



Mental Health
Commission
of Canada

Commission de
la santé mentale
du Canada



Putting recovery into practice

An introduction to the
Guidelines for Recovery-Oriented Practice



Putting recovery into practice

Recovery in mental health is about people living satisfying, hopeful lives and contributing to society even if they experience ongoing symptoms of a mental health problem or illness. It looks different for everyone: people should be empowered to decide what recovery means for them and what they need to achieve it.

Recovery is built on partnership

Recovery recognizes that each person is unique and has the right to determine their own path toward mental health and well-being. It also recognizes that we live in a complex society with many intersecting factors that affect mental health and well-being. As a practice, recovery requires an active, dynamic partnership between a person and their support team, which may include health-care providers, family members, friends, and others. Decisions about goals, treatments, and care are made jointly, not imposed, and can evolve over time as a person's needs and circumstances change.

Why recovery-oriented practice matters

Everyone deserves respect, dignity, and the opportunity to live a life consistent with their hopes, goals, and aspirations. These are our collective human rights. In recovery-oriented practice, all people are recognized to have strengths, passions, and purposes to celebrate and build upon. When people accessing services experience this respect and recognition, it builds hope and optimism for recovery. Health-care workers help create hope by how they interact with others and how they engage with clients, caregivers, and community partners. Health-care providers who work in partnership with people experiencing mental health problems and illnesses can support them in achieving the outcomes they are looking for, even as those aims evolve over time.

What health-care workers do and how they do it matters greatly to their clients and how they experience care. This experience can support or inhibit recovery. When a person is not included in their own treatment decisions, the experience can feel uncaring, paternalistic, and stigmatizing. Recovery-oriented practice instills hope and empowers and sustains the recovery journey. The *Guidelines for Recovery-Oriented Practice* (Guidelines) help health-care workers understand what is important to clients, encourage workers to reflect upon their practice and approaches with others, and describe how workers can best support someone's recovery journey.

All workers in the mental health service system, regardless of their role, profession, discipline, seniority, or degree of contact with the people who access services, are encouraged to implement recovery-oriented practice. Everyone can help embed the philosophy and principles of recovery throughout an entire organization – from leadership and policy development to the individual processes of care delivery, the physical environment for care, and the outreach and activities that interface with the community. The Guidelines provide a comprehensive description of the values, attitudes, knowledge, and skills that workers need to put recovery principles into practice.

Who the Guidelines document is for

The Guidelines document is meant for anyone with a stake in mental health care, including mental health professionals, staff, and volunteers; policy and decision makers; professionals in other service systems or sectors that contribute to mental health and well-being; and anyone accessing mental health services and their supporters. Different persons and populations have different needs and every organization has to tailor its recovery approach to suit the people it serves. The Guidelines document is designed with this flexibility in mind – across the spectrum of mental health conditions and life stages.

About this document

This introduction summarizes the Guidelines and gives an overview of recovery-oriented principles and what they look like in practice. It is meant for all organizations, whether they are just starting to think about adopting a recovery-oriented approach or have already done significant work in this area. For more detail on the Guidelines and how to implement its recommendations, the full document is available at mentalhealthcommission.ca/English/recovery.

Recovery-oriented practice at a glance

The six dimensions of recovery-oriented practice all have their own guidelines. These dimensions are essentially *principles* that the guidelines help put into action.



DIMENSION 1

Creating a culture and language of hope

Guideline:

- **1A:** Promoting a culture and language of hope and optimism



DIMENSION 3

Recovery occurs in the context of one's life

Guidelines:

- **3A:** Recognizing the value of family, friends, and community
- **3B:** Supporting social inclusion and advocacy on social determinants
- **3C:** Addressing stigma and discrimination
- **3D:** Building partnerships with community



DIMENSION 5

Working with First Nations, Inuit, and Métis

Guideline:

- **5A:** Supporting recovery in the context of distinct cultures, rights, and organizations



DIMENSION 2

Recovery is personal

Guidelines:

- **2A:** Recovery is person-first and holistic
- **2B:** Affirming autonomy and self-determination
- **2C:** Focusing on strengths and personal responsibility
- **2D:** Building collaborative relationships and reflective practice



DIMENSION 4

Responding to the diverse needs of everyone living in Canada

Guidelines:

- **4A:** Responsive to the diverse needs of everyone living in Canada
- **4B:** Responsive to needs across the lifespan
- **4C:** Responsive to the needs of immigrants, refugees, ethnocultural, and racialized communities
- **4D:** Responsive to gender differences and to the needs of two-spirit, lesbian, gay, bisexual, transgender, transsexual, and queer persons; their families of choice; and their communities



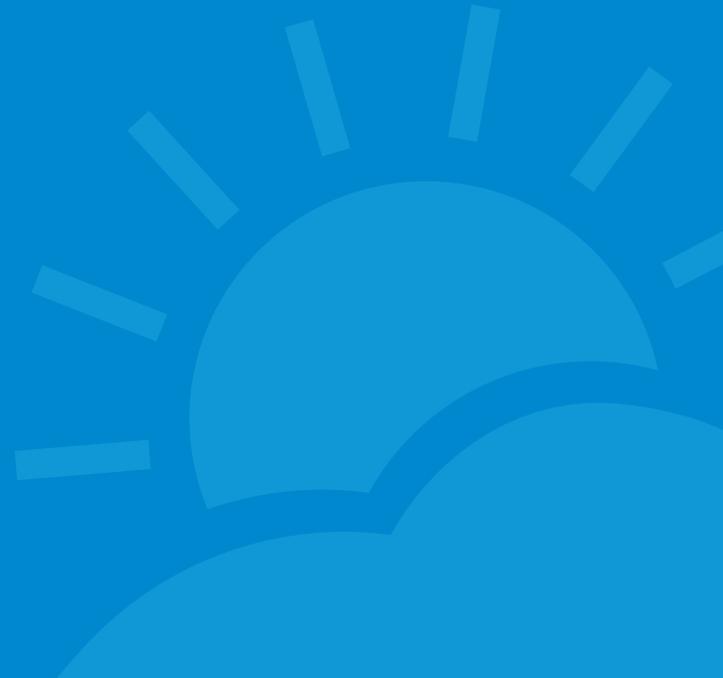
DIMENSION 6

Recovery is about transforming services and systems

Guidelines:

- **6A:** Recovery vision, commitment, and culture
- **6B:** Acknowledging, valuing, and learning from people's experiential knowledge and from families, staff, and communities
- **6C:** Recovery-promoting service partnerships
- **6D:** Workforce development and planning

The six dimensions of recovery-oriented practice:





DIMENSION 1

Creating a culture and language of hope

What it means

Recovery is possible for everyone, and hope is the ground on which the recovery journey is built. Including hopeful language in all organizational policies and practices helps create a mental health system foundation that is geared toward fostering recovery.

Guideline

1A: Promoting a culture and language of hope and optimism

Both the culture and language of recovery-oriented practice communicate positive expectations and promote hope so that people feel valued, important, welcome, and safe.

Skills and behaviours to put recovery into practice

- ✓ Offer clear communication of expectations for positive outcomes and hopeful messages about recovery.
- ✓ Provide a welcoming and accepting environment for growth using non-judgmental listening, genuineness, and warmth.
- ✓ Recognize the impact of barriers – such as poverty, limited access to housing, or implicit bias – on feelings of hope.
- ✓ Encourage connections with peer supporters who can relate to people's challenges and setbacks, and ignite hope.

NOTE: For a full list of the skills, behaviours, values, attitudes, and knowledge required to implement all six dimensions, see the complete Guidelines. www.mentalhealthcommission.ca/English/initiatives/11869/guidelines-recovery-oriented-practice



DIMENSION 2

Recovery is personal

What it means

Recovery-oriented practice recognizes every person's uniqueness and right to determine their own path to mental health and well-being. It supports people's individual journeys to wellness and helps them lead satisfying and purposeful lives in their communities of choice. Health-care workers put people at the centre of mental health practice and partner with them to build on their strengths and foster autonomy.

Guidelines

2A: Recovery is person-first and holistic

Recovery-oriented practice acknowledges the intersecting influences that affect a person's mental health and well-being and provides a range of options for services, treatment, rehabilitation, and psychosocial and recovery support.

2B: Affirming autonomy and self-determination

Recovery-oriented practice affirms a person's right to exercise self-determination and personal control, make decisions, and learn and grow through experience.

2C: Focusing on strengths and personal responsibility

Recovery-oriented mental health care focuses on people's strengths. It supports resilience and the capacity for personal responsibility, self-advocacy, and positive change.

2D: Building collaborative relationships and reflective practice

Recovery-oriented practitioners engage in reflective practice and build collaborative, mutually respectful, partnership-based relationships with people to support them.

Skills and behaviours to put recovery into practice

- ✓ Respectfully explore people's unique circumstances and identify what's important and meaningful to them.
- ✓ Foster people's beliefs in their ability to recover.
- ✓ Acknowledge a person's family, caregivers, and circles of support, and, with consent, include them as partners in recovery planning.
- ✓ Work with individuals and their support circles to determine strengths-based recovery goals and the paths to achieving them.
- ✓ Maintain engagement and offer opportunities for decision-making, including self-determination and choice, taking into account any legal considerations.
- ✓ Demonstrate kindness, honesty, and empathy in all interactions, including constructive discussions to resolve differences of opinion.



DIMENSION 3

Recovery occurs in the context of one's life

What it means

Fostering recovery requires understanding people in the context of their lives. Family, friends, neighbours, local communities, schools, workplaces, and spiritual and cultural communities all influence mental health and well-being and can play important roles in reducing stigma and supporting recovery.

Guidelines

3A: Recognizing the value of family, friends, and community

Recovery-oriented practice and service delivery recognize the unique role of personal and family relationships in promoting well-being and operates in awareness of the needs of families and caregivers.

3B: Supporting social inclusion and advocacy on social determinants

Recovery-oriented practice and service delivery advocate for addressing the unequal opportunity and inequitable living circumstances that adversely affect personal recovery.

3C: Addressing stigma and discrimination

Recovery-oriented practice and service delivery promote a positive approach to addressing mental health problems and illnesses. Stigma and discrimination are challenged through positive personal contact, education about the recovery journey, and advocacy and support for empowerment.

3D: Building partnerships with community

Recovery-oriented practice and service delivery seeks to maximize recovery by working in partnership with local communities.

Skills and behaviours to put recovery into practice

- ✓ Help people identify friends, family members, and others to involve in their care and provide an inviting atmosphere to support that participation.
- ✓ Provide accurate information about mental health issues, initiate discussions of recovery goals, and make referrals to services and resources to support those goals.
- ✓ Actively challenge stigma embedded in health-care structures, stigmatizing attitudes in service and community settings, and self-stigmatizing beliefs and views among people with lived and living experience.
- ✓ Include people with lived and living experience as partners in public education and media outreach.
- ✓ Support peer-led community partnerships and initiatives.



DIMENSION 4

Responding to the diverse needs of everyone living in Canada

What it means

Recovery-oriented practice is grounded in principles that encourage and enable respect for diversity and are consistent with culturally responsive, safe, and competent practices. It appreciates the rich diversity of Canada's population in order to better respect the choices people make in their recovery processes and determine how best to adapt services to meet their needs.

Guidelines

4A: Responsive to the diverse needs of everyone living in Canada

Recovery-oriented practices are responsive to people who are at different stages of life, have different abilities, and are from diverse backgrounds and sexual orientations, as well as those of all religious beliefs and spiritual practices, language groups, and communities.

4B: Responsive to needs across the lifespan

Recovery-oriented practices reflect the facts that recovery goals evolve throughout a person's life and that those of children and adults cannot be exactly the same.

4C: Responsive to the needs of immigrants, refugees, ethnocultural, and racialized (IRER) communities

Recovery-oriented practices are culturally sensitive, available in people's preferred language, and offered with the understanding that IRER communities often face additional social barriers to recovery.

4D: Responsive to gender differences and to the needs of two-spirit, lesbian, gay, bisexual, transgender, transsexual, and queer (2SLGBTQ+) persons and their families of choice and communities

Recovery-oriented practices acknowledge that mental health problems and recovery affect different genders in different ways and that 2SLGBTQ+ persons often face additional social barriers to recovery.

Skills and behaviours to put recovery into practice

- ✓ Proactively seek information from people about their preferences, expectations, and needs, and use that information to respond accordingly.
- ✓ Offer information to support care decisions in easy-to-understand formats, including multiple languages.
- ✓ Encourage all people to engage in social participation and relationships.
- ✓ Understand the evolution of people's needs at different stages of life, especially around transitions, and particularly encourage youth and seniors to participate in decision making.
- ✓ Use interpreters, cultural brokers, settlement workers, and faith leaders to engage with people from IRER backgrounds to understand their experiences and provide appropriate care.
- ✓ Ensure that practice is tailored and responsive to gender differences, sexual orientation, and individual needs and provides equitable access and inclusive services.



DIMENSION 5

Working with First Nations, Inuit, and Métis

What it means

Many principles grounded in Indigenous knowledge and cultures – such as promoting self-determination and dignity, adopting a holistic and strengths-based approach, fostering hope and purpose, and sustaining meaningful relationships – also form the foundation of a recovery orientation. Recovery-oriented practitioners recognize the distinct cultures, rights, and circumstances of First Nations, Inuit, and Métis and understand how recovery for Indigenous peoples is uniquely shaped by Canada’s history of colonization.

Guideline

5A: Working with First Nations, Inuit, and Métis

Recovery-oriented practice learns from Indigenous understandings of wellness and works with First Nations, Inuit, and Métis to support recovery in the context of distinct cultures, rights, and circumstances.

Skills and behaviours to put recovery into practice

- ✓ Reflect critically on your own cultural biases, prejudices, and privileges as a mental health practitioner and on the impact of colonization.
- ✓ Support action on social determinants of health such as poverty, critical shortages in access to mental health services, and a lack of access to adequate housing, food, and water.
- ✓ Provide safe and respectful spaces for people who have experienced trauma and intergenerational trauma.
- ✓ Collaborate with Elders, traditional practitioners, families, and communities while being sensitive to privacy and confidentiality issues in small communities.
- ✓ Work to address racism and discrimination that continue to have an impact on Indigenous people’s wellness, whether they are expressed through individual behaviour or manifest within systems and institutions.



DIMENSION 6

Recovery is about transforming services and systems

What it means

Achieving a fully integrated recovery-oriented mental health system is an ongoing process that will take time to implement. Recovery is a journey not only for people living with mental illness (and their families) but for everyone involved in providing supports and services. Commitment to recovery needs to be embedded into everything an organization does, including instilling the skills and resources for recovery-oriented practice in its workforce.

Guidelines

6A: Recovery vision, commitment, and culture

A recovery orientation permeates the vision, mission, and culture of mental health service organizations.

6B: Acknowledging, valuing, and learning from people's experiential knowledge and from families, staff, and communities

Recovery-oriented mental health services value, respect, and draw upon the first-hand knowledge of people with lived and living experience of mental health problems and illnesses and that of their families and friends, as well as staff and the local community.

6C: Recovery-promoting service partnerships

A recovery-oriented mental health service establishes partnerships with other organizations both within and outside the mental health sector.

6D: Workforce development and planning

Recovery-oriented mental health services prioritize building a workforce that is knowledgeable, compassionate, collaborative, skilled, and diverse; that integrates experiential knowledge; and that is committed to supporting recovery first and foremost.

Skills and behaviours to put recovery into practice

- ✓ Embed recovery principles, values, and language into the organization's mission, vision, strategic plan, and regular assessment of the recovery orientation.
- ✓ Incorporate recovery principles into recruitment, supervision, appraisal, audit, workforce planning, and operations policies and procedures.
- ✓ Develop the plan and infrastructure to support staff development and retention within a supportive, healthy, and nurturing workplace.
- ✓ Collaborate with people who have lived and living experience (and their families) and use their input and feedback to innovate and improve services.
- ✓ Make supporting recovery the shared goal of all service partnerships, with the emphasis on supporting people's decision making and transitions among partnering agencies.
- ✓ Engage in continual reflective practice to increase knowledge, examine your own work, mindsets, and habits and make progress in supporting recovery.



Learn more about building recovery into your practice

Moving toward a recovery-based approach takes time and commitment at all organizational levels. The Guidelines offer a foundation for delivering mental health care that empowers people to choose their own recovery journeys and supports them along that path.

Download the Guidelines and sign the Recovery Declaration at mentalhealthcommission.ca/English/recovery.

Ce document est disponible en français

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