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du Canada

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Fourth webinar in the RECOVERY series

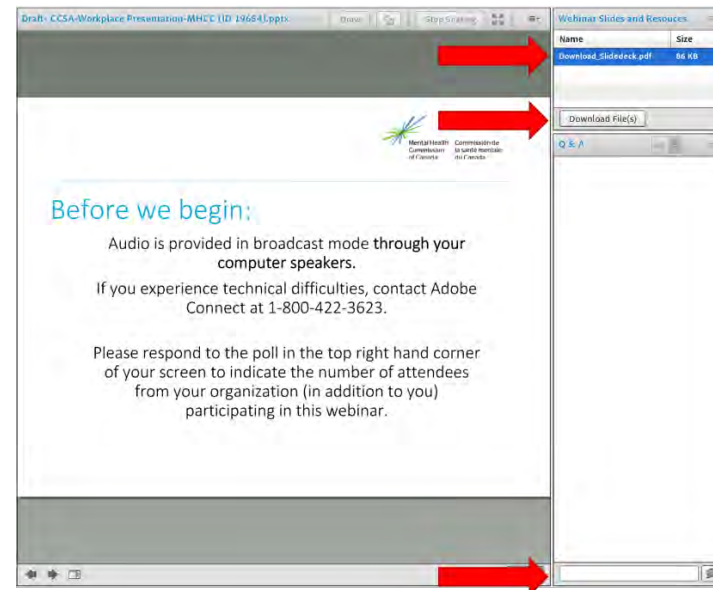
A diversity of approaches to meet
the various needs of all people
living in Canada

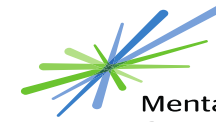
January 31, 2008

**Samuel Breau, Laurence Caron, Marie-Eve Lapointe,
Annie Pavois, Myriam Lecousy**

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Bell

Cause pour
la cause



What recovery means

It refers to the possibility of living a satisfying, hopeful, and contributing life, even when a person may be experiencing ongoing symptoms of a mental health problem or illness.

**HOPE.
DIGNITY.
INCLUSION.**



The six dimensions of recovery-oriented practice

1. Promoting a culture and language of hope and optimism
2. Recovery is personal
3. Recovery occurs in the context of one's life
4. Responding to the diverse needs of everyone living in Canada
5. Working with First Nations, Inuit and Métis
6. Recovery is about transforming services and systems





Speakers:



Marie-Ève Lapointe,
Program Advisor, ACSM Montréal



Annie Pavois ,
Nurse and psychotherapist



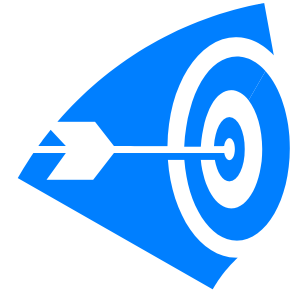
Myriam Lecousy,
MHCC Youth Committee Member



Laurence Caron (facilitator)
Project manager, anti-stigma program, AQRP

LEARNING OBJECTIVES

1. Gain a deeper understanding of the diversity of individual needs that relate to **recovery**.
2. Identify **issues and means** that relate to support for recovery through a diversity of approaches.
3. **Looking forward to watching the next webinars and taking part in them.**



Proposed schedule

1. Health and recovery 101
2. **Marie-Ève Lapointe (ACSM)**: Applying the promotion and prevention approach in mental health to adapt intervention strategies to diverse clients
3. **Annie Pavois (RRASMQ)**: Alternative options in mental health to give people choices
4. **Myriam Lecousy**: One person; a diversity of needs

5. *Questions, comments*





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OVERALL HEALTH AND RECOVERY 101

(Feel good and feed better)



RECOVERY 101

DEFINITION(S)

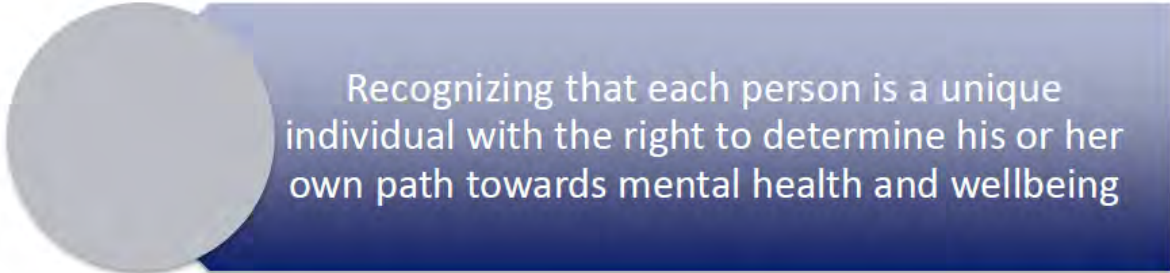
- Based on the chosen perspective, there will be impacts on:
 - The life of people in recovery
 - The support toward recovery (loved ones and service providers)
 - The recovery structure



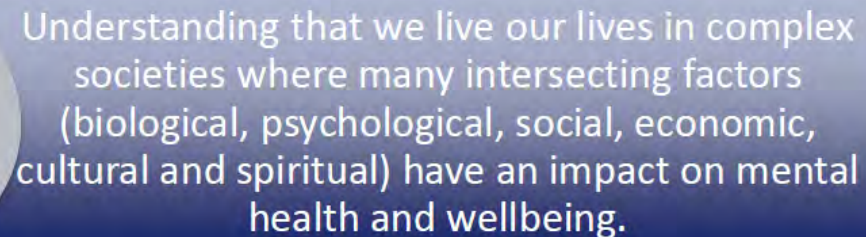
Two pillars of recovery

(according to Chodos and Thorpe of the MHCC, 2016)

Recovery approaches stand on two pillars:



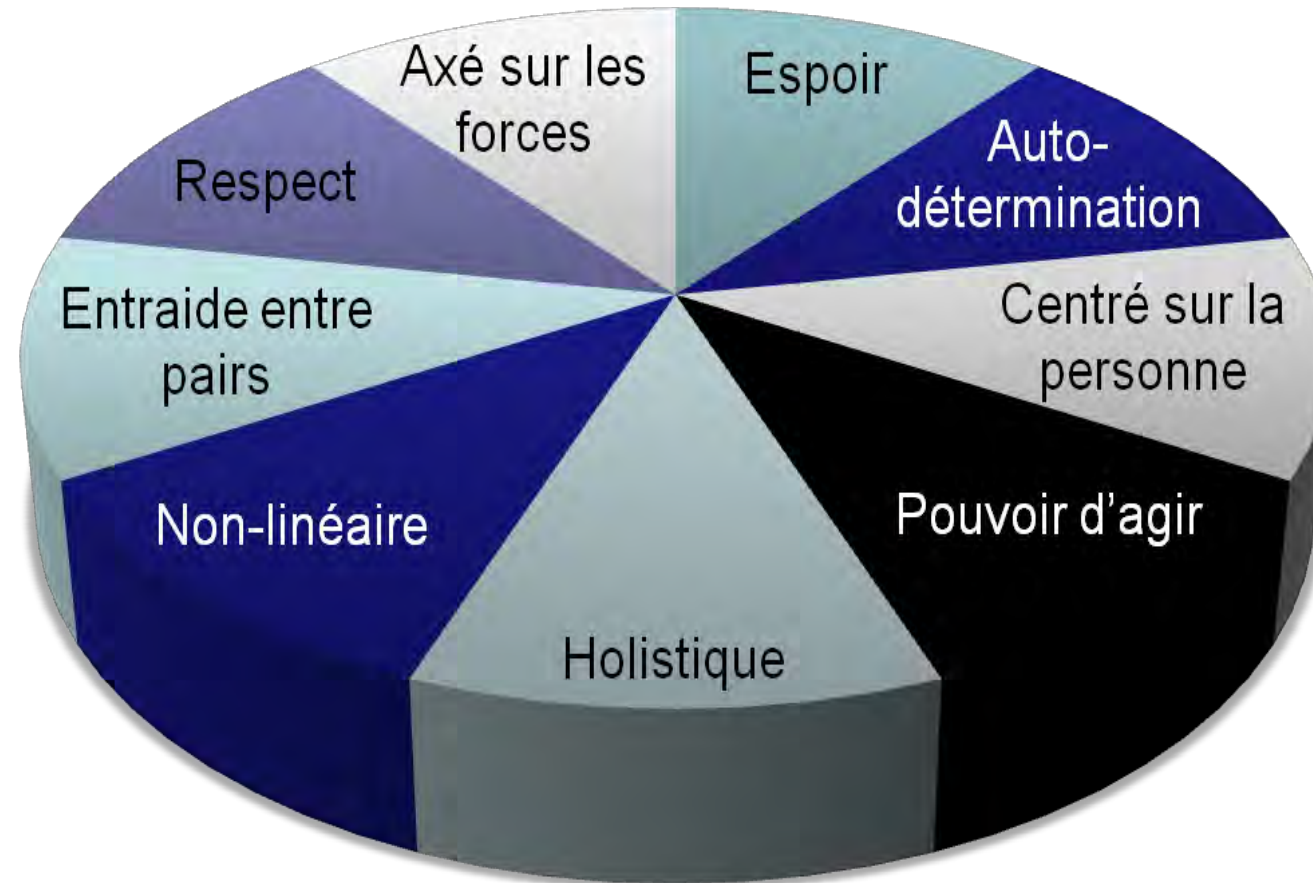
Recognizing that each person is a unique individual with the right to determine his or her own path towards mental health and wellbeing



Understanding that we live our lives in complex societies where many intersecting factors (biological, psychological, social, economic, cultural and spiritual) have an impact on mental health and wellbeing.



Components of recovery



Source: *Substance Abuse and Mental Health Services Administration (2006)*



1. Health, disease and recovery in short

CONCEPTS OF THE DAY



FULL CITIZENSHIP

(<http://www.iusmm.ca/pleinecitoyennete.html>)

In a community, “full citizenship” means that people can play an active role while having their rights, duties and abilities respected.


Full citizenship is based on solidarity and on the place given by each individual by the community.

RECOVERY 101



Let's be pragmatic here.

IT ALL BEGINS WITH HOPE



Believing that one's recovery is possible is nothing new. It's been part of the continuum of lived experience for decades (Provincial training group on recovery for housing providers, 2012)

Marie-Ève Lapointe (ACSM)

You are?

A personal strength?

You will talk about?

Applying the promotion and prevention approach in mental health to adapt intervention strategies to diverse clients

PRESENTED IN THE WEBINAR: A DIVERSITY OF APPROACHES TO MEET THE VARIOUS NEEDS OF ALL PEOPLE LIVING IN CANADA

JANUARY 31, 2008

PRESENTED BY MARIE-ÈVE LAPOINTE

ACSM — QUEBEC DIVISION, MONTREAL BRANCH

Presentation plan

- Presentation of ACSM— Quebec Division, Montreal Branch
- Concept of mental health
- Promotion and prevention in mental health
- Social determinants of health
- Diversified needs of cultural communities and seniors
- Role of the service provider in promotion and prevention in mental health
- Importance of training

ACSM— Quebec Division, Montreal Branch



NOTRE VISION

Améliorer le bien-être individuel et collectif et faire progresser les politiques sociales par l'information, la sensibilisation, la formation, la concertation et le partenariat.

NOTRE ACTION

Information et sensibilisation

Programmes, formations, colloque et conférences

Publications (guides et magazine)

Relations avec la communauté (représentation, concertation et consultation)

Prise de parole et positionnement politique

NOS FORCES VIVES

Notre conseil d'administration

Notre équipe

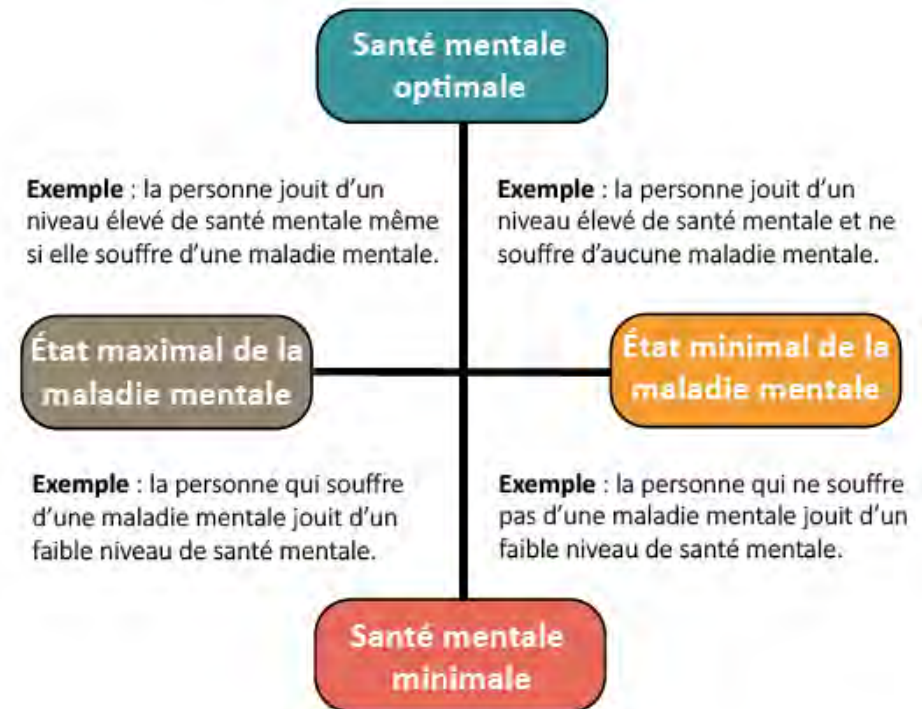
Nos membres

Nos partenaires et collaborateurs (intervenants, bénévoles experts, organismes, etc.)

Concept of mental health

There are many definitions of mental health. For ACSM-Montreal, it is “the way to feel, to think, to act and to interact with the outside world. Being in good mental health means that we can achieve our full potential, deal with everyday stresses and contribute to our community.”

(ACSM, 2014)



Promotion and prevention in mental health

Promotion

Promotion of mental health refers to measures that can **maximize mental health and wellness in individuals and communities.**

It is aimed at the general population and focuses on the **determinants of mental health** that help **increase the power to act** and the **ability to adapt** of communities and individuals.

(INSPQ, 2008)



Prevention

To reduce disease incidence by acting on **risk factors** that threaten people's mental health **before problems appear.**

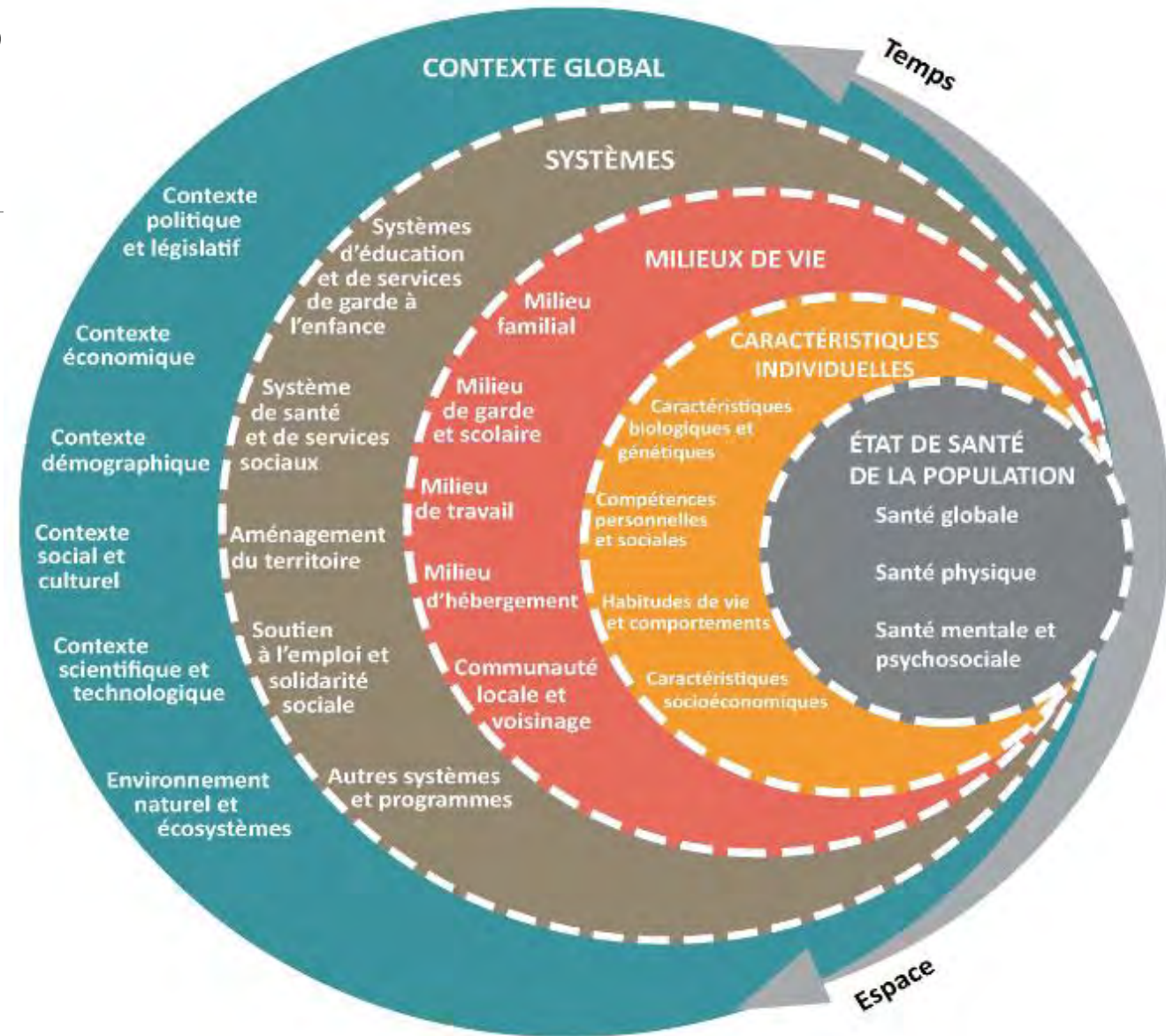
It includes acting on risk factors associated with mental disorders and pathogenic conditions, and also diseases that affect **groups of people at risk** that can lead to mental health problems.

(INSPQ, 2008)

Social determinants of health

Social determinants of health are “**individual, social, economic and environmental factors** that can be associated with health, a specific health problem or the general health status of a population.”

(MSSS, 2012)

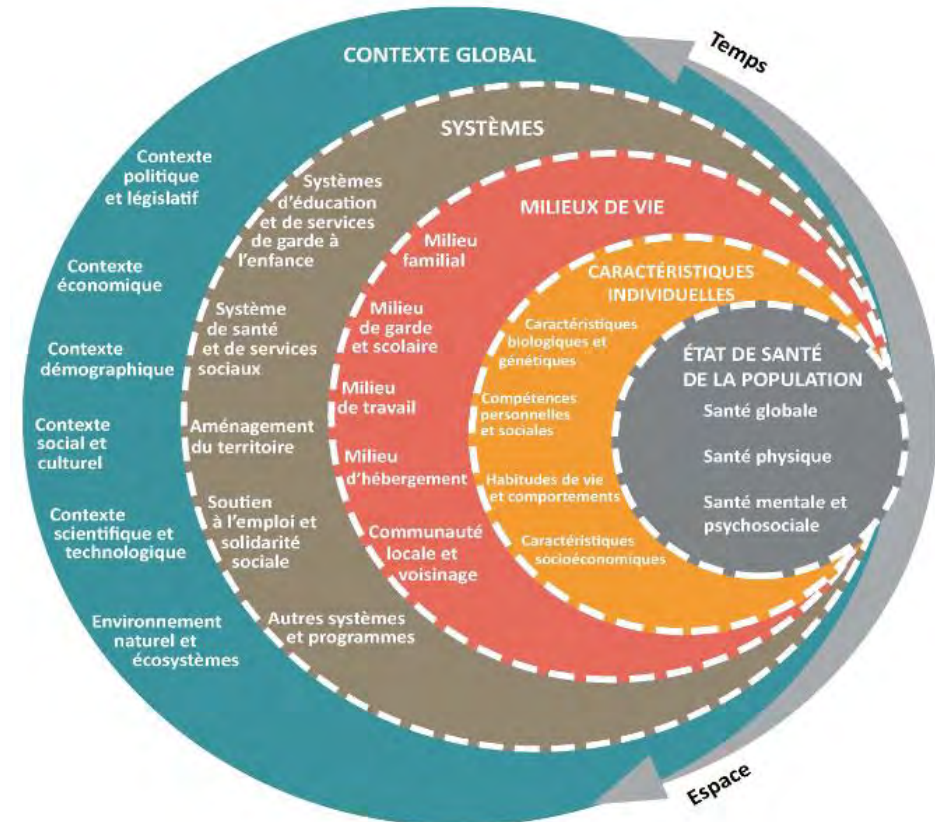


Social determinants of health

5 key messages

- Health is a resource
- Social factors greatly impact health
- Health is the result of a complex process
- Social determinants of health explain most health disparities
- Approaches to have a positive impact on social determinants of health

(Paquette, Leclerc and Bourque, 2014)



Diversified needs of cultural communities and seniors

- **The Mental Health Commission of Canada has identified three determinants that affect only immigrant and ethnocultural communities**
 - Migration
 - Discrimination
 - Language

- **Let's keep in mind the particularities of each group within a population**
 - Teenagers
 - Seniors
 - Men, women, families
 - Refugees
 - Second-generation immigrants
 - etc.

- **Indigenous peoples are non-immigrant cultural communities**

Diversified needs of seniors

When doing promotion and prevention work with seniors, it is important to:

- Address individual determinants: promotion of exercise, eating habits, vaccination, fall prevention, abuse and neglect prevention
- Look at determinants from a medical rather than psychosocial perspective (e.g. social involvement and access to resources)
- Consider the living environment and systems (accessibility, transportation, mobility, security, land planning, etc.).
- In short, we must not look at ageing from a negative perspective.

Role of the service provider in promotion and prevention in mental health

- Identify protection factors and focus on them
- Inform and educate
- Promote resources
- Build consensus
- Use the informal support network
- Clarify your role and responsibilities
- Help people take part in the decision-making process that affects them (empowerment)



The importance of training service providers



Knowledge

- Gain a better understanding of issues affecting the population of interest (history, policies, social issues, etc.)
- Gain a deeper knowledge of the realities and needs of different groups.

Soft skills

- Develop skills to work well with people from different cultural backgrounds or different levels of functioning.
- Become aware of one's own culture, values and attitudes in order to understand their role and influence in relationships with others.

Know-how

- Be able to adapt one's intervention techniques based on the situation.

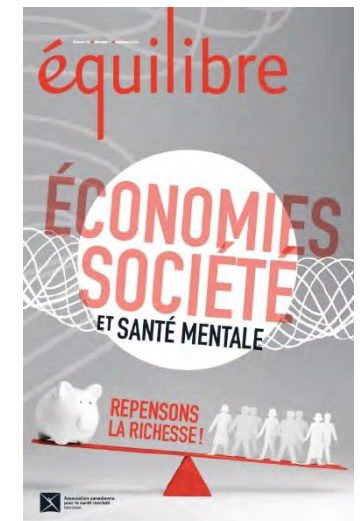
Conferences and training



We host several events each month!

Publications

- Intervention guides
- Équilibre magazine
- Resources directory



Follow us on social media!



Our website: www.acsmmontreal.qc.ca

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Thank you
for your time

(Please write down your questions)

Annie Pavois (RRASMQ)

You are?

A personal strength?

You will talk about?



*Regroupement
des ressources alternatives
en santé mentale
du Québec*

Presentation

*In a different way and in a different place...
The alternative in mental health*



Mental Health Commission of Canada, January 31, 2018

Contents of presentation

- Context of the alternative movement in mental health
- Movement philosophy
- Plurality of practices and diversity of alternative resources
- Gaining autonomy & medication management, example of an approach developed by and for affected people in order to meet their needs

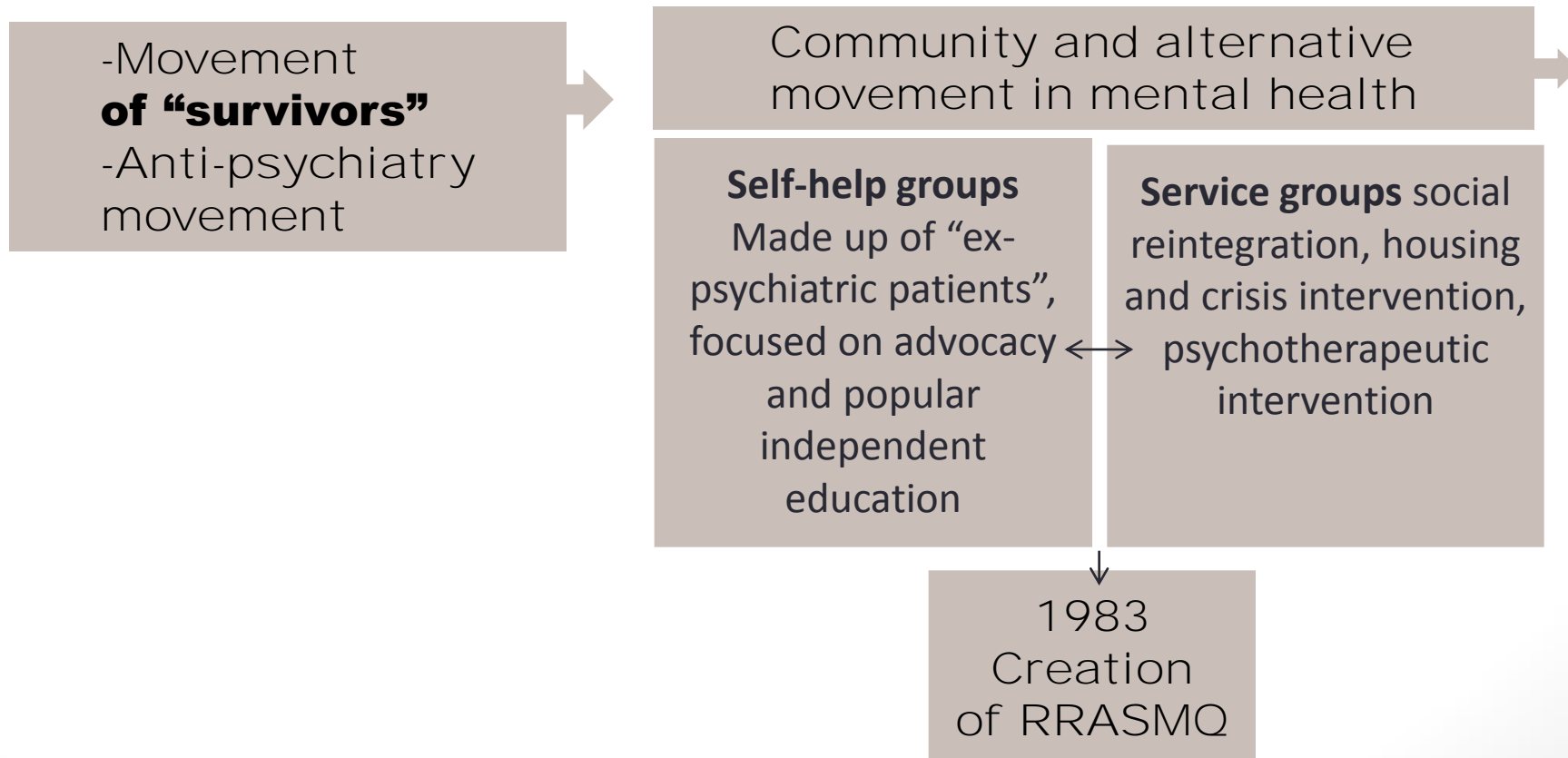


Origins of the alternative movement in mental health in Quebec

→ 1960 → → 1970 → → 1980 → 1990 →

Psychiatric system and deinstitutionalization ...

- Late 1950s: arrival of antipsychotics in asylums
- 1961: *Les fous crient au secours!* by Jean-Charles Pagé
- 1962: Commission d'étude des hôpitaux psychiatriques (Bédard, Lazure)



*The alternative in mental health is
part of a historic process of
**protesting, questioning,
affirmation and innovation.***

What is an alternative resource?

First, it is an organization that is part of the independent community action movement
Therefore it...

- Is created by the community
- Is rooted in the community
- Is part of community and democratic life
- Has a global approach and citizenship
- Has a mission that fosters social change

A few reference points on the philosophy behind the alternative movement in mental health

IN A DIFFERENT PLACE

- In places and spaces on a human scale in the community
- Partnerships and equal relationships
 - Between people living or who have lived with mental health problems
 - Between these people and people who act as stakeholders
 - Between alternative resources
 - Between other community resources

RIGHTS

- Primacy of rights
- Positive bias



A DIFFERENT WAY

- Different way to view mental health problems
 - Criticism of the dominant biomedical approach and of the social culture of performance
 - Human way of understanding mental and emotional distress
- Global concept of the person
 - Taking into consideration all aspects of life (strengths and weaknesses)
 - Recognizing the right to be different
 - Respecting integrity
- Diversity of **independent practices**



Multiple practices

- Personal and collective self-help
- Helping relation (individually or in group)
- Personal growth workshops
- Self-management of medication
- Daily support (budget, housing, food)
- Housing
- Information and training
- Support to get back to work (guidance, internship, job) or back to school
- Community support
- Creative workshops (art therapy)
- Crisis intervention
- Rights advocacy
- Facilitation of hearing voices groups
- Advocacy and mobilization on different issues

A few examples of resources

Centre pour le maintien de l'équilibre émotionnel (Montreal)

Mission

Group by and for psychiatric and ex-psychiatric patients who want to get better through peer support. Members help each other fight poverty and stigma, break down isolation, advocate for their rights and improve their mental and physical health.

Activities

- Sharing group
- Gaining autonomy & medication management group
- “Taming the voices” group
- Games
- Writing and creative workshops
- Housing support





A few examples of resources

Mission

Finding, with people, means to recover, to develop and to maintain a feeling of emotional well-being, of inner harmony and social integration.

Services/activities

- Environment
- Individual and group helping relation
- Rights advocacy
- Getting into the workforce
- Psycho education and therapeutic workshops
- Awareness and promotion of mental health
- Support to the “Tired of being poor” committee



Prise II

A few examples of resources

Mission

Support people living with mental health problems on their personal and professional journey through empowerment and inclusion.

Services/activities

- Personal and social training and development program: pre-employment abilities, support to join the workforce, art therapy, music therapy, heart coherence, medication, mindfulness, yoga, etc.
- Community life that promotes inclusion
- Psychotherapy treatment services and support toward gaining autonomy & medication management



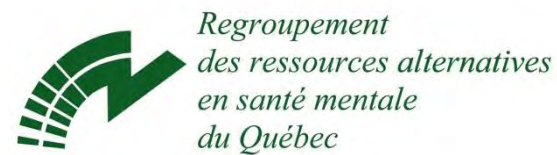


Gaining autonomy & medication management: example of an approach developed by and for the most affected people in order to answer their needs.

Origins of GAM

An approach based on:

- Listening to people's perspectives on psychotropic drugs
- A collective effort fuelled by the multitude of experience and expertise of affected people, service providers in the field, and research on mental health treatments
- Implemented in partnership with:



Points of view of people who use prescription drugs

Excerpts from Rodriguez et al., 2006, Limites du rôle de la médication psychiatrique dans le processus de réhabilitation du point de vue des usagers, Pharmacologie et santé mentale, Équilibre, Canadian Mental Health Association

What people question the most about medication practices

When medication...

- It presented as the only option to suffering
- Is given without information
- Has painful side effects
- Prevents people from working on themselves
- Is given without follow-ups

Conditions that justify using medication...

- Other ways for people to work on themselves and get support
- Sufficient information, including on side effects
- Can reduce or alleviate some symptoms and give a certain stability back
- To get specific effects in the short term

What people question the most about medication practices

- When there is no room to talk with the doctor about medication, it becomes difficult or impossible to ask question because it is often perceived as refusing treatment
- Interventions focus on controlling medication and people are often treated like children

Conditions that justify using medication...

- The doctor takes time to give meaning to the suggested experience and treatment
- When the person is in crisis or hits a spot that is too low

GAM Definition

Gaining autonomy & medication management (GAM) is a reflexion and action process about quality of life and the role of medication in order to improve well-being.

In this approach...

People can involve different actors (loved ones, peers, service providers, health professionals, community organizations) to support them in getting information and alternatives and in making decisions.

These practices provide...

- A space for dialogue where people feel free to talk about their medication.
- Access and support to get information on mental health medication and on the rights of people living with mental health issues (training, information, support).
- Workshops or meetings to explore the meanings, beliefs and symbolic aspects associated with mental health medication. What does the drug mean to yourself, to others and to society?
- Individual or group support to explore one's quality of life, understand the role and effects of drugs, assess needs, identify and mobilize resources to effect desired changes.

These practices provide...

- Tools to help people work with the prescribing doctor and other health professionals.
- Support to people undergoing different processes to change their medication (lowering, stopping, adjusting, increasing)
- Provide tools to help people inform their loved ones or talk with them about the impact of their medication on their quality of life.
- Foster dialogue between different stakeholders about the role of medication in mental health (affected people, social workers, health professionals, loved ones, etc.)

Tools to support the GAM process

Mon Guide personnel GAM

Boîte à outils GAM

Les formations:

- L'autre côté de la pilule (AGIDD-SMQ)
- Gestion autonome de la médication (RRASMQ)





Thank you
for your time

(Please write down your questions)



Myriam Lecousy

(MHCC, Bell Let's Talk)

You are?

A personal strength?

You will talk about?

Myriam Lecousy

(MHCC, Bell Let's Talk)





Thank you
for your time

(Please write down your questions)

In summary

Questions and comments

You are?

A personal strength?

Your question or comment (for whom?)





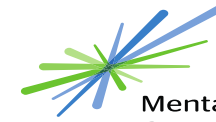
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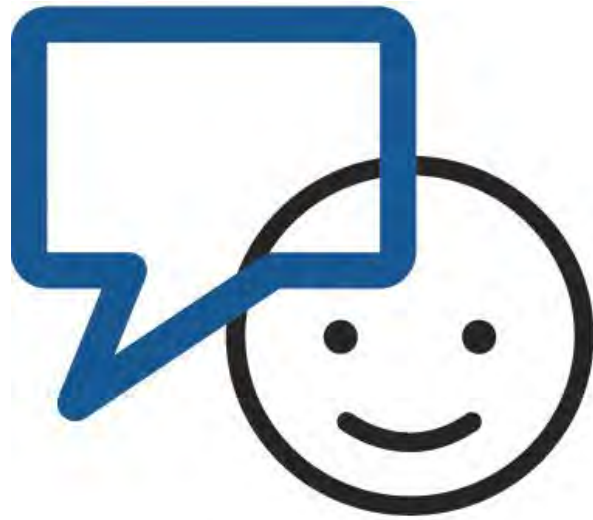
Resources

- www.rrasmq.com
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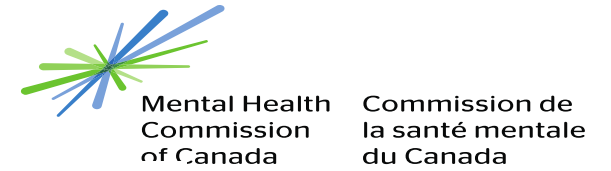
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Bell

Cause pour
la cause



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Thank you!

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