123
<i>Overview</i>	123
<i>Why the need for measures of recovery?</i>	123
<i>Approaches to operationalizing recovery in research</i>	125
<i>Assessing outcomes in routine clinical practice</i>	126
<i>Outcome measurement from the consumer perspective</i>	127
<i>Measuring consumer-defined recovery</i>	128
<i>Measures based on the stage model of psychological recovery</i>	129
<i>Concluding comment</i>	135
<i>Summary</i>	135

Part IV Towards a Positive Future

10 Psychological recovery and positive psychology	139
<i>Overview</i>	139
<i>A scientific approach to recovery</i>	139
<i>Hope</i>	140
<i>Meaning and purpose</i>	140
<i>Responsibility</i>	141
<i>Identity</i>	142
<i>Resilience</i>	142
<i>Strengths</i>	143
<i>Values</i>	143
<i>Autonomous goals</i>	144
<i>Growth</i>	144
<i>Wellbeing</i>	145
<i>Living with illness and flourishing</i>	145
<i>Summary</i>	146
11 Reflections and future directions	147
<i>From wellness to wellbeing</i>	147
<i>Applications of the model</i>	148
<i>Recovery measures in clinical work, evaluation and research</i>	151

<i>Current and future research directions</i>	152
<i>A word about words</i>	153
Afterword	155
References	157
Index	179

About the Authors

Retta Andresen

Dr Retta Andresen is a Research Fellow at the University of Wollongong, Australia. Her research interests were inspired by personal accounts of the experience of schizophrenia, which led to the development of the stage model of psychological recovery. She is committed to the use of the recovery model in mental health services. To that end, she has developed outcome measures to reflect the consumer recovery experience that have received international attention. Retta is a strong believer in positive psychological approaches in mental health, and worked to develop *Flourish*, a self-development programme of recovery. She is currently working on a project which trains mental health practitioners in the use of a recovery model that focuses on the identification of core values as the basis for a meaningful life.

Lindsay Oades

Dr Lindsay Oades is a Clinical and Health Psychologist and Director of the Australian Institute of Business Wellbeing, Sydney Business School, University of Wollongong, Australia. Lindsay works to combine principles of mental health recovery with positive psychology and positive organizational scholarship in order to develop approaches to recovery oriented services, including measurement of psychological recovery, the development of the Collaborative Recovery Model (CRM) and the *Flourish* self-development programme. During his career Lindsay has worked as a practitioner, manager, researcher, trainer and coach in the service of mental health. Lindsay currently chairs the Serious Mental Disorders Panel at the Illawarra Health and Medical Research Institute, and is on the Board of Directors of Neami, a major Australian mental health non-government organization.

Peter Caputi

Associate Professor Caputi's expertise is in the area of measurement, with particular interest in outcome measurement. His innovative work on measuring recovery from serious mental illness, in collaboration with Drs Retta Andresen and Lindsay Oades, has received national and international recognition. Peter is an active reviewer for *The Journal of Psychology: Interdisciplinary and Applied*, *Journal of Constructivist Psychology*, *Personal Construct Theory and Practice*, *Personality and Individual Differences*, *Australian Journal of Psychology*, *Clinical Schizophrenia & Related Psychoses*. He is also a consulting editor for the *Journal of Constructivist*

Psychology and *The Journal of Psychology: Interdisciplinary and Applied*. Since 2000, he has published over 100 peer-reviewed conference papers, journal articles, and book chapters and is currently teaching several statistics based subjects at the University of Wollongong.

Foreword

This book is written in the context of the consumer movement dating back to the 1960s. Alongside that movement, an evolving recovery movement specifically emphasised the empowerment of consumers to get on with their lives and to achieve the goals they choose to pursue and that they value. Some observers of history say that themes and principles of the recovery movement are more than 160 years old but have come to the fore only relatively recently.

My credentials are that I have experienced three mental illnesses since 1984 – paranoid schizophrenia, anxiety attacks and major depression – and have been involved with a modern day mental health service since 1988. I have lived in group homes, being case managed and encouraged to work on my recovery journey since then. My last hospital admission was in 1990. I have developed my role with the mental health service, initially as a Consumer Representative (both unpaid and paid), then as Coordinator of Consumer Initiatives, as a Community Development Officer and now as a Consumer Advocate working in hospital and community settings. I became aware of and exposed to recovery philosophy in the late 1990s.

Consumer workers can be great role models, and I had a good positive group of people around me who encouraged me in the early days after diagnosis. None of them told me I could not recover (unlike the experience of some of my friends). This gave me immense hope. But, like many people, after my diagnosis I reassessed my life and lowered my expectations of and for myself – in a very big way. My identity had taken a huge beating, and only after a long struggle (recovery is hard work) did I rebuild it. The core of this is a very strong world view based on our place in the universe and caring for our planet and all living things on it (live in harmony with the universe).

My job – I have the best job in the world – is now a big part of my identity and gives me a huge sense of meaning; but it is my interest and active participation in philosophy, science, astronomy, scrabble, my housing community and my local mental health fellowship that give me the greatest meaning. I have accepted that I have a mental illness and am moving on with my life and working on my recovery journey. I give back to my local community by doing a range of voluntary community development activities, and this is one way in which I have taken responsibility for my life. Working on my spiritual development (not to be confused with religious beliefs) by taking an interest in everything around me, and respecting and appreciating it, I try to be the best human being I can be in a rapidly changing technological world.

I first met and worked with Lindsay Oades on the Consumer Evaluation of Mental Health Services Project between 1999 and 2004. I soon learnt that Lindsay has immense understanding of and sensitivity to consumer needs, and his accuracy and meticulous attention to detail make him stand out against other researchers. I have also participated in the Collaborative Recovery Model Training with Lindsay. I met and worked with Retta Andresen on '*Flourish – A Recovery-Based Self Development Program*' in the late 2000s. Retta demonstrated great patience and tolerance for participants and facilitators, and showed significant insight into and understanding of those living with mental illness.

In my profession, as a consumer worker and as a mental health professional, we talk about treating each other (human being to human being) with respect and dignity as a foundation to working in a modern mental health setting. We expect all mental health professionals to treat their clients with this in mind. In working with the authors I have seen that they show the utmost care and consideration to their work colleagues and the people with whom they interact, and this is reflected in their understanding of recovery philosophy and the human condition.

The book opens with an examination and historical record of recovery from schizophrenia, showing that recovery from any mental illness is not only possible but highly likely. As schizophrenia has been seen as the most disabling and stigmatised mental illness, if recovery from schizophrenia is possible, recovery from other mental illnesses is perhaps even more attainable. The notion that recovery requires 'returning to a former state' (or a period in your life) is well examined as a myth and misunderstanding of recovery philosophy, and it is very important to see this highlighted here. The outstanding feature of the book is that the model of psychological recovery is based on thematic analysis of many 'real' personal recovery stories; and from these also emerged the major themes: finding and maintaining hope; taking responsibility for life and wellbeing; rebuilding a positive identity, and finding meaning and purpose in life. The stages of recovery - Moratorium, Awareness, Preparation, Rebuilding and Growth – are examined in detail with a separate chapter for each, and this forms the bulk of the text. The ideas therein are supported by many meticulously researched references.

I know the authors believe in life-long learning and have left no stone unturned to adapt, update and find new ways of incorporating new developments, initiatives and insights in philosophy, psychology and spirituality into their work. Chapter 8 explains how the ideas being developed in positive psychology are relevant to, and complement, recovery philosophy. These ideas can be especially useful in helping someone to get back on track and live the life that they want and value. Psychological recovery is clearly not just absence of symptoms, or about preventing symptoms, but something much bigger, a human growth process, promoting strengths and increasing wellbeing. This is explained clearly and developed in this chapter and I hope interested persons take note, for this is a major step forward in thinking about these issues.

The content of this book will be helpful to students of psychology and mental health, mental health staff, service providers, consumers and carers who want to

further understand the recovery process as examined herein, how it relates to their life and how we can all better support persons living with mental health issues. I believe that this text will be a landmark in the development, understanding and uptake of personal psychological recovery in our communities.

On a wealthy planet like Earth, I think we are all entitled to, and deserve, a happy and rewarding life that encourages us to reach our growth potential; a life that we appreciate and respect. This book shows that this is possible, and an increased understanding of recovery philosophy, as demonstrated in the stage model of psychological recovery, may facilitate this for all human beings.

Jon R. Strang
Consumer Advocate
December, 2010

Preface

The moving stories that people with a mental illness have published were the inspiration for this work, and we are deeply indebted to all those people who have shared their experiences with others in order to enhance our understanding. We have written this book to share a model of psychological recovery from mental illness which was derived from many personal accounts. There is a large and growing scholarly literature on recovery, most of which is in broad agreement about the elements of recovery and the many influences on the course of mental illness and its impact on the individual. Our model focuses on the intrapersonal psychological aspects, and does not include external factors such as employment, housing or other social factors. Although these are all extremely important to recovery, they are not the focus of the model. The simplicity of the model brings structure to a very complex field, and has proven to be a useful heuristic in clinical work, education and research. The book elaborates on the model, which was originally published in a journal article (Andresen *et al.*, 2003), and presents our ongoing work, in the hope of furthering understanding of recovery and contributing towards the scientific endeavour of advancing recovery-oriented practice. Although aimed primarily at mental health professionals and students, we hope a wider audience will find the book interesting and informative, particularly people with a mental illness and their loved ones, who may find hope within these pages.

Throughout the book, we have used the term ‘consumer’ – synonymous with ‘service user’ or ‘user’ in the UK – to describe a person who has experienced mental illness. We acknowledge that not all people with a mental illness use mental health services, and are therefore not consumers in this context. We are also aware of, and deeply respect, the preference for other terminology, including ‘survivor’ and ‘ex-patient’. However, even these terms do not apply to all. Since there is broad consensus on the term ‘consumer’ in the literature, and the book is aimed primarily at professionals, we have adopted this word for simplicity’s sake.

In Part I we look at the concept of recovery. Schizophrenia may be considered an exemplar of mental illness, having historically had the worst prognosis. Due to the severity of the illness, there is a large body of literature on the course and outcome of schizophrenia, which provided us with the empirical evidence for recovery. Chapter 1 sets the scene for the book with a historical background of the concept of schizophrenia. It covers how recovery from schizophrenia came to be considered impossible, how this notion was disproved by empirical research, and the reasons for its persistence. The chapter also introduces the consumer recovery movement, and

the difference between clinical definitions of recovery and the consumer definition. In Chapter 2 we describe our exploration of what consumers say about recovery, and the psychological processes that they describe. Because this research used earlier consumer accounts, these were less likely to have been influenced by the then burgeoning recovery literature and thus imbued with the language of recovery. This enhances the authenticity of the consumers' voices. These stories led us to a definition of psychological recovery. We also reviewed qualitative studies, and found that a number of researchers had described similar phases of recovery, although they identified varying numbers of phases or stages. From the experiential accounts and qualitative studies, we gleaned the elements of the stage model of psychological recovery, consisting of four psychological processes that develop across five stages.

Part II elaborates on the model, stage by stage. Chapters 3 to 7 each examine the four processes of recovery within one of the five stages. The discussion is structured around quotes from the consumer stories, and for this we have included some more recent consumer literature. We draw parallels between aspects of recovery and concepts in the broader psychology literature, culminating with the Growth stage, in which we expand on the themes of resilience and wisdom. Chapter 8 addresses some issues and criticisms relating to the model, such as the assertion that recovery is a highly individual and non-linear process, and therefore cannot be 'modelled'. In order to apply the recovery model to the advancement of research and the enhancement of mental health services, it is necessary to develop measures of recovery, and in Part III we describe our empirical work. Chapter 9 covers our work on developing and testing three approaches to recovery measurement based on the model. These measures have received international attention. The chapter underlines the complexity of this task and the need for more empirical research into the process of recovery and its measurement.

Part IV presents the implications of the model and directions for future research. The recovery literature has clear parallels with that of the positive psychology movement, and these are highlighted in Chapter 10. We explore ways in which the tenets of positive psychology can combine with the recovery literature in developing programmes for promoting recovery. Examples of such programmes, which have been developed with colleagues at the University of Wollongong, are described.

In conclusion, Chapter 11 serves to reflect on our findings, describe some current applications of the model and measures and propose directions for future research. We hope this book will be an inspiration for service providers, researchers, people with a mental illness and their families.

Retta Andresen
Lindsay G. Oades
Peter Caputi

*University of Wollongong
November, 2010*

Acknowledgements

The authors wish to thank all the people who have contributed to the publication of this book. Most importantly, we wish to thank the people living with a mental illness who published stories of their experiences and recovery. These have provided the foundations of our research, and enriched the text of the book. We also thank the mental health practitioners who participated in collecting data for our research, and their clients who consented to the use of their data for publication.

We would also like to thank our families. Retta especially thanks her husband John, children Mandy, Tony, Paul and Kat, Dave and Jess, parents Martin and Janet, and her brothers and sisters for their love, encouragement and support. Lindsay would like to thank his wife Alison and two sons Bodhi and Jai. Peter wishes to thank Elayne, James and Jack for their support and encouragement. We also wish to thank editor Karen Shield for her assistance, publisher Andy Peart and the team at John Wiley & Sons for their work in bringing this book to publication.

