7 Definitions

Defining personal recovery

There is no single definition or description of recovery. Starting with the initial assumption that personal recovery is different for everyone, it is defined within this framework as ‘being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues’.

Defining a recovery-oriented approach

All people aspire to live, love, work and enjoy themselves in a community of their own choosing and to create a happy and meaningful life for themselves. It is no different for people with lived experience of mental health issues. A recovery-oriented approach supports people with mental health issues to live well and to live the life they choose (New Zealand Mental Health Commission 2001; Shepherd, Boardman & Slade 2008). A recovery-oriented approach is not linked with any particular model, nor is it confined to any particular service setting or phase of care (Victorian Department of Health 2011a). Defining characteristics of a recovery-oriented mental health service include:

- developing and drawing on their own expertise and resources as well as the experiences and resources of people with lived experience of mental health issues
- supporting people as they take responsibility for and reclaim an active role in their life, mental health and wellbeing
- supporting people to embrace their strengths, resilience and inherent capacities for living a full and meaningful life of their choosing
- supporting local communities to accept, welcome and include people with mental health issues
- embracing and enabling people with mental health issues, their families and their communities to interact and draw benefit from one another (New Zealand Mental Health Commission 2001)
- recognising the possibility that anyone accessing the service may have a limited experience of unresolved trauma underlying their mental distress and that recovery evolves from the lived experience of trauma as well.

Defining recovery-oriented mental health practice

Recovery-oriented mental health practice refers to the application of sets of capabilities that support people to recognise and take responsibility for their own recovery and wellbeing and to define their goals, wishes and aspirations.

Capabilities for recovery-oriented practice and service delivery encompass underlying core principles, values, knowledge, attitudes and behaviours, skills and abilities. Individuals, teams and organisations need these capabilities in order to support people with mental health issues to live a meaningful and contributing life in their community of choice.
Recovery-oriented practice promotes an active and collaborative relationship between people accessing mental health services and mental health practitioners, whereby:

... people with lived experience are considered experts on their lives and experiences while mental health professionals are considered experts on available treatment services (Victorian Department of Health 2011, p.2).

For the purposes of this framework, recovery-oriented practice is understood as encapsulating mental health care that:

- recognises and embraces the possibilities for recovery and wellbeing created by the inherent strength and capacity of all people who experience mental health issues
- maximises self-determination and self-management of mental health and wellbeing and involves person-first, person-centred, strengths-based and evidence-informed treatment, rehabilitation and support acknowledges the diversity of peoples' values and is responsive to people's gender, age and developmental stage, culture and families as well as people's unique strengths, circumstances, needs, preferences and beliefs
- involves a holistic approach that addresses a range of factors, including social determinants, that impact on the wellbeing and social inclusion of people experiencing mental health issues and their families, including housing, education, employment, income, isolation and geographic distance, relationships, social connectedness, personal safety, trauma, stigma, discrimination and socioeconomic hardship
- helps families or support people to understand their family member's experiences, recovery processes and how they can assist in their recovery while also helping them with their own needs for counselling, therapy, education, training, guidance, support services, peer support and advocacy (Victorian Department of Health 2011a; Slade 2009a; New Zealand Mental Health Commission 2011; Queensland Health 2005).
- understands that people who have lived experience of unresolved trauma struggle to feel safe, considers the possibility of unresolved trauma in all service settings, and incorporates the core principles of trauma-informed care into service provision.

**Defining recovery-oriented mental health service delivery**

Recovery-oriented service delivery is centered on and adapts to people's aspirations and needs, rather than people having to adapt to the requirements and priorities of services. Recovery-oriented service delivery is welcoming of, and affords respect and safety to all people.

Recovery-oriented mental health services have a responsibility to provide evidence-informed treatment, therapy, rehabilitation and psychosocial support that assist in achieving the best outcomes for people's mental health, physical health and wellbeing (Victorian Department of Health 2011a).

Recovery-oriented service delivery is a vision and commitment shared at all levels of an organisation. It draws strength and is sustained by a diverse workforce that is appropriately supported and resourced, and includes people with lived experience of mental health issues and their family and support group.

Recovery-oriented mental health service delivery embraces and supports the development of new models of peer-run programs and services.
In the Australian context, recovery-oriented mental health services have a particular responsibility to be responsive to Aboriginal and Torres Strait Islander cultures, values, belief systems and perspectives of identity, family, mental health, physical health and wellbeing.

It is also incumbent on services to recognise and respond to the trauma experienced by Stolen Generations and Forgotten Australians. It is understood that many survivors and their families and communities continue to struggle with the health impacts arising from the trauma of forcible removal.

In advocating for the social inclusion and human rights of people with mental health issues and in seeking to reduce stigma and discrimination, recovery-oriented services work in partnership with consumer organisations and a broad cross-section of services and community groups.

**Defining mental health services**

The mental health service system comprises services and programs in which the primary or a key function is to provide promotion, prevention and early intervention, medical and psychiatric treatments, support for physical health and fitness, psychological therapies including psychotherapy and counselling, rehabilitation, psychosocial and recovery support, peer-support, community development and other support for people who experience mental health issues and their families, carers and support networks. Mental health services might also be provided by organisations that offer a broader range of health and human services.

**Defining mental health practitioner**

Mental health practitioners provide treatment, rehabilitation or support to people with a mental illness or psychiatric disability (adapted from *National Standards for Mental Health Services 2010*). They include psychiatrists, psychologists, mental health nurses, mental health counsellors, social workers, occupational therapists, consumer/family consultants, peer practitioners, psychosocial and recovery support workers, Aboriginal and Torres Strait Islander health workers, social–emotional wellbeing workers, service managers and team leaders.

Other professionals who contribute to the wellbeing of people with mental health issues include pharmacists, nutritionists and dieticians, sports exercise practitioners, physiotherapists, health promotion educators and other allied health and community practitioners.