



# Weekly Highlight



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Substance Abuse and Mental Health Services Administration  
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**Please share the Recovery to Practice (RTP) Weekly Highlights with your colleagues, clients, friends, and family! If you are having trouble printing or viewing the RTP Weekly Highlight in its entirety, please refer to the attached PDF.**

**To access the RTP Weekly Highlights and other RTP materials please visit:**

**<http://www.dsgonline.com/rtp/resources.html>**

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## **The Impact of Recovery on the Experience of Mental Health Nursing**

Having used a recovery approach to practice in my work for approximately 6 years, I am amazed by how this has enhanced my interactions with individuals, as well as my overall experience as a mental health nurse. Recovery is all about individuals and changing how we see people. Critical to a recovery approach is having hope for the future and the belief that each person can recover, and maintaining this hope and holding onto it—even when the individual, and others working with the person, are unable to see the recovery vision. Recovery means something different to everyone, and as a nurse, one of the greatest challenges is putting aside my own ideas and beliefs and really listening to the person.

I see examples of recovery every day in my work. It is not just in the individuals receiving services but also in the staff doing the work each day. I once ran a training on having recovery conversations where a staff member told me that since the start of training, she had begun learning things about the other employees in her unit that she had never known, even though she had worked with some of them for many years. A recovery approach involves opening oneself up to new experiences, being present, and truly engaging with people. If we look at traditional treatment services, this vision of engagement and making meaningful connections with individuals is often lacking. This way of being impacts the entire setting, both the staff and the individuals receiving treatment and services.

Oftentimes, we overlook the presence of recovery. This is very easy to do, especially if we define recovery as simply the absence of symptoms or treatment compliance. Just recently, I was doing some work in the admissions department of a facility and an

individual presented for admission. He shared that he was there to get back on his medications. He was known to the nurse from previous admissions, and she asked him if he was still in the group home. It was inspiring to hear this gentleman talk about how he was now living independently and that he had a job a couple of days a week at the Home Depot. He had run out of medicine and was aware of how this was impacting him. Without force or coercion, he made the choice to seek out treatment and get back on his medication. In hearing this story, the nurse focused on what had happened that he had run out of medication and missed a critical opportunity to celebrate his progress on the recovery journey. This is not a rare event. We fail to see the small, and even large, successes of the individuals with whom we work. A knowledge of the recovery process can change this and help us to be more open to experiences.

Another experience that recently afforded me the opportunity to really see recovery in action was when I was conducting a group session with individuals in a longer-term mental health unit. Many of these individuals had been hospitalized for a year or longer. One woman, who had a particularly challenging course of treatment, agreed to co-facilitate the group with me. The staff people attending the session were amazed at her ability to engage in the process, stay focused, and support other participants. A gentleman in the group shared his experiences working with his physician and his feeling that he finally was on a medication that really worked for him and that he was going to keep taking it, at least for the time being. He stated at the end of the group, "I have not really attended these kinds of groups before, but I guess this will be happening more. I liked being part of this." It is experiences like this that remind me of why I chose mental health nursing and of the difference that we make each day, one individual at a time.

These stories are only a few examples of recovery in practice. As mental health nurses, we see recovery every day in our work. We need to be aware of these "recovery moments" and take the time to celebrate the recovery process in everyone. As mental health nurses, we can make the difference, and we can create environments that support the growth of hope and motivation. Recovery is all about being a genuine human being and making authentic connections. It is a way of being with individuals and a true guiding force for our work. We simply need to remember that recovery is a journey, and it is a universal journey experienced by all. Our greatest contribution is in supporting this journey in individuals.

—Sabrina Cito, R.N., MSN, RST Recovery Consulting

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### **\*\*\*UPCOMING RTP WEBINAR\*\*\***

The RTP Resource Center is pleased to announce the third Webinar of its 2010 series, ***Step 1 in the Recovery-Oriented Care Continuum: Outreach & Engagement.***

It will take place **Monday, Dec. 13, 2010**, from **3:00 to 4:30 p.m. EST**. Participation is free of charge, and is open to providers, consumers, family members, policy makers, and all others interested in learning about advancing recovery-oriented practice.

**Register directly, at**

<https://www.livemeeting.com/lrs/8000963084/Registration.aspx?pageName=85vtl4jv43447lbs>

**Featured Presenters:**

**King Davis, Ph.D., LCSW**

Professor and Robert Lee Southerland Endowed Chair in Mental Health and Social Policy,  
School of Social Work, The University of Texas at Austin

**Roger D. Fallot, Ph.D.**

Director of Research and Evaluation, Community Connections, Washington, D.C.

**Laura Van Tosh**

Adult Services Coordinator, Peer Delivered Services Initiative,  
Oregon Health Authority – Addictions and Mental Health

**Moderated by:**

**Larry Davidson, Ph.D.**

RTP Project Director, Development Services Group, Inc.

**Description:**

In this first Webinar of a series that addresses various phases of the provision of mental health care, the *Recovery to Practice* Initiative will focus on the initial stage of engaging a person into care—either for the first time or following a series of disappointing experiences in which the person did not find the offered services to be responsive to his or her needs. Presenting the Webinar will be three leading authorities on different aspects of the engagement process, which all would agree is made possible through the cultivation of a trusting and respectful relationship between the practitioner and the person in need of care.

First, **King Davis, Ph.D., LCSW**, will focus on the cultural aspects of engagement and how practitioners can factor a person's cultural background, affinity, and identity into the cultivation of such a relationship. Next, **Roger D. Fallot, Ph.D.**, will address the role of trauma as a barrier to engagement and how practitioners need to presume that the people they work with have had previous traumatic experiences and attend to this history and its impact on the person's relationships, including—and especially—their

relationships with care providers. Finally, **Laura Van Tosh** will articulate the principles and practices involved in a customer service approach to engagement, tailoring a practitioner's approach to engagement based on the unique qualities and strengths of the individual, and promoting a welcoming and validating culture with people who may be reticent to accept help.

**For more information on SAMHSA's RTP project, please contact the RTP Technical Assistance Center at [recoverytopractice@dsgonline.com](mailto:recoverytopractice@dsgonline.com), or call 1.877.584.8535.**

*Sponsored by: The Office of the Associate Director for Consumer Affairs,  
Center for Mental Health Services, Substance Abuse and Mental Health Services  
Administration*

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## **NAMI Connection Recovery Support Group**

The National Alliance on Mental Health (NAMI) Connection is a weekly recovery support group for people living with mental illness, in which people learn from each others' experiences, share coping strategies, and offer each other encouragement and understanding.

NAMI Connection is expanding in communities throughout the country. These groups provide a place that offers respect, understanding, encouragement, and hope. They offer a casual and relaxed approach to sharing the challenges and successes of coping with mental illness. All groups are confidential—participants can share as much or as little personal information as they wish.

Each group:

- Meets weekly for 90 minutes
- Is offered free of charge
- Follows a flexible structure without an educational format
- Does not recommend or endorse any medications or other medical therapies

**For more information:**

1.800.950.NAMI (6264) or email [connection@nami.org](mailto:connection@nami.org)

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**Mental Health America Webinar:  
Resolana: Voice of the People—Addressing Access and Stigma  
in Tribal and Rural Communities**

**Date/Time:**

Thursday, Dec. 16, 2010, from 1:00–2:30 p.m. EST

**Description:**

Mental Health America (MHA) of North Dakota will be presenting its new documentary, “Resolana: Voice of the People,” featuring the stories of individuals in North Dakota struggling for access to basic behavioral health services and supports. In addition to the preview of this new documentary, we will hear from those working on the front lines regarding stigma and access issues, and how they’re using the documentary and other tools to improve behavioral health services and supports for individuals living in tribal, rural, frontier, and ranch communities.

**Presenters:**

Susan Helgeland, MHA of North Dakota

Mark Little Owl, MHA Nation Behavioral Health Department, New Town, N.D.

Melissa Herman, Coal Country Community Health Center, Beulah, N.D.

**To Register:**

<https://mentalhealthamerica.webex.com/mw0306lb/mywebex/default.do?siteurl=mentalhealthamerica>

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**The RTP Resource Center Wants to Hear From  
Recovery-Oriented Practitioners!**

We invite practitioners to submit personal stories that describe how they became involved in recovery-oriented work and how it has changed the way they currently practice.

**The RTP Resource Center Wants to Hear From You, Too!**

We invite you to submit personal stories that describe recovery experiences.

To submit personal stories or other recovery resources,  
please contact Stephanie Bernstein, MSW, at 1.877.584.8535 or email  
[recoverytopractice@dsgonline.com](mailto:recoverytopractice@dsgonline.com).

**We welcome your views, comments, suggestions, and inquiries.  
For more information on this topic or any other recovery topics,  
please contact the RTP Resource Center at  
1.877.584.8535 or email [recoverytopractice@dsgonline.com](mailto:recoverytopractice@dsgonline.com).**

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