Recovery, Resiliency, & Person-First Language

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Training Objectives

To increase understanding of:

- Definitions of Recovery, Resiliency, and Person-First Language
- The principles of Recovery and Resiliency
- Ways to promote Recovery and Resiliency in your work
- How to become a Recovery Champion
- What Is Person-First Language
- Reasons to Use Person-First Language
- How to incorporate Person-First Language into your practice
- Recovery, Resiliency, and Person-First Resources
Magellan Definitions

Recovery

• All people living with behavioral health conditions have the capacity to learn, grow, and change and can achieve a life filled with meaning and purpose.

Resiliency:

• All people have qualities that enable us to rebound from adversity, trauma, tragedy, threats, or other stresses and to go on with life with a sense of mastery, competence and hope.
SAMHSA’s Working Definition of

Recovery
• A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.

Resiliency:
• An individual’s ability to cope with adversity and adapt to challenges or change. Resilience develops over time and gives an individual the capacity not only to cope with life’s challenges but also to be better prepared for the next stressful situation.
SAMHSA’s four major dimensions that support a life in recovery:

Health - overcoming or managing one’s disease(s) or symptoms—for example, abstaining from use of alcohol, illicit drugs, and non-prescribed medications if one has an addiction problem—and, for everyone in recovery, making informed, healthy choices that support physical and emotional well-being

Home - having a stable and safe place to live

Purpose - conducting meaningful daily activities, such as a job, school volunteerism, family caretaking, or creative endeavors, and the independence, income, and resources to participate in society

Community - having relationships and social networks that provide support, friendship, love, and hope

Hope, the belief that these challenges and conditions can be overcome, is the foundation of recovery. A person’s recovery is built on his or her strengths, talents, coping abilities, resources, and inherent values. It is holistic, addresses the whole person and their community, and is supported by peers, friends, and family members.
10 Guiding Principles of Recovery

Recovery emerges from **Hope**

Recovery is **Person-Driven**

Recovery occurs via many **Pathways**

Recovery is **Holistic**

Recovery is supported by **Peers** and allies

Recovery is supported through **Relationship** and **Social Networks**

Recovery is **Culturally-Based** and influenced

Recovery is supported by **Addressing Trauma**

Recovery involves individual, family, and community **Strengths** and **Responsibility**

Recovery is based on **Respect**

[http://store.samhsa.gov/shin/content//PEP12-RECDEF/PEP12-RECDEF.pdf](http://store.samhsa.gov/shin/content//PEP12-RECDEF/PEP12-RECDEF.pdf)
Eight Dimensions of Wellness

Making the Eight Dimensions of Wellness part of daily life can improve mental and physical health for people with mental and/or substance use disorders.

10 Ways to Build Resilience

1. **Make connections.** Good relationships with close family members, friends or others are important. Accepting help and support from those who care about you and will listen to you strengthens resilience. Some people find that being active in civic groups, faith-based organizations, or other local groups provides social support and can help with reclaiming hope. Assisting others in their time of need also can benefit the helper.

2. **Avoid seeing crises as insurmountable problems.** You can't change the fact that highly stressful events happen, but you can change how you interpret and respond to these events. Try looking beyond the present to how future circumstances may be a little better. Note any subtle ways in which you might already feel somewhat better as you deal with difficult situations.

3. **Accept that change is a part of living.** Certain goals may no longer be attainable as a result of adverse situations. Accepting circumstances that cannot be changed can help you focus on circumstances that you can alter.
10 Ways to Build Resilience [cont.]

4. **Move toward your goals.** Develop some realistic goals. Do something regularly — even if it seems like a small accomplishment — that enables you to move toward your goals. Instead of focusing on tasks that seem unachievable, ask yourself, "What's one thing I know I can accomplish today that helps me move in the direction I want to go?"

5. **Take decisive actions.** Act on adverse situations as much as you can. Take decisive actions, rather than detaching completely from problems and stresses and wishing they would just go away.

6. **Look for opportunities for self-discovery.** People often learn something about themselves and may find that they have grown in some respect as a result of their struggle with loss. Many people who have experienced tragedies and hardship have reported better relationships, greater sense of strength even while feeling vulnerable, increased sense of self-worth, a more developed spirituality and heightened appreciation for life.

7. **Nurture a positive view of yourself.** Developing confidence in your ability to solve problems and trusting your instincts helps build resilience.
8. **Keep things in perspective.** Even when facing very painful events, try to consider the stressful situation in a broader context and keep a long-term perspective. Avoid blowing the event out of proportion.

9. **Maintain a hopeful outlook.** An optimistic outlook enables you to expect that good things will happen in your life. Try visualizing what you want, rather than worrying about what you fear.

10. **Take care of yourself.** Pay attention to your own needs and feelings. Engage in activities that you enjoy and find relaxing. Exercise regularly. Taking care of yourself helps to keep your mind and body primed to deal with situations that require resilience.

Additional ways of strengthening resilience, for example, some people write about their deepest thoughts and feelings related to trauma or other stressful events in their life. Meditation and spiritual practices help some people build social connections and restore inner hope.

The key is to identify ways that are likely to work well for you as part of your own personal strategy for fostering resilience. [http://www.apa.org/helpcenter/road-resilience.aspx](http://www.apa.org/helpcenter/road-resilience.aspx)
Magellan’s Core Principles for recovery & resiliency: more than just words

1. Demonstrate appreciation for the individuals and families we serve as well as for provider staff
2. Be culturally and linguistically appropriate and ensure effective communication
3. Engage and build on a full discovery of each person, including his or her goals, inner strengths, skills, culture, and external supports
4. Think holistically about all areas of each person’s life – physical and mental health, addictions, culture, ethnicity, education, language, work, social relationships, housing status, and spirituality, among others
5. Focus on self-determined readiness
6. Offer meaningful choices.
Magellan’s Core Principles for recovery & resiliency: more than just words [cont.]

7. Optimize peer and family supports as well as natural supports
8. Promote self-confidence of individuals who might have previous experiences that diminished their confidence
9. Create opportunities for consumers and families to play major roles in planning, organizing, and evaluating services
10. Measure, monitor, and improve
11. Celebrate and spread stories of success, especially those that foster hope and empowerment
12. Model principles of recovery and resiliency that are reflective in our interactions, language choice, and decisions
Things I can do Immediately to Enhance Resiliency and Recovery Principles in my Environment

- Choose my Language (person-first)
- Be Inclusive
- Offer Choice
- Support Choice
- Promote Peer/Family Involvement-Support
- Be Collaborative
- Promote a Learning Culture
- Be Open to New Ideas
- Become a Recovery Champion
### 3 Steps to Becoming a Recovery Champion

<table>
<thead>
<tr>
<th>Step 1</th>
<th>Stay informed about organizations in Virginia that promote recovery and resiliency</th>
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</thead>
<tbody>
<tr>
<td>Step 2</td>
<td>Provide recovery and resiliency resources to members and their loved ones. Support their participation</td>
</tr>
<tr>
<td>Step 3</td>
<td>Advocate for your coworkers and employers to promote recovery-oriented best practices</td>
</tr>
</tbody>
</table>
Step 1
Stay informed about organizations in Virginia that promote recovery and resiliency

Mental Health America of Virginia
NAMI Virginia (National Alliance on Mental Illness)
SAARA of Virginia (Substance Abuse and Addiction Recovery Alliance)
VOCAL Virginia (Virginia Organization of Consumers Asserting Leadership)
Voices for Virginia’s Children

• Become a member
• Attend a conference/workshop
• Sign up for their newsletter or other communications that they offer
• Understand the programs that they offer
• Know how to access their resources
• Invite an organization to your agency/organization to provide a workshop on their programs
## Step 2

Provide recovery and resiliency resources to members and their loved ones.

Support their participation

- Print flyers and display in your lobby
- Post resources on your organizations website
- Host a recovery training/workshop for members, parents or family members
- Post recovery support group meeting schedules (i.e. AA/NA, Alanon, NAMI Connection, NAMI Family Support Group)
- Host a WRAP class for members
- Promote the use of Advance Directives and provide training and peer facilitation opportunities

Each provider can ask their members if they know about recovery organizations and the programs that they offer.

- Receptionist/Intake
- Counselor/care provider
- Psychiatrist/Psychologist
- Crisis/Emergency Services
- Peer Providers
### Step 3

*Advocate for your coworkers and employers to promote recovery-oriented best practices*

<table>
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<tr>
<th>Discuss in Clinical Staff Meetings</th>
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<tbody>
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<td>Seek Workshop/Training Opportunities</td>
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<td>Discuss in Leadership Meetings</td>
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<td>Create a Consumer/Family Advisory Council</td>
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<td>Use recovery measurement tools</td>
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<td>Advocate for change</td>
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- Trauma-Informed Care
- Person-Centered Care
- Peer Delivered Services
- Recovery-Oriented Language (Person First)
- Wellness Based
- Individualistic
- Holistic
People First Language

More than a fad or political correctness, People First Language is an objective way of acknowledging, communicating and reporting on disabilities. It eliminates generalizations, assumptions and stereotypes by focusing on the person rather than the disability.

As the term implies, People First Language refers to the individual first and the disability second.

While some people may not use preferred terminology, it’s important to not repeat negative terms that stereotype, devalue or discriminate — just as you’d avoid racial slurs or saying “gals” instead of “women.”

Equally important, ask if the disability is even relevant and needs to be mentioned when referring to individuals, in the same way racial identification is being eliminated from news stories when it is not significant.

Texas Council for Developmental Disabilities
Texas Government
What Should You Say? Choose Your Words Carefully

The words you use to write and communicate about mental health are very important, and can help reduce stigma around mental illness if carefully chosen.

Focus on the person, not the condition.

• The basic concept is that the mental health condition (or physical or other condition) is only one aspect of a person’s life, not the defining characteristic.
  – Preferred: She is a person with schizophrenia.
  – Not preferred: She is schizophrenic.

• Be specific. Mental illness is a general condition. Specific disorders are types of mental illness and should be used whenever possible.
  – Preferred: He was diagnosed with bipolar disorder
  – Not preferred: He was mentally ill

• Avoid derogatory language. Terms such as psycho, crazy and junkie should not be used. In addition, avoid words like “suffering” or “victim” when discussing those who have mental health challenges.
  – Preferred: She has a mental health illness. She has a substance use disorder.
  – Not preferred: She suffers from mental illness. She’s a drug abuser.

Words Matter: Reporting on Mental Health Conditions
American Psychiatric Association (APA)
The “up” side: Why use Person-First Language?

• Helps people see individuals living with mental illnesses (or psychiatric disabilities) and/or substance use disorders beyond a lens of illness, diagnosis, and hopelessness
• Demonstrates our commitment to being culturally and linguistically appropriate in all of our communication
• Models principles of recovery and resiliency through our language choices
• Helps address issues relating to illness-identity and self-stigma
• Contributes greatly to evolving and improving organizational culture
How to incorporate Person-First Language into practice

1. Use Person-First Language in your team/staff meetings, service planning meetings, case briefings, care coordination discussions, etc. whenever you are verbally discussing the people you are serving.

2. Use Person-First Language whenever you are describing the populations your agency works with and the services your agency provides, such as in marketing materials, on websites, in mission statements, etc.

3. Use Person-First Language when writing Individualized Service Plans, Plans of Care, Discharge Summaries, Certificates of Need, Service Request Authorizations, and other clinically relevant documentation.

4. Use Person-First Language when writing your agency’s procedures and policies, licensing documentation, and business contracts, when applicable.
Questions
Resources

Magellan of Virginia
www.MagellanofVirginia.com
National Alliance on Mental Illness
https://www.nami.org/
VOCAL
http://vocalvirginia.org/
American Psychiatric Association
http://www.psychiatry.org/
Substance Abuse and Mental Health Services Administration
http://www.samhsa.gov/
Substance Abuse and Addiction Recovery Alliance
http://www.saara.org/
Virginia Department of Medical Assistance Services
http://www.dmas.virginia.gov/
Virginia Department of Behavioral Health & Developmental Services
http://www.dbhds.virginia.gov/
Thank you for joining us for this training and discussion today.

We hope we have increased your knowledge of:

1. Definitions of Recovery, Resiliency, & Person-First Language

2. Ways to increase use of these concepts in your every day work

3. The steps to becoming a Recovery Champion!

For any questions about this presentation, please contact us at Magellan of Virginia 1-800-424-4046
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