

INTRODUCTION

Rationale/Overview

People with mental illness and/or addictive disease can and do recover. Recovery is a process of growth that involves changing one's attitudes and beliefs, developing new skills, taking on new roles, and developing and sustaining hope. It is a way of living a satisfying, hopeful and productive life beyond the limitations that may be caused by disease or disability. While the journey of recovery is different for each person, experiences that facilitate success include:

- developing strong relationships with caring, encouraging and hopeful people
- determination
- self-monitoring and self-management
- stress management
- vocational activity and schooling
- developing a sense of meaning and purpose
- knowledge and acceptance of disabilities
- self-help and peer support

Philosophy

Successful recovery does not change the fact that the illness has occurred or that effects of a disease may still be present. It does however mean that one finds ways to set a course and move on, to develop new dreams and make them come true.

Allegheny County Coalition for Recovery

The Allegheny County Coalition for Recovery was formed in October 2001 and is a group of individuals who represent consumers; family members; behavioral health service providers; advocacy organizations; community educators and trainers; Community Care Behavioral Health Program; Allegheny HealthChoices, Inc.; and the Allegheny County Department of Human Services, Office of Behavioral Health.

Mission

The mission of the Allegheny County Coalition for Recovery is to eliminate stigma and promote awareness, education, and practice of the principles of recovery among all behavioral health stakeholders including consumers, family members, service providers, educators and trainers, employers, and the community at large.

Purpose of the Education Tool Kit

The purpose of this education tool kit is to promote incorporation of the principles of recovery into behavioral health education and training program curriculums throughout Allegheny County.

Objectives of the Education Tool Kit

- To provide a definition and description of recovery as it pertains to behavioral health.
- To outline the key characteristics of a recovery philosophy.
- To provide service providers with a description of how recovery principles are incorporated into behavioral health treatment and support services.
- To provide educators with classroom techniques for incorporating the principles and practices of recovery into formal educational programs.
- To provide field instructors with methodologies for introducing students to the practices of recovery.
- To offer trainers a set of guidelines for teaching recovery principles to service providers.
- To provide a bibliography and web resources for further learning about the principles and practices of recovery.

PRINCIPLES AND PRACTICE OF RECOVERY

Introduction

The concept of recovery has received extensive attention in the field of physical illness and disability, and addictions. For many people who have severe and persistent forms of behavioral health disorders however, recovery is still an emerging concept. While it has not yet been widely incorporated into either treatment practices or research of mental illness, discussions of recovery are increasingly found in writings of persons who are themselves in process of the recovery journey.

Recovery is described as a deeply personal process that involves changing one's attitudes and beliefs, developing new skills and taking on new roles; it is a way of living a satisfying, hopeful and productive life in spite of the limitations caused by disability. While the course of recovery is highly individual and is different for each person, there are certain experiences that people consistently describe as critical to the success of their recovery. These include strong relationships with caring helpers who emphasize encouragement and hope; determination; self-monitoring; stress management; understanding the role of medications; vocational activity and schooling; spirituality; knowledge and acceptance of disability; self-help and peer support; and relationships with significant others. Successful recovery does not change the fact that the illness has occurred, or that the effects of the disease may still be present; it does however mean that one finds ways to move on, to develop new dreams and make them come true.

Persons with behavioral health disorders often face significant barriers to recovery: stigma; lowered social status; restrictions on choice and self-determination; the lack of rehabilitation opportunities; and low expectations on the part of both family members and provider staff. Recovery, like prevention and cure must take its rightful place in the vision of consumers, family, friends, community and health care professionals.

The following is a summary of key characteristics of a recovery philosophy.

For the Person With a Behavioral Health Disorder, Recovery Means:

- THE REAWAKENING OF HOPE
 - A period of despair often follows the diagnosis of behavioral health disorder and the negative expectations and stereotypes that accompany them. As hope is re-awakened, people come to accept their feelings and come to understand the potential for growth arising from their experiences. They come to realize that hopes and dreams can be pursued and can be achieved.

- **ACHIEVING UNDERSTANDING AND ACCEPTANCE**
 - Denial is a natural response to serious illness; overcoming denial and accepting the illness is an important stage of recovery. In recovery, people learn to understand and accept the reality of their situation and the challenges posed by their condition.
- **ENGAGEMENT AND ACTIVE PARTICIPATION IN LIFE.**
 - People often have difficulty interacting with others socially. Developing relationships and finding and developing interests may feel overwhelming and can lead to a sense of helplessness and despair. In recovery, people break through isolation and begin to actively participate in life once again. They discover new interests, learn new skills and become productive members of their communities through a variety of stimulating and useful activities. These may include but are not limited to full or part-time employment, volunteer work, etc.
- **ACTIVE COPING**
 - People are often trained to view themselves as someone who is “incurably ill” and who will “always have to be taken care of by others”. This self-view leads people to a passive acceptance of crushed dreams, a life filled with nothing but limitations, and a lack of motivation and confidence to be self sufficient. In recovery, each person comes to develop a dynamic and highly personalized set of self-help strategies and coping skills. They learn to self-monitor and self-manage their psychiatric symptoms, build important supports and deal proactively with stress and challenge, so that symptoms lessen or do not recur.
- **RECLAIMING A POSITIVE SENSE OF SELF.**
 - People are often treated as though they are their diagnosis and feel defined through their disorder. In recovery, a positive sense of self emerges, one that exists beyond the illness. People learn to accept certain personal limitations or vulnerabilities and begin to discover who they can be and what they can do in spite of them.
- **DEVELOPING A SENSE OF MEANING AND PURPOSE.**
 - Before recovery, the future often feels like a barren place, where no dream could be planted and grow into reality. In recovery, people struggle to overcome self-doubt and begin to honor themselves again. They find strengths, talents and a sense of dignity. Life takes on new meaning and people reclaim a sense of purpose or find a new purpose.
- **THE JOURNEY IS INDIVIDUAL AND UNIQUE.**
 - People do not make the recovery journey in the same way or in the same amount of time. Recovery becomes a way of life and is made up of many

beginnings and small steps. Recovery does not follow a straight course; setbacks are common and are accepted as part of the journey.

- THE JOURNEY IS NOT ACCOMPLISHED ALONE.
 - Other people strongly inspire and facilitate the process of recovery. Peer support, self-help and hope give people a sense that they are the primary experts in their own recovery process and can solve their own problems. People seek out professional helpers who will honor their authority to make their own decisions and who are able to work from a perspective of partnership. Ultimately, people with behavioral health illness are responsible for their own lives and for setting their own course.

For the Provider of Behavioral Health Services, Recovery Means:

- CHANGING PROVIDER ATTITUDES
 - All levels of both clinical and non-clinical provider staff need to develop:
 - New conceptions of people with behavioral health illness as human beings who have the potential for growth and recovery.
 - A greater understanding of the experiences and needs of such persons, including their need and their right to lead meaningful and productive lives.
 - A sense of accountability to the person receiving services. Providers cannot be responsible **FOR** people but they are responsible **TO** them.
- CHANGING THE APPROACH TO SERVICE PLANNING
 - In traditional systems of care, people with behavioral health disorders are viewed as “recipients” of care who are encouraged to have “input” into their treatment. In a system where recovery is central to service design and provision, people are welcomed as full partners in their treatment and rehabilitation. All levels and types of service planning must be driven by the goals of individual people, as they perceive them.
 - A recovery focus requires the development of more effective intervention strategies that target quality of life as well as symptom alleviation.
- CHANGING SERVICE DESIGN
 - Service re-design must include creation of new roles for people as experts and providers, and for professionals as consultants and trainers.

For People Who Teach Recovery Concepts:

SAMPLE CURRICULUM OUTLINE FOR RECOVERY TRAINING

Introduction

This outline is offered as a guide for a). teaching recovery b). incorporating the principles and practices of recovery into the teaching of other related subjects. This outline is intended for use by service providers, professional trainers, and educational institutions.

I. Goals

- A. To Develop Familiarity With Recovery Principles and an Appreciation for the Personal Recovery Process.

Objectives

- Demonstrate understanding of historical roots of the recovery process
- Differentiate various models/concepts of recovery
- Discuss spiritual aspects of the recovery process
- Demonstrate familiarity with recovery terminology and its rationale
- Develop practical knowledge of cultural biases and stigma as obstacles to recovery
- Recognize and discuss significant elements of the recovery process

- B. To Integrate Recovery Principles Into Service Delivery

Objectives

- Recognize methods for communicating hope and developing strength based service/recovery planning
- Discuss relationship between treatment and recovery in recovery oriented systems
- Recognize personal/professional obstacles to working within the recovery framework
- Identify common elements of recovery from substance abuse and mental health disorders
- Demonstrate understanding of the role of graduation from services in promoting the recovery vision
- Distinguish the roles of consumers, family members, peers and providers in recovery
- Be able to identify when a consumer is ready/not ready to begin a recovery process

II. Content Areas

- A. What is Recovery?
 - 1. Historical perspective; Where we are now, what is next
 - 2. Terminology; Sensitivity; Individuality
 - 3. Focus on life, not illness
 - 4. Spirituality
 - 5. Responsibility

- B. Role of Recovering Person

- C. Role of Peer/Family/Community Support

- D. Role of Professional
 - 1. Personal engagement
 - 2. Power/control issues
 - 3. Self-Examination
 - a. Countertransference
 - b. Personal recovery issues
 - 4. Facilitator versus Director

- E. Application of Recovery Principles in Practice
 - 1. Relationship of treatment to recovery
 - 2. Treatment, service, recovery, commencement planning
 - 3. Medication/abstinence management

- F. Systems Issues
 - 1. Survival of systems
 - 2. Integration of recovery principles for mental health and addiction
 - 3. Incentives
 - 4. CEU's
 - 5. Universality
 - 6. Stigma

INCORPORATING THE PRINCIPLES AND PRACTICES OF RECOVERY

IN THE CLASSROOM

Introduce students to the *CONCEPTS* of recovery:

- Involve recovering persons in the classroom process:
 - As "Consumer Advisors". Have students interview and/or evaluate an Advisor. Upon completion, have the Advisor provide feedback to the interviewer/evaluator. To schedule a Consumer Advisor for your classroom or training program, contact Peer Support & Advocacy Network (PSAN) 412-227-0402
 - As "Guest Lecturers". Invite recovering persons to talk with students about their own personal experiences recovering from mental illness and/or addiction. To schedule consumer guest lecturers, please contact PSAN as per above.
- Have students do a paper on recovery. Topics may include:
 - Advantages/disadvantages of recovery based service models
 - Comparison of recovery-based with non recovery-based service models
 - Describe a service model that is based on recovery principles including the model's beliefs and assumptions about mental illness and addiction, and its view of persons who suffer from such illnesses.
- Have students do a master's level research project involving a service model that's recovery-based. Examples of recovery-based service models are available through the web site resource list included in this kit.
- Have students read and discuss stories, articles etc. that are written by/about recovering persons.
- Invite a panel of speakers to the classroom to discuss recovery including time for questions and answers. To schedule speaker panels, please contact PSAN as per above.
- Introduce students to non-traditional service programs that support recovery such as the Clubhouse, Community Treatment Teams (referred to as CTT or ACT), Mobile Services, Psychiatric Rehabilitation Services, etc.

IN THE FIELD

Introduce students to the *PRACTICES* of recovery:

- Provide field placement opportunities at behavioral health agencies and programs that provide services which exemplify a focus on recovery.
- Have students keep and discuss a journal about their experience in recovery-based field placements.
- Provide opportunities for students to attend meetings of local behavioral health consumer advocate organizations such as the Allegheny county Community Service Program (CSP), the Peer Support and Advocacy Network (PSAN), and mutual assistance programs (Alcoholics Anonymous, Narcotics Anonymous, etc.).

INFORMATION RESOURCES

Provide students with *RESOURCES* to learn more about recovery:

Attached for your use are the following:

- A summary of the principles of recovery, developed by the Allegheny County Coalition for Recovery. Please feel free to duplicate and/or distribute this information as needed.
- Lists of selected bibliographies, web sites and videos with information related to recovery, compiled by the Allegheny County Coalition for Recovery. These lists are not intended to be inclusive.

If you have any questions about the information contained in this packet or would like to learn more about the Allegheny County Coalition for Recovery, please contact us:

Allegheny County Coalition for Recovery
C/O Peer Support and Advocacy Network
938 Penn Avenue, 3rd Floor
Pittsburgh, PA 15222
Phone: 412-227-0402
Fax: 412-227-0849
E-mail: mfield@peer-support.com

BIBLIOGRAPHY

Anthony, W.A. (2000). A recovery-oriented service system: Setting Some System Level Standards. Psychiatric Rehabilitation Journal.

Anthony, W.A. (1994). Characteristics of people with psychiatric disabilities that are predictive of process and successful employment.

Anthony, W.A. (1993a). Editorial, Psychosocial Rehabilitation Journal, 17(1), 1.

Anthony, W.A. (1993). Recovery from mental illness: The guiding vision of the mental health service system in the 1990s. Psychosocial Rehabilitation Journal, 16:11-23.

Anthony, W.A. (1990). Psychiatric Rehabilitation. Boston MA : Center for Psychiatric Rehabilitation.

Anthony, W.A. (1988). The psychiatric rehabilitation model as applied to vocational rehab. In vocational rehabilitation of persons with prolonged psychiatric disorders. Baltimore: The John Hopkins University Press, pp. 59-80.

Anthony, W.A. (1987). Supported employment for persons who are psychiatrically disabled: An historical and conceptual perspective. Psychosocial Rehabilitation Journal, XI(2), 5-23.

Anthony, W.A. (1986). The practice of psychiatric rehabilitation. Historical, conceptual and research base. The Schizophrenic Bulletin, 12(4), 542-559.

BIBLIOGRAPHY (cont'd)

Anthony, W.A. (1984). Predicting the vocational capacity of the chronically mentally ill: Research and policy implications. American Psychologist, 39(5), 537-544.

Anthony, W.A. (1983). The treatment and care of schizophrenia. New York: Grune and Stratton.

Anthony, W.A. (1979). The principles of psychiatric rehabilitation. Baltimore: University Park Press.

Anthony, W.A. (1978). The measurement of rehabilitation outcome. The Schizophrenic Bulletin, 12(4), 365-383.

Anthony, W.A., & Blanch, A. (1989). Research on community support services: What have we learned? Psychosocial Rehabilitation Journal, 12(3), 55-81).

Bigelow, D.A., Gareau, M.J., & Young, D.J. (1990). A quality of life interview for chronically disabled people. Psychosocial Rehabilitation Journal, 14, 94-98.

Borkin, J. R. (2000). Recovery attitudes questionnaire: Development and Evaluation. Psychiatric Rehabilitation Journal, 24 (2) 95-1003.

Chappel, J. Teaching and Learning Recovery. Substance Abuse 6 (3) 144-153

BIBLIOGRAPHY (cont'd)

Copeland, M.E. (1997). Wellness recovery action plan. USA: Peach Press.

Corrigan, P.W., Giffort, D., Rashid, F., Leary, M., Okeke, I. (1999). Recovery as a psychological construct. Community Mental Health Journal, 35, 231-238.

Deegan, P.E. (1998). Recovery: The lived experience of rehabilitation. Psychosocial Rehabilitation Journal, 11(4), 11-19.

Deegan, P.E. (1996). Recovery as a journey of the heart. Psychiatric Rehabilitation Journal, 19,(3), 91-97.

Deegan, P.E. (1997). Recovery and empowerment for people with psychiatric disabilities. Social Work in Mental Health: Trends and Issues. 11-24.

Fisher, D.B. (1994). A new vision of healing as constructed by people with psychiatric disabilities working as mental health providers. Psychosocial Rehabilitation Journal, 17(3), 67-81.

Giffort, D., Schmook, A., Woody, C., Vollendorf, D., & Gervain, M. (in press). Construction of a scale to measure consumer recovery. Psychiatric Rehabilitation Skills.

BIBLIOGRAPHY (cont'd)

Granger, D. (1994). Recovery from mental illness: A first person perspective of an emerging paradigm. Paper presented at the national forum on recovery for persons with severe mental illness, Columbus, OH. As referenced in Young & Ensing's article.

Green, L., Fullilove, M.L., Fullilove, R.E. (1998) Stories of Spiritual Awakening : The Nature of Spirituality in Recovery. Journal of Substance Abuse Treatment 15 (4) 325-331

Jacobson, N. & Curtis, L. (2000). Recovery as policy in mental health services: Strategies emerging from the states. Psychiatric Rehabilitation Journal, 23(4) 333-341.

Laudet, A., Maugura, S., Vogel, H., Knight, E. (2000) Support, Mutual Aid and Recovery From Dual Diagnosis. Community Mental Health Journal 36 (5) 457-476

Lehman, A.F. (1988). A Quality of Life Interview for the chronically mentally ill. Evaluation and Program Planning, 11, 51-62.

Lunt, A. (2000). Recovery: Moving from concept toward a theory. Psychiatric Rehabilitation Journal, 23(4) 401-406.

Mental Health Recovery. (2001). "Recovery: Definition & Components". [On-line] <http://www.mhrecovery.com/definition.htm>.

BIBLIOGRAPHY (cont'd)

Moller, M.D. & Murphy, M.F. (1997). The three R's rehabilitation program: A prevention approach for the management of relapse symptoms associated with psychiatric diagnoses. Psychiatric Rehabilitation Journal, 20, 42-48.

National Alliance of the Mentally Ill. (2001). "Increase Consumer and Family Participation in Mental Illness Services Planning". [On-line]
<http://ocd.nami.org/update/omirasec5.html>.

National Mental Health Consumers' Self-Help Clearinghouse. (2001). "Consumer Run Self-Help". [On-line]
<http://www.mhselfhelp.org/consumerrun.html>.

Prochaska, J., DiClemente, C., Norcross, J. (1992) In Search of How People Change: Applications to Addictive Behaviors. American Psychologist 47 (9) 1102-1114

Rogers, E.S., Chamberlin, J., Ellison, M.L., Crean, T. (1997). A consumer-constructed scale to measure empowerment among users of mental health services. Psychiatric Services, 48, 1042-1047.

Russinova, Z. (1998). Promoting recovery from serious mental illness through hope-inspiring strategies. Community Support Network News, 13(1), 1 & 4-6.

Spaniol, L. & Martin, K. (1994). The Experience of Recovery. Center for Psychiatric Rehabilitation.

BIBLIOGRAPHY (cont'd)

Spaniol, L., Martin, K. & Hutchinson, D. (1994). The Leader's Guide Recovery Workbook: Practical Coping and Empowerment Strategies for People with Psychiatric Disabilities. Center for Psychiatric Rehabilitation.

Spaniol, L., Martin, K. & Hutchinson, D. (1994). The Recovery Workbook: Practical Coping and Empowerment Strategies for People with Psychiatric Disabilities. Center for Psychiatric Rehabilitation.

Sullivan, W.P. A long and winding road: The process of recovery from severe mental illness. Innovations and Research, 3(3) 19-27.

Ohio Department of Mental Health. (1993). [On-line]
Wellness 10: A Curriculum Guide for the Secondary Level (1993).
Saskatchewan Education, Training and Employment.

Young, S. & Ensing, D. (1999). Exploring recovery from the perspectives of people with psychiatric disabilities. Psychiatric Rehabilitation Journal, 22, 219-231.

USEFUL INTERNET SITES FOR RECOVERY INFORMATION

General

<http://surgeongeneral.gov/Library/MentalHealth/Chapter2/sec10.html>

"Mental Health: A Report of the Surgeon General, 1999; Chapter Two: Overview of Recovery"

http://www.intentionalcare.org/abt_ic.htm

Intentional Care Learning Community: Education, evaluation and performance measurement tools for bridging the gap between the principles of recovery and service provider understanding of how to implement those principles in their day to day work with persons who have mental illness and/or addiction disease.

<http://csipmh.rfmh.org/update995.htm>

Research protocols for recovery service models

<http://www.contac.org/recovery.htm>

Information on CONTAC (Consumer Organization and Networking Technical Assistance Center)

<http://akmhcweb.org/recovery/system.htm>

Alaska Mental Health Consumer Web- "The Mental Health System: Recovery Should Be the Goal". Definition of recovery and information about [Andrea Hercha Schmook](#), another leader in the field of recovery. Includes links.

Medical Information and Research

<http://www.mhsource.com/narsad>

National Alliance for Research on Schizophrenia and Depression. Funds research and provides up to date medical facts related to brain and behavior disorders.

<http://www.ndmda.org>

National Depressive and Manic Depressive Association. Provides education regarding the nature of depressive and manic depressive illnesses as treatable medical diseases; fosters self-help; fights stigma; advocates for research.

<http://www.nimh.nih.gov>

National Institute of Mental Health. Federally funded agency whose stated mission is "to understand mind, brain and behavior, and to reduce the burden of mental illness through research".

INTERNET SITES (cont'd)

Addiction Recovery Resources

<http://onlinerecovery.org>

On Line Recovery. Drug and alcohol recovery information and links.

<http://www.unhooked.com>

LifeRing Secular Recovery. Dedicated to secular recovery from alcoholism. Includes a newsletter, an art gallery, a list of meetings, and links to related sources.

<http://www.therecoverydirectory.com>

The Drug and Alcohol Recovery Directory. A major source for drug and alcohol addiction recovery information, resources and links.

<http://www.rational.org/recovery/centers.html>

National Recovery Centers. Provides clear instruction on how to quit an addiction for good. Includes a course on AVRT consisting of eight 90-minute instruction sessions.

<http://www.recoverycentral.org>

Provides a self-test and information on treatment programs available through the National Council on Alcoholism and Drug Dependence in Kansas City.

Advocacy/Persons in Recovery

<http://www.ppainc.org>

PA Protection and Advocacy, Inc. (PP&A, INC). Federally funded non-profit agency responsible for providing protection and advocacy services to persons with disabilities.

http://www.mindlink.org.cnchost.com/about_phil.html

Advocacy Unlimited: Grass roots consumer advocacy organization whose core belief is stated as "...individuals with mental health disabilities should have the full rights, opportunities and expectations for a meaningful and personally satisfying life afforded to all members of society."

<http://www.mentalhealthrecovery.com/help/mentalhealthrecovery.html>

Self Help Strategies for Mental Health Recovery: Web site for Mary Ellen Copeland, a leader in the field of mental health recovery

<http://www.maryellencopeland.com/read10.htm>

A list of Mary Ellen Copeland's books, articles, etc.

INTERNET SITES (cont'd)

http://www.wdwb.org.nz/Documents/mental_health_recovery_newslette.htm

Mary Ellen Copeland's newsletter

<http://www.nami.org>

National Alliance for the Mentally Ill (NAMI). National advocate organization for families of persons with mental illness.

<http://www.namisc.org/MentalHealthRecovery.htm>

National Alliance for the Mentally Ill (NAMI), Santa Cruz County: Articles and links related to mental health recovery

<http://web.nami.org/update/omirabroch.html>

NAMI Recovery Omnibus Bill.

<http://www.mhselfhelp.org/pubs/boards.html>

National Mental Health Consumer's Self Help Clearinghouse: Serving on Boards and Committees; Technical Assistance Guide for Consumers

<http://www.bazelon.org>

Bazelon Center of Mental Health Law. Provides legal advocacy for the "civil rights and human dignity of people with mental disability".

<http://www.dlp-pa.org>

Disabilities Law Project. Provides free legal assistance to persons with disabilities, their families and their organizations.

<http://www.congress.org>

Congress web site. Provides information on how to find your representative by zip code, how your representative recently voted, and lists of committee members' links. Includes forms for e-mail and letters you can create, print and mail.

<http://www.mindfreedom.org>

Support coalition International. Defines rights of persons within the psychiatric service system. Resources include information on political activities and campaigns and an extensive book and video catalog.

INTERNET SITES (cont'd)

Literature and reviews

<http://mhsip.org/recovery.html>

Mental Health Statistics Improvement Program: On-line article: "A Review and Synthesis of Recovery Published and Unpublished Literature", by Ruth O. Ralph, Ph.D., Research Associate; Edmund Muskie School of Public Service (Maine); includes bibliography.

Peer Support/Self Help Resources

<http://www.mhselfhelp.org/pubs/internet.html>

National Mental Health Consumers' Self Help Clearinghouse. Consumer technical assistance guide to use of the internet for access to self-help.

<http://open-mind.org/Self-help2.htm>

Self Help and Recovery: Comprehensive listing of internet links for information about self-help and recovery. Listing addresses recovery from mental illness, addiction and co-occurring disorders.

<http://onlinerecovery.org/mh/>

On-Line Recovery Mental Health: Links and forum for mental health self help groups. Includes self-help for persons recovering from co-occurring disorders.

<http://www.soberrecovery.com/index.html>

Recovery Resources On-Line: Resources for recovery from alcoholism, addiction, substance abuse, abuse and trauma, dual diagnosis and other behavioral health problems.

<http://recoverytools.org>

Web site started by four recovering consumers and supported by the University of Kansas. Stated mission is ".....to share information about mental health recovery concepts, strategies and tools in order to promote hope, health and recovery for people who experience psychiatric symptoms." Provides information about the tools for recovery; includes links and a bibliography.

<http://www.windsofchange.com/recovering.html>

"Recovering Your Mental Health: a Self Help Guide". Self help workbook written by Mary Ellen Copeland.

<http://www.alcoholics-anonymous.org>

Alcoholics Anonymous. Mutual aid group for persons with drinking problems. Based on 12 step program of recovery.

INTERNET SITES (cont'd)

<http://www.sanonymous.org>

Schizophrenics Anonymous. Mutual aid group for persons with schizophrenia. Includes a profile of recovery designed to help members rise above their illness.

Examples of Recovery Based Service Models & State-Level Education Efforts

<http://users.cwnet.com/phelps/mpdraft1.htm>

Mission and philosophy of the mental health system for the state of California. An example of a recovery based state mental health mission.

<http://www.village-isa.org>

The Village Integrated Service Agency (Los Angeles, California). An example of a recovery based treatment model.

<http://state.il.us/agency/dhs/4470r700np.html>

"A Recovery Vision: Overcoming the Catastrophic Consequences of Mental Illness". An example of recovery information and education efforts utilized by the state of Illinois. Features a brochure that contains recovery information, resources, and a bibliography.

<http://www.newhousingopp.org/community.htm>

"New Housing Opportunities: Living in Community" (Ohio). Example of a recovery based housing model.

<http://www.sensanwyanmhrrsb.org/hm/5sub6.html>

"Mental Health and Recovery Services Board of Seneca-Sandusky-Wyandot Counties" (Ohio). Example of a recovery based employment model.

<http://www.mhrecovery.com/>

"HOPE: Harvesting Our Personal Efforts" (Ohio). Project funded by Ohio Department of Mental Health and the Hamilton County Mental Board, to provide recovery based information about mental illness for consumers, families, professionals, and the community. Example of state-level recovery based mental health information and education model.

VIDEOS

"Breaking the Dark Horse: A Family Copes With Manic Depression"

1995. A documentary by Mindy Harmon discussing her experience with manic depression. Available through Two Tents Media, Trident Production Inc. (803) 886-4795. Also available through the lending library of NAMI of Southwestern PA, 4721 McKnight Road, Suite 216, South Building, Pittsburgh, PA 15237 (412) 366-3788.

"Dead Blue" 1997. HBO film about surviving depression. Mike Wallace and others discuss their experiences with depression and recovery. Available through HBO Video, 1100 Avenue of the Americas, New York, NY 10036. Also available through the lending library of NAMI of Southwestern PA, 4721 McKnight Road, Suite 216, South Building, Pittsburgh, PA 15237 (412) 366-3788.

"Experiencing Recovery" 2002. PA Mental Health Consumer Association (PMHCA) documentary by/about persons who have made successful transitions back into their communities following hospitalization for mental illness. Available through PMHCA, 4105 Derry Street, Harrisburg, PA. 17111. Telephone: (717) 564-4930 Fax: (717) 564-4708 E-mail: pmhca@pmhca.org

"Progress and Prejudice: Treating Mental Illness in the Modern Community" 2001. Produced by the PA Department of Public Welfare in collaboration with state-wide advocacy organizations. Video about anti stigma as seen through the eyes of consumers and family members. Available through PA County MH administrators. Also available through the lending library of NAMI of Southwestern PA, 4721 McKnight Road, Suite 216, South Building, Pittsburgh, PA 15237 (412) 366-3788.

"Reach One, Teach One: The Peer Educators Project in Action" Persons with Psychiatric Disabilities including Moe Armstrong and others share their personal experiences with mental illness. Available through the Mental Illness Education Project, P.O. Box 470813, Brookline Village, MA 02447. Also available through the lending library of NAMI of Southwestern PA, 4721 McKnight Road, Suite 216, South Building, Pittsburgh, PA 15237 (412) 366-3788

"Schizophrenia: Surviving in the World of Normals" 1991. A lecture by Fred Frees, PhD about his personal experiences with schizophrenia. This video also has a companion sequence by his wife Penny Frese, **"A Love Story: Living with Someone with Schizophrenia"**. Available through Wellness Productions, 23945 Mercontile Road, Beachwood, Ohio, 44122. Also available through the lending library of NAMI of Southwestern PA, 4721 McKnight Road, Suite 216, South Building, Pittsburgh, PA 15237 (412) 366-3788.

VIDEOS (cont'd)

“You are Not Alone in Learning to Live With Bipolar Illness in the Modern Community” 2000. NAMI film of personal experiences with bipolar illness. Available through NAMI, Colonial Place 3, 2107 Wilson Boulevard, Arlington, Virginia 22201. 1-800-950-NAMI. Also available through the lending library of NAMI of Southwestern PA, 4721 McKnight Road, Suite 216, South Building, Pittsburgh, PA 15237 (412) 366-3788.

http://www.miepvideos.org/recovery/mental_health_recovery.html

The Mental Illness Education Project: Web site catalog of mental health recovery video-based educational programs and related materials. Includes a video entitled “I Love You Like Crazy” about a parent with mental illness.