HANDBOOK FOR REINTEGRATION/RECOVERY FOR INDIVIDUALS LIVING WITH A MENTAL ILLNESS

FOUNDERS HOUSE OF HOPE

PSYCHIATRIC REHABILITATION PROGRAM

Compiled by Elie Levy, Ph.D.

Reintegration is...

People who are recovering from an illness such as schizophrenia often hear the word "Reintegration." It refers to all the things you do from the time you start treatment until you meet your recovery goals.

Identifying your individual goals and discovering how to achieve them are the key to reintegration. Reintegration.com is an online resource for those persons dealing with schizophrenia and related disorders. This site provides hope and help in returning to a meaningful life that includes:

Finding Meaningful Work

One of the main goals of reintegration is a return to meaningful employment. This can be a special challenge for people with serious mental illness. But helpful resources exist in communities around the world.

Established Clubhouses offer a wide variety of services to help persons with mental illness find meaningful paid work. Other organizations provide individualized training and education programs to help prepare people for a return to full employment.

Relationships and Reintegration

Healthy relationships are essential to the well-being of everyone - especially those persons with persistent mental illnesses such as schizophrenia or bipolar disorder. But these illnesses can cause a strain on even the strongest relationships.

Many people with such illnesses live with their families, requiring the active involvement of all members of the household in the day-to-day care and support of the individual with the illness. Others live with friends.

Regardless of where the person with the illness lives, he or she will need a primary caregiver - a parent, sibling, spouse, adult child, or significant other (boyfriend/girlfriend, family friend, teacher, etc.). And regardless of the specific relationship, caregivers will face numerous issues and will have many needs in coping with the illness on a long-term basis.

Independent Living



People recovering from a serious and persistent mental illness often wonder what will happen to them as they get better. They have concerns about whether they'll be able to live on their own - and if so, where they will live and how they will take care of all their needs.

The term "reintegration" includes all the things you do from the time you start your treatment until the time you are able to meet your goals; some of the most important of these goals - such as finding the right place to live or going

back to school -involve creating ways to live as independently as possible.

Identifying your needs and learning how to get those needs met independently are critical to the process of reintegration. People have many different types of needs - some basic, some more complex. Basic survival needs include a place to live and food to eat, both of which can be obtained better with appropriate education. Feeling that your life has balance and purpose is another need most people have.

When basic needs are fulfilled, people feel inner comfort and a greater sense of peace. People who are not well may not realize they have basic needs that must be met. But these needs usually become clearer to them as they begin to recover from their illness.

Team Solutions

What is a Treatment Team?

The term "treatment team" refers to all the people who work with you to help you recover. They are called a team because they are all working with you to help you reach certain goals, solve problems, and work toward recovery. You are a very important member of your treatment team. Your treatment team is made up of people who are trained in different professional areas. They have different kinds of education, knowledge, and experience, and they each use their special skills to help you develop and reach your goals.

The goals that you and your treatment team work toward will depend on many things, including:

- How far along you are in the recovery process
- What your personal goals are
- The types of services you need (and are receiving)

Your treatment setting:

- Hospital
- Residential program
- Community mental health center
- Outpatient mental health treatment program

Examples of goals that you and your treatment team might agree to work toward include:

- Get symptoms under control
- Learn about your illness and how to recover
- Learn how to avoid having a relapse and having to go to the hospital
- Learn the skills you need to live on your own
- Find a better place to live
- Return to school
- Develop job skills and get a job
- Improve social skills
- Reduce side effects from your medicine
- Stop drinking alcohol or using street drugs

Who Are the Treatment Team Members and What Are Their Roles? Each treatment team is different. Some treatment teams have only a few members; others have many. Who is on your treatment team depends on a number of factors, including:

- Where you live
- What services you need
- What goals you're working toward
- The treatment setting you're in
- The healthcare system in your area

You probably already know some of the people on your treatment team and what they do. They are knowledgeable people who are interested in you and want to help. It's a good idea to find out which person to speak with about specific problems, questions, needs, and goals. Getting to know each person's special skills and talents, and what they can do for you can help you reach your individual treatment goals. Doctor or Psychiatrist Your doctor can:

- · Discuss your diagnosis and symptoms with you Work with you to find the medicines that work best for you
- Tell you how the medicines are likely to help you Prescribe your medicine and explain when you should take it
- Talk with you about side effects your medicine could cause
- Talk with you about other treatments you may need
- Explain what to expect for the future, regarding the course of your illness

Therapist Your therapist may be trained as a psychiatrist, psychologist, social worker, counselor, or nurse. All these professionals are trained to do therapy.

Your therapist can:

- Listen to and help you explore your concerns, hopes, feelings, goals, and problems Provide support
- Work with you to take certain tests that will provide information about your problems Help you choose goals and work toward achieving them
- Talk with you about your diagnosis, symptoms, how to recover, and how to avoid relapse

Case Manager Your case manager may be trained as a social worker, counselor, or nurse. He or she might be the person you call when you have a question or problem.

Your case manager can:

- Help coordinate your overall treatment
- Help you find and get the services you need
- Support you in emergency situations
- Represent you in certain situations
- Help you get your basic needs met (food, housing, financial assistance, transportation, etc.)

Recreation, Activity, and Occupational Therapist Recreation, activity, and occupational therapists can help you:

- Create a balanced lifestyle for yourself
- Explore your abilities and interests
- Develop interests, hobbies, and leisure activities
- Learn stress management and relaxation skills

- Explore issues and concerns in creative ways
- Enhance your self-esteem and self-image
- Improve your coordination

Residential Staff If you live in some type of group home, the residential staff can work with you at home to help you:

- Organize your daily schedule
- Learn independent living skills, such as how to cook, do laundry, etc.
- Arrange appointments and help you get to your appointments
- Manage your money
- Be a contributing member of the household
- Get along well with others

Rehabilitation Staff If you're involved in a rehabilitation program, the rehabilitation staff can work with you to:

- Identify your skills and strengths
- Choose rehabilitation goals and work toward them
- Learn the skills necessary to be successful in the things you do

Education Specialist If you'd like to return to school, an education specialist can help you:

- Evaluate your academic abilities and needs
- Choose a program, college, or university
- Obtain financial aid
- Decide what kinds of classes would interest you
- Enroll in the classes you choose

Job Coach or Vocational Rehabilitation Staff If you're interested in returning to work, your job coach or vocational rehabilitation staff can help you:

- Evaluate your work skills and abilities
- Identify the kinds of work that match your interests, skills, and abilities
- Develop and improve your work skills and abilities
- Enroll in a trade school or technical school
- Learn how to apply for jobs and do well in job interviews

Your Family and Friends Your friends and members of your family can also be very helpful to you as members of your treatment team. They can:

- Provide information about your personal and treatment history
- Help you identify problems and set reasonable goals Represent you in certain situations
- Learn about your illness and how to support your recovery
- Help you in emergency situations

You!

Although all the other members of your treatment team make important contributions to your recovery process, you are the most important team member. You can help your team do a better job of helping you by working with them. Some of the things you can do to help your treatment team be more effective are: Discuss your needs, ideas, problems, concerns, and goals with your treatment team Provide complete and accurate information about your personal and treatment history Do all you can to reach the goals you and your treatment team have agreed on Learn all you can about your illness, how to recover, and how to avoid relapse Do all you can to work toward and maintain recovery Meeting With Your Treatment Team and Working Together to Achieve Goals There may be times when it's important for you to meet with members of your treatment team every day. At other times, you may need less intensive treatment, rehabilitation, and support from them. The amount of contact you have with members of your treatment team depends on many things: Your treatment setting - hospital, respite care, residential program, community mental health center The program you're involved in - day treatment, outpatient, case management, assertive community treatment, rehabilitation. The types of services you need - crisis stabilization, symptom remission, skill building Your goals - to get out of the hospital, get symptoms under control, develop independent living skills, find a job, return to school, find a better place to live Where you are in the recovery process - in crisis, relapsing, getting symptoms under control, developing the skills you need to live, learn, and work effectively Some treatment teams meet as a group for "Treatment Team Meetings' - others don't. Even if your treatment team does meet as a group, some members may not be present. You might want to ask someone on your treatment team if they have meetings, and if you can attend them. By attending your own treatment team meetings, you'll be able to let your team members know your wants and needs, and be able to participate in making decisions about your treatment. Since family members may be able to offer additional support, you may want to ask if a family member can attend the meetings with you.

What is a Clubhouse?

A Clubhouse is a special community that helps people living with serious mental illness as they recover and rejoin the worlds of employment, independent living, family and friends, and education. Clubhouses are based on the Fountain House model, which originated in the 1940s by a small group of psychiatric patients from Rockland State Hospital in New York. There, they formed an organization called WANA, an acronym for "We Are Not Alone." WANA was a self-help group through which members provided aid and assistance to one another after leaving psychiatric hospitals. This was a revolutionary idea in its time, an era during which the mentally ill were highly stigmatized and most often regarded as hopeless individuals beyond reclamation.

"A Clubhouse like the Carriage House is not a place you come to maintain - it is a place you come to move on with your life." Andy Wilson, Employment Manager Carriage House Clubhouse, Fort Wayne, Indiana

A Clubhouse is in a permanent facility; members live elsewhere. The Clubhouse is a meeting place where decisionmaking is shared, and where members and staff work together to determine policies and future directions and to manage day-to-day activities. At the core of the Clubhouse experience is the work-ordered-day, an 8-hour period each Monday through Friday during which the business of the Clubhouse is accomplished. The work-ordered-day intentionally parallels the typical business day in the general community. Members and staff work together in an open, friendly environment to prepare daily meals, operate the switchboard, issue a newsletter, run the mailroom, operate an employment placement and support program, manage housing services, participate in advocacy on behalf of both the Clubhouses and people with mental illness generally, and do whatever else is seen as important to the life of the Clubhouse. As members grow stronger and more confident, they may choose to continue their education at a local university or return to part-time paid employment through the Clubhouse's various employment programs. Clubhouses also offer help with disability benefits; personal finances; recreation; and appropriate referrals to (and assistance with) medical and clinical services as needed. Because Clubhouse membership never expires, these organizations provide consistent and long-term case management, often coordinating multiple services from both public and private agencies. Thus, Clubhouses often become the primary source of community support, services, and case management for their members. Through the Clubhouse, members can begin to rebuild the careers and relationships which were disrupted by disabling illness. For many members, the productive routine and

welcoming community of the Clubhouse provide a degree of self-acceptance and belonging these members may have considered beyond their reach. In all cases, the Clubhouse focuses on its members' strengths, talents, and abilities, giving the members a place to explore and celebrate their 'well selves'. There are Clubhouses throughout the world. Some have active Web sites, while others can be contacted by phone or regular mail.



What Is a Healthy Lifestyle?

People have different ways of describing a healthy lifestyle. But for most, it means living life in a way that helps the person to be both physically and emotionally healthy. Many things go into creating a healthy lifestyle, including:

- Positive Relationships
- Appropriate Exercise
- Proper Nutrition
- Adequate rest

Wellness involves both choice and action. The choices you make each day, and the actions you take on those choices, can lead to a healthier lifestyle. Making positive choices in the areas of physical fitness, stress, work, relationships, medication, and nutrition - and then acting on those choices - promotes a sense of accomplishment and well-being. There are other benefits from these choices, as well. Making a life-long commitment to a healthy lifestyle can reduce the effects of chronic mental illness, give you more energy, increase your self-esteem and confidence, and help you minimize symptoms of schizophrenia or your chances for relapse. In this section, we will help you identify your wellness needs and provide specific tips on how to improve your overall well-being through diet, exercise, and a responsible approach to substance use.

Health Problems Associated With a Poor Diet The typical American diet can cause significant health problems, since it is high in fat, salt, and sugar and is apt to be low in fiber and vital nutrients. Even though most of us have healthy food options available, we tend to make poor food choices. Poor dietary habits, in combination with lack of exercise and high stress, have been connected to such health problems as obesity, coronary heart disease, high blood pressure, and diabetes. Choosing a Healthy Diet: Dietary Guidelines for Americans The Dietary Guidelines for Americans were established by the Federal government to help people choose foods that will meet their nutritional requirements, promote health, support active lives, and reduce the risk of chronic disease. These Guidelines are meant to be simple and sensible suggestions for people trying to maintain a healthy lifestyle.

Guideline #1: Eat a Variety of Foods. Guideline #2: Balance the Food You Eat With Physical Activity to Maintain or Improve Your Weight. Guideline #3: Choose a Diet With Plenty of Fruits, Vegetables, and Grain Products Help reduce your risk of heart disease and stroke.

Guideline #4: Choose a Diet Low in Fat, Saturated Fat, and Cholesterol

Guideline #5: Choose a Diet with Moderate Sugars Foods. Guideline #6: Choose a Diet with Moderate Salt and Sodium.

Guideline #7: Avoid Alcohol.

The Role of Water in Good Nutrition The importance of water in the diet cannot be overestimated. Healthy lifestyles that include exercise and a high fiber diet require plenty of water intake. Experts suggest eight 8-ounce glasses of water daily. For anyone participating in a regular exercise program, 9-13 glasses of water are recommended. Dealing with Weight Gain Which Might Be Caused by Your Medications Some of the medicines you are taking for your mental illness may increase your appetite. There are things you can do, however, to decrease your desire to eat. Here are some helpful hints on controlling hunger:

- Take a walk when you feel hungry.
- Drink a glass of water or other sugar-free beverage.
- Eat a rice cake or a half cup of raw vegetables.
- Chew sugar-free gum or suck on sugar-free mints.

Know the difference between "mouth hunger" (the urge to use food to soothe feelings of boredom, nervousness, anger, sadness, or stress) and "stomach hunger" (your body's way of telling you it really does need food).

Many patients who gain weight while taking medications for mental illness do so because they had been homeless or jobless due to their illness and simply eat more as they get better. With medication, they may be able to work and buy regular meals (including fast food), and they may live in a residence where meals are provided.

A study was done recently on a a program to control weight gain in 32 patients with schizophrenia or schizoaffective disorder. These patients had taken medications for at least one year and lived in an adult care facility for formerly homeless persons with serious mental illness.

The program consisted of health services (medical and psychiatric), nutrition care (a low-calorie diet and nutritional education), and supportive care. In general, as symptoms of schizophrenia improved, the patients paid more attention to their health and care. Their weight gain decreased as the result of the program, and this change occurred regardless of what medications were being taken.

The study concluded that a patient's diet appears to be a primary cause of weight gain, with the medication playing a much less important role. The study also suggested that mental health professionals should actively suggest diet and other lifestyle changes whenever they prescribe medications which could cause the patient to gain weight.

Patients in the study took their medications 100% of the time, since they were being supervised. Thus, they got the full benefits of their medications, and as their symptoms decreased, their desire to care for themselves increased.

These patients proved to be very responsive to suggestions and activities regarding weight, blood sugar levels, and cholesterol levels. And as the patients began to see the program's benefits, they participated more actively and successfully.

Overall, the study strongly suggests that if patients follow their total treatment plan and develop healthy eating

habits, medications should not cause any serious weight gain.

Study Results: Managing Weight Gain in Patients Taking Medications for Mental Illness TOP >>

Exercise

Although food and proper eating habits are essential to life, food alone cannot make you truly healthy. Exercise is also fundamental in maintaining a healthy body and an active lifestyle.

Exercise can help you mentally as well as physically. Psychological benefits such as a greater sense of well being, increased self-esteem, and decreased anxiety or depression have all been linked to exercise.

Benefits increase dramatically when exercise becomes a lifelong commitment. Experts continue to remind us that the many health benefits offered by exercise should cause us to make it a lifetime priority.

Regular exercise helps to:

- Prevent heart disease (aerobic)
- Normalize blood pressure (aerobic)
- Regulate blood sugar
- Prevent bone mineral loss
- Support body structure
- Promote weight loss
- Promote flexibility

If you are over 40, unaccustomed to exercise, or have medical problems, be sure to see your doctor before undertaking an exercise program. Some of the medical problems that may require your doctor's OK before beginning an exercise program include:

- History of heart disease (heart attack, cardiac arrest, valve disease, congestive heart failure, myocarditis, or any other heart disease treated by a doctor)
- History of chest pain diagnosed as angina
- Any unknown cardiac dysrhythmia (abnormal heartbeats) or conduction defects
- History of stroke
- Use of medications for the heart or blood vessels during the last 3 months

Tips for Getting Started If you haven't been exercising, it's important not to start off too fast or too hard. If you overdo it, you are likely to end up feeling discouraged or causing strain, pain, or injury to yourself. Keep the following points in mind as you get started with your exercise program:

- Talk to your doctor before beginning a new program
- Begin gradually
- Give yourself a one-month trial period
- Expect some initial discomfort
- Try to focus on the process of exercise (rather than competing with others or yourself)
- Remember to warm up before you exercise, and cool down afterward
- Coordinate your eating and exercise (avoid exercising less than 90 minutes before a meal, and don't eat until 1 hour after exercising)
- Don't exercise when you feel sick
- Exercise with a friend

Resources to Help You Get Started There are many resources in most communities, ranging in cost from free to expensive. The key is to know how and where to look for these resources. Resources in your community could include the following: Parks and Recreation Centers: These sometimes offer free or low-cost options for exercise (walking trails, softball fields, basketball courts, tennis courts, swimming pools, etc.) Places of Worship: Many churches or other places of worship have facilities, as well as organized teams that play throughout the year. This can be a great way to begin exercising as well as socializing. The YMCA: Though not free, most YMCAs have wonderful facilities and trained professionals to assist you with your exercise program. And the "Y" is also another great way to meet people with similar exercise goals.

When to Stop Exercising

If you experience any of the following symptoms during exercise- STOP and REST, and call your doctor if your symptoms persist:

- Dizziness or lightheadedness
- Abnormal heart rhythm
- Pain in the chest under the breastbone, and/or down the arm
- Pain in the knees, feet, or ankles

Keeping Up Your Motivation Many times, we begin an exercise program and then gradually abandon it as time goes on. One thing is certain - in order to reap the full benefits of exercise, you need to continue exercising for a lifetime. If you stop exercising, much of the fitness you have gained will be lost within 2 weeks.

One way to increase your general level of exercise is to use routine activities in addition to your planned program. Routine activities are things like yard work, doing the laundry, and cleaning the house. Some suggestions for easily increasing your activity level through your daily routine include:

- Get off the bus several blocks from home and walk the rest of the way.
- Take the stairs instead of elevators and escalators.
- Find a mailbox 10 minutes away from your home or work and walk there to mail letters.
- Sit instead of lying down. Stand instead of sitting. Move in place instead of standing still.
- What are 3 things you could do to incorporate exercise into your daily schedule?

Sobriety Addictive disorders involving substance abuse have provided one of the most daunting challenges to healthcare professionals since organized medicine began. These disorders become an even greater challenge when psychiatric disorders are also present. Finally - after years of debate and a few questionable approaches - a successful partnership between psychiatric treatment and substance abuse treatment has at last been developed within the past 10-15 years. While medication-based treatments for addiction have been tried (and continue to be studied), most experts now appear to agree that the 12-step Alcoholics Anonymous (AA) and Narcotics Anonymous (NA) approach remains one of the best interventions. Since the early 1990s, the "double trouble" concept and "double trouble" groups based on the AA/NA model have begun to flourish. For persons with both a primary psychiatric disease and a substance abuse disorder, the "double trouble" model incorporates psychotropic medication into the substance abuse recovery process. In particular, the "double trouble" model recognizes the need for anti-psychotic medication and mood stabilizers that are non-addictive, as opposed to the barbiturates and benzodiazapines which can

complicate the substance abuse recovery process. These two medication groups need to be used with great care when there is an addictive disorder present. Almost every community around the world now has a local chapter of the AA/NA 12-step program. Getting in touch with one of these groups is a good place to start on your journey to recovery. In addition, a good psychiatric consultation can help clear up the various symptoms and disease states that may be getting in the way of your recovery and reintegration process.