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Illness Management and Recovery

March 11, 2014

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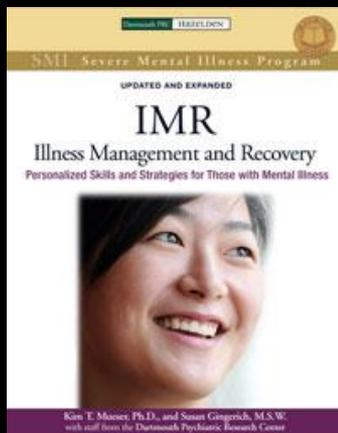


Illness Management and Recovery: An Overview for GAINS

March 11, 2014

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Dartmouth PRC HAZELDEN®



Topics of Webinar

- ✓ Overview of the *Illness Management and Recovery (IMR)* program; update on recent research
- ✓ Individually defining recovery and setting recovery goals
- ✓ IMR modules and their contents
- ✓ IMR for clients with involvement in the criminal justice system
- ✓ Questions and discussion



Development of the *Illness Management and Recovery (IMR)* Program

- Part of SAMHSA's Evidence-Based Practices (EBP) project
- Goal of IMR: to teach people to manage psychiatric disorders, facilitating their ability to make progress toward personal recovery goals
- Based on review of research and input by stakeholder committee



Components of Effective Illness Self-Management (based on research)

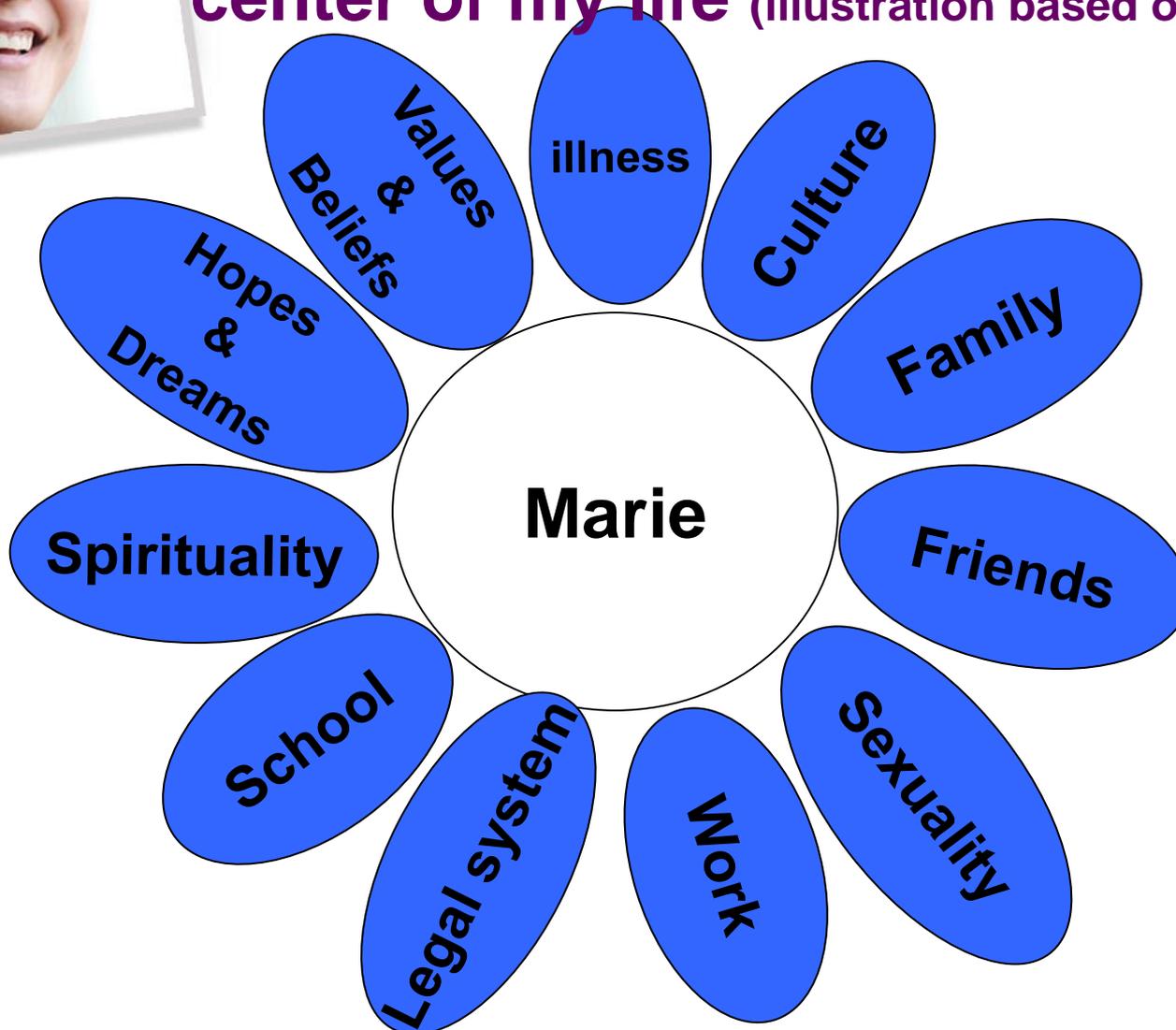
- **Psychoeducation**
- **Behavioral tailoring for medication adherence**
- **Relapse prevention training**
- **Coping skills training**
- **Social skills training**



What is Recovery?

- Intensely personal
- Often focused on functional outcomes such as relationships, school, parenting, work
- Often related to improving quality of life
- For many, it means “recovering my life, getting my life back”
- For some, recovery is more like “having a life” in the first place

Recovery: Putting myself back in the center of my life (illustration based on P. Deegan)





Recovery Goals

- **Individualized**
- **Personally meaningful**
- **Range from the modest to the ambitious**
- **Exploration of personally meaningful goals may be needed to engage consumer *before* introducing IMR program**
- **IMR Goal-Tracking Sheet is used to identify, break down, and follow up on goals**



Goal Tracking Sheet

IMR Goal-Tracking Sheet

Use this sheet to record progress toward goals, including steps taken, new steps, new short-term goals, and new recovery goals.

Name: _____

Date that personal recovery goal was set: _____

Personal recovery goal: _____

Personal recovery goal achieved (date): _____ Modified (date): _____

Short-term goal related to personal recovery goal:	Short-term goal related to personal recovery goal:	Short-term goal related to personal recovery goal:
Steps: 1. 2. 3. 4.	Steps: 1. 2. 3. 4.	Steps: 1. 2. 3. 4.
Start date: _____	Start date: _____	Start date: _____
Date reviewed: _____ Achieved? <input type="checkbox"/> Fully <input type="checkbox"/> Partially <input type="checkbox"/> Not at all	Date reviewed: _____ Achieved? <input type="checkbox"/> Fully <input type="checkbox"/> Partially <input type="checkbox"/> Not at all	Date reviewed: _____ Achieved? <input type="checkbox"/> Fully <input type="checkbox"/> Partially <input type="checkbox"/> Not at all
Modified/next steps:	Modified/next steps:	Modified/next steps:

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Using the IMR Goal-Tracking Sheet

- **Help consumers consider long-term goals that have to do with improved role functioning (parenting, working, going to classes, homemaking)**
- **Help consumers evaluate the obstacles to leading a more independent life, and identifying goals to help overcome those obstacles**
- **Help consumers break down into three short-term goals**
- **Help consumers break down short-term goals into manageable steps**
- **Be able to answer the question: “How will we both know when this goal is achieved?”**



Follow up on Goals

- **Check on progress towards goals regularly (for individuals, weekly or almost every week; for groups, review goals of members on rotating basis, so that everyone's goals reviewed at least once a month)**
- **Reinforce steps that were taken**
- **Help person problem-solve obstacles**
- **Help person learn additional skills that will help him or her achieve goals**
- **Each member of the treatment team can contribute to helping the person take steps towards his or her goals**



The Illness Management and Recovery (IMR) Program

IMR is a step-by-step program that helps people set meaningful goals for themselves, acquire information and skills to develop more sense of mastery over their psychiatric illness, and make progress towards their own personal recovery.



Core Ingredients of IMR

- **11 Curriculum-based modules**
- **User-friendly handouts for participants**
- **Practitioners' Guidelines for each module**
- **Implementation Guide (“Basics of IMR”)**
- **Intro video and practice demo video**



Logistics of IMR

- Can be provided to individuals or groups
- Practitioners use motivational, educational, and cognitive-behavioral techniques
- Participants set & pursue personal recovery goals
- Skills practiced in session & as home assignments
- Significant others are involved whenever possible
- Completed in several months of twice-weekly or weekly sessions (typically between 6 & 12 months)



IMR primarily addresses

- **Schizophrenia or schizoaffective disorder**
- **Bipolar disorder**
- **Major depression**
- **Can be adapted for other disorders**



Examples of Settings Where IMR can be Provided

- **Community mental health centers**
- **Inpatient treatment programs**
- **Clubhouses**
- **Residential programs**
- **Criminal justice settings, such as prisons or jails**



Two Editions of IMR

- **IMR second edition available on line from SAMHSA.gov**
- **IMR, third edition available to buy from Hazelden Publications**



Both editions of IMR have:

- **Series of modules with educational handouts and teaching guidelines**
- **Outcome scales**
- **Suggestions for implementation**
- **DVD (introduction for both clients and practitioners, clinical vignettes for practitioners)**
- **Fidelity scale**



Enhancements in IMR, Third Edition

- Handouts broken into topic sections
- Building Social Support, Coping with Symptoms modules significantly enhanced
- Prompts in handouts to engage in practice
- Options for home practice
- Healthy Lifestyles module added



Modules

Module	Title
1	Recovery Strategies
2A	Practical Facts about Schizophrenia
2B	Practical Facts about Bipolar Disorder
2C	Practical Facts about Depression
2D	Practical Facts about Mental Illness (a module to use with groups)
3	The Stress-Vulnerability Model
4	Building Social Support
5	Using Medications Effectively
6	Drug and Alcohol Use
7	Reducing Relapses
8	Coping with Stress
9	Coping with Persistent Symptoms
10	Getting Your Needs Met in the Mental Health System
11	Healthy Lifestyles (only in Hazelden)



IMR Supporters

- **Other staff members involved in client's care/treatment have capacity to be IMR supporters**
- **Support participants in learning and putting into practice the strategies and skills learned in IMR**
- **Help participants complete home practice assignments, practice skills, implement coping strategies, and take concrete steps towards goals**
- **Communicate with team about progress and challenges**



Advantages to Providing IMR

- Can be provided individually or in a group
- Structured but flexible curriculum
- Includes skills designed to be useful in person's daily life and to help them to achieve personal goals
- Other staff can play a regular role in prompting and reinforcing strategies and skills
- Sessions are lively; including role play, activities, following up on goals, celebrating completion of modules
- Weaves recovery with goals and skills in a cohesive way



Special Advantages for Justice Involved Adults

- Can facilitate community integration
- Can help people improve their ability to understand and follow rules
- Can help people reduce disciplinary problems and victimization
- Can increase people's use of psychiatric medications
- Can give a new, more hopeful focus for participants and a new focus for staff



Experience with Justice Involved Population

- **No reliable statistics on extent to which IMR has been implement with individuals with justice system involvement**
- **However, multiple clinical examples:**
- **Drug court in St. Louis**
- **Forensics Unit of the State Hospital of Missouri**
- **Center for Urban and Community Services**
- **TASC jail diversion project in the Bronx**



Common Challenges for Forensics Population

- 1. Avoidance of the trauma of incarceration may interfere with establishing recovery goals**
- 2. Useful adaptations to the jail or prison can be counter-productive to illness management & working on recovery goals in the community**
- 3. Some individuals have developed thinking styles or beliefs that encourage criminal behavior**
- 4. Many have problems with anger, frustration, & boredom**



1. Difficulty Talking About Experiences in Jail/Prison

- **Help people process their experiences in jail, prison, etc. through gentle exploration, empathic listening**
- **Take a narrative approach to focusing on upsetting events**
- **Emphasize the personal strengths individuals used to cope with their experiences**
- **Provide hope that things can be different in the future**
- **Explore motivation to avoid re-incarceration**



2. Counterproductive Adaptations to Incarceration

- **Be alert to adaptations that people have developed for coping with incarceration**
 - **Not revealing personal problems to others**
 - **Emphasis on self-reliance and avoidance of depending on others**
 - **Distrust of other people**
 - **Aggression in the face of threat**
 - **Taking one day at a time instead of planning ahead**
- **Help the person evaluate whether coping skills for incarceration are useful or not useful for developing illness self-management skills and identifying and pursuing personal goals**
- **Help person see the difference between coping skills for one situation vs another**
- **Encourage person to try new coping strategies in IMR**



3. “Criminogenic Thinking”

- Be alert to signs of unhelpful thinking styles such as “The usual rules don’t apply to me,” “All that matters is looking out for #1” “I’m entitled to a free ride because of what I’ve been through”
- Use cognitive restructuring to explore and help individuals challenge these maladaptive beliefs
- Examine the evidence for and against these beliefs
- Help adapt their belief to be more accurate/helpful



4. Lack of Skills for Managing Emotions

- Use social skills training to help people learn ways to express anger and other negative feelings more constructively
- Help people find enjoyable (and legal) things to do with their time
- Teach step-by-step problem-solving method (e.g., identify problem, brainstorm solutions, identify the pro's and con's of solutions, choose one, and make a plan to use it)



Other Potential Issues

- **Security issues for incarcerated individuals**
- **Attitudes of other staff members (e.g., “everyone just deserves punishment for their actions; they’ ll learn”)**
- **Confidentiality**
- **Setting meaningful personal goals while incarcerated**
- **Scarcity of opportunities for individuals to practice skills they are learning**



Closing Comment

“For most of us, it is the hope that we can achieve our personal goals that gets us out of bed each morning. IMR can provide people with a tool-box for achieving those goals.”

Quotation from participant in an ACT+IMR group.



- Questions and Discussion

IMR Discussion Groups

“Ask the Experts” discussion sessions

- **Kim Mueser, PhD**, Center for Psychiatric Rehabilitation at Boston University
- **Susan Gingerich, MSW**, Illness Management and Recovery Program
 - **Thursday, March 20, 2014 from 4:00 – 5:00 pm ET**
Register: <http://prainc.adobeconnect.com/imrreg/event/registration.html>
 - **Thursday, April 3, 2014 from 1:00 pm – 2:00 pm ET**
Register: <http://prainc.adobeconnect.com/imrreg2/event/registration.html>
 - **Friday, April 4, 2014 from 2:00 pm – 3:00 pm ET**
Register: <http://prainc.adobeconnect.com/imrreg3/event/registration.html>
 - Webinar and discussion groups will be archived on the GAINS Center website at: http://gainscenter.samhsa.gov/topical_resources/ebps.asp





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