



## Supporting Recovery

Mental disorders are bio-psycho-social conditions. This means they have their origins in our bodies, minds and environments with deep-felt effects across all levels of daily functioning.

There is usually a cluster of environments, thinking patterns and behaviours that maintain the unwanted experiences. Mental disorder affects the way people think about and respond to the world as well as the health of their physical body. This is why mental unwellness can be experienced by some people as 'the way things are' rather than seeming like a disorder. Others have felt that something seemed wrong for a long time, but may have lost hope that things could ever be better for them. This all means that a person going through the experience may see it in very different terms to a loved one or mental-health professional.

### Resistance: A Natural Starting Point in the Process of Change

Professionals and loved ones often encounter resistance to the language they use to describe the experiences they observe, the idea of 'disorder' or 'diagnosis' and the suggestion of alternative coping strategies. This resistance is often seen as a lack of 'readiness to change' on the part of the individual who is struggling and this can be hard for supporters to understand. It is difficult for any of us to change the way we think, feel and respond to the world. Recovery involves changing powerful subconscious habits – these habits are 'louder' than any new alternatives and most people find it very challenging to put new choices into action. Giving up familiar behaviours is unsettling, even when those behaviours tend to have negative outcomes for the person. Accepting a mental disorder diagnostic label and the language that goes with it is not a necessary part of personal development or improving one's experiences of the world – recovery can still happen.

Rather than meeting resistance with resistance (or giving up on the person 'until they are ready') express empathy – even if someone's reality is unpleasant, being told they need to question their perception can be distressing. This is a scary and uncertain space to inhabit. It makes sense that the individual doesn't want to enter that space. They need you to be understanding about that.

#### A Common Question Is:

How I can tell whether someone is ready to engage with recovery?

#### Our Answer Is:

People are always ready to engage with recovery.

A person might not yet be ready to get a full time job, to accept someone else's perspective, to give up drinking alcohol or to start writing poetry instead of bottling things up...

**...but they are *always* ready for empathy, validation, support and information.**

## You Can Support Recovery By:

→ **Making mental unwellness acceptable.**

It is okay to experience symptoms and it is good to talk about them. Share recovery stories. Explore other people's experiences of similar things together. We need to know we are not alone.

→ **Listening and trying to understand**

If someone rejects the terms and perspectives you share, how about listening to *their* perspective of it and finding ways to relate to that?

→ **Informing yourself of multiple perspectives**

Of mental unwellness in general and the person's diagnosis specifically. This will help you to meet *their* way of understanding what they have been through rather than insisting that they meet *your* understanding. You may need to find alternative ways of talking about things or give up clinical and psychotherapeutic terms in order to talk together.

→ **Providing opportunities to start expressing thoughts and feelings**

Suppression (trying not to think things or show them) plays a significant role in intensifying internal experiences to the point that they become overwhelming. Learning to express those thoughts and feelings is scary, but crucial. You can help by creating space for expression.

→ **Discussing the support options**

Do not assume an individual knows about the treatments and supports that can help them. If you know of something that could help or they might be interested in, tell them about it. If you don't know of any options, then do a bit of research – read through the Community Resources Directory and Treatment Approaches information sheet on the Engage Aotearoa website

→ **Normalising underlying fears and hurts**

For example, *'if I thought x, y, z like you, I'd feel pretty terrible too!'*

→ **Validating expressed feelings and experiences**

While also acknowledging the presence of multiple possible perspectives – *"I can see why you might think that. I think it could also be that..."*

→ **Acknowledging the strengths you see them use**

A poor belief in one's ability to manage in the world is common across all disorders – building awareness of capacity to cope by acknowledging small achievements can really help.

→ **Role-modelling your own processes**

Be open about your own difficulties coping with life, managing relationships and trusting yourself. Talk about how you cope with things. This makes recovery processes human, rather than clinical

→ **Being satisfied with sowing seeds**

It can take a long time for a person to move from concept to action. This is not a failure on their part or anyone else's. It is a product of the process of human learning that is required for change combined with the powerful effects of environment

→ **Helping them have positive experiences in the world**

The more you can help someone create enjoyable experiences the better. Invite them to things. Point them in the direction of fun and connection.

→ **Making sure you have support**

It is not easy to support someone towards recovery or during periods of unwellness. It is often frustrating for professionals and family members. They need support too.

→ **Hoping**

Hope is an essential part of recovery. Help make it so your loved one is surrounded by people who have confidence in them and their capacity to improve their experiences. This will help them have confidence in themselves.