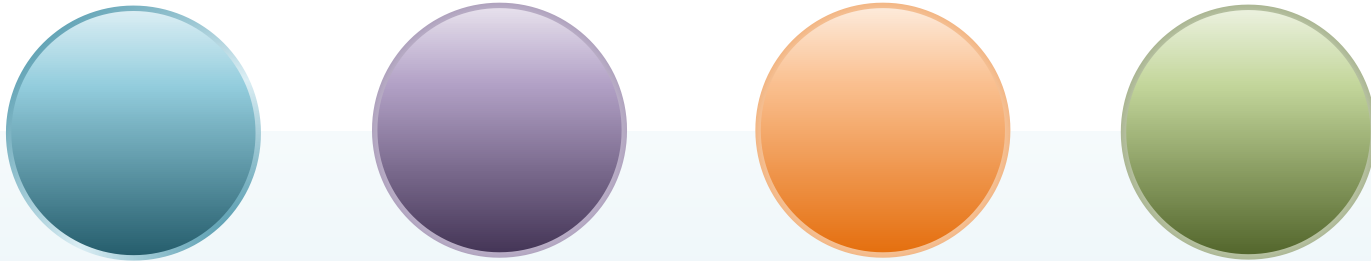


Illness (Wellness) Management and Recovery (IMR)



Presented by: Kellie Spencer

California Institute for Behavioral Health Solutions
University of Kansas – School of Social Welfare

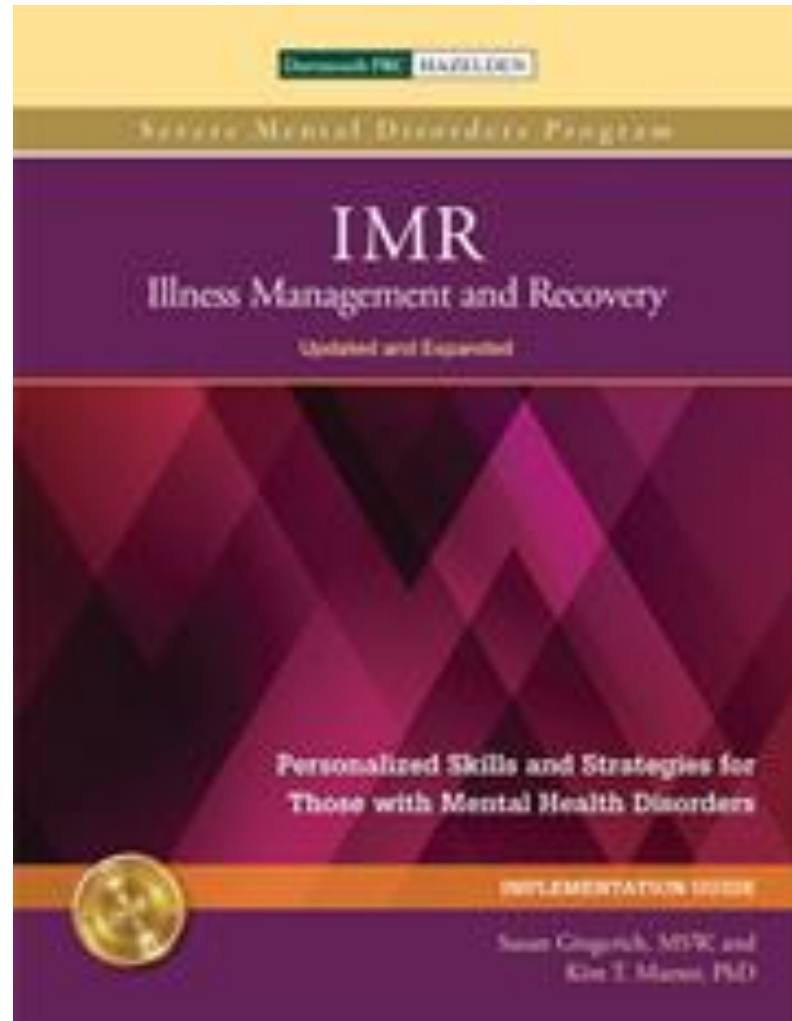
IMR Updated & Expanded:

Personalized Skills and Strategies
for Those with Mental Health
Disorders

Implementation Guide

Susan Gingerich
Kim T. Mueser

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2011.



Workshop Agenda

What is IMR

Core Values of IMR

Components of IMR

Key Ingredients of IMR

Implications for Individuals who are Justice Involved

Facilitation Strategies



IMR is about creating space



For narratives of hope, recovery, and wellness to co-exist



What is IMR?

A step by step program, set of recovery values, & curriculum that supports people to...



Set and work towards meaningful life goals

Acquire information & skills to develop mastery over their wellness

Make progress towards their own personal vision of recovery

Recovery

The Strengths Model views recovery as,
“A life worth living which brings meaning, purpose, and a positive sense of self.”



Developing
a narrative

Conditions of Recovery

Hope

Choice & Self Determination

Recovery is a non-linear & highly individualized process

Self-Care

Respect & Collaboration

Logistics of IMR

Curriculum

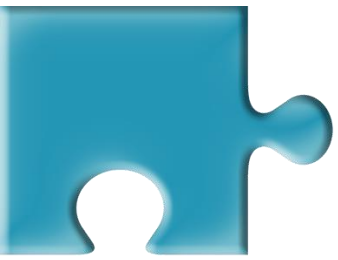
- 11 Modules
- User-friendly handouts for participants
- Practitioner Guidelines for each module
- Implementation Guide

Structure

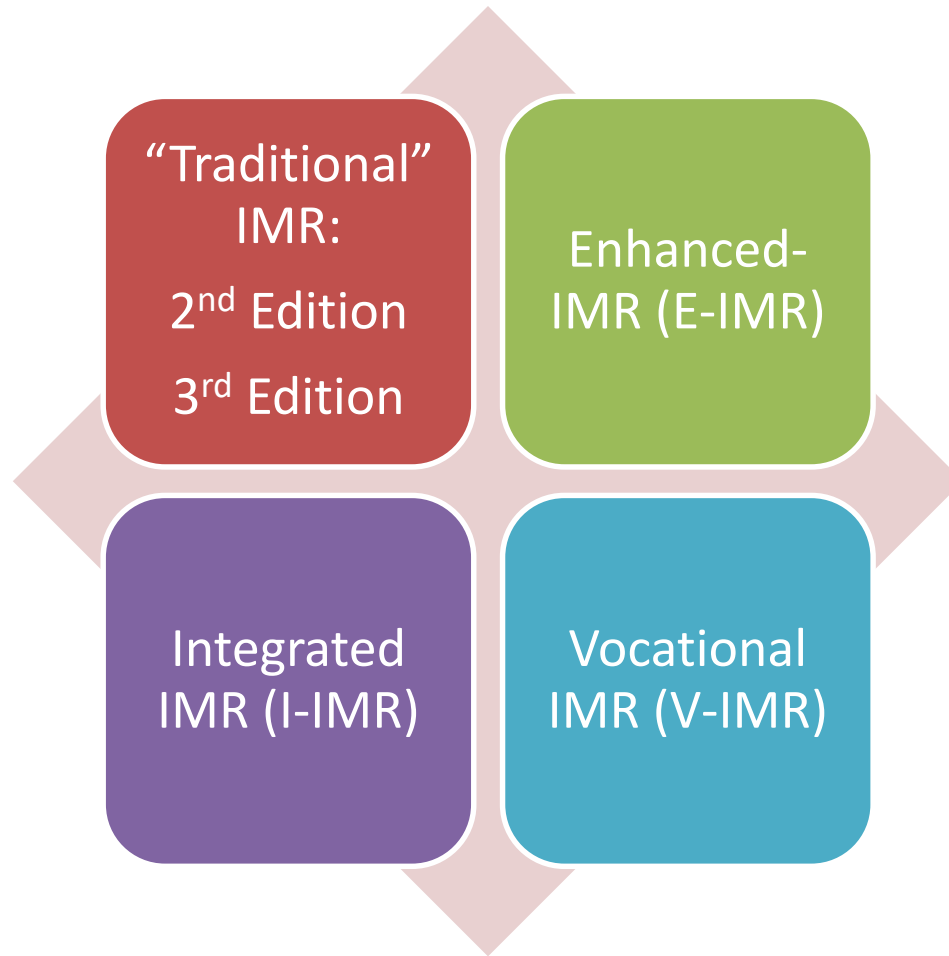
- Can be provided in group format or individually
- Weekly sessions
- 60-90 minutes works best with a scheduled break
- 2 Facilitators for group sessions
- Peer Support

Facilitation Strategies

- Practitioners use motivational, educational, and cognitive-behavioral techniques
- Skills are practiced in weekly sessions & as “home” practice assignments



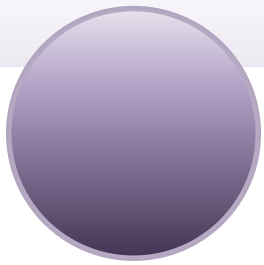
Variations of IMR:





Where can IMR been provided?

- Community mental health centers
- Inpatient treatment programs
- Outpatient treatment programs
- Consumer run organizations
- Transitional age youth programs
- Justice involved settings
- Residential programs
- Vocational programs
- The list goes on...



IMR Research

- Three randomized-controlled trials (RCTs), three quasi-controlled trials, and three pre-post trials have been conducted
- Overall, individuals who participated in IMR improved in the following areas:
 - Increased their knowledge of mental illness (or challenges to wellness)
 - Reduced relapses and re-hospitalizations
 - Reduced symptoms (distress from extreme states)
 - Used medications more consistently (when used as a wellness strategy)
- (Fardig, Melin, Folke, and Fredricksson, 2011; Hasson-Ohayon, Roe, and Kravetz, 2007; Levitt, Mueser, DeGenova, Lorenzo, Bradford-Watt, Barbosa, Karlin and Chernick, 2009)

The IMR Fidelity Scale (13 Items)

1. Number of people in a session or group
2. Program length
3. Comprehensiveness of the curriculum
4. Educational handouts
5. Involving significant others
6. IMR goal setting
7. IMR goal follow-up
8. Motivation-based strategies
9. Educational techniques
10. Cognitive-behavioral techniques
11. Coping Skills training
12. Relapse prevention training
13. Behavioral tailoring for medication

Core Values of IMR



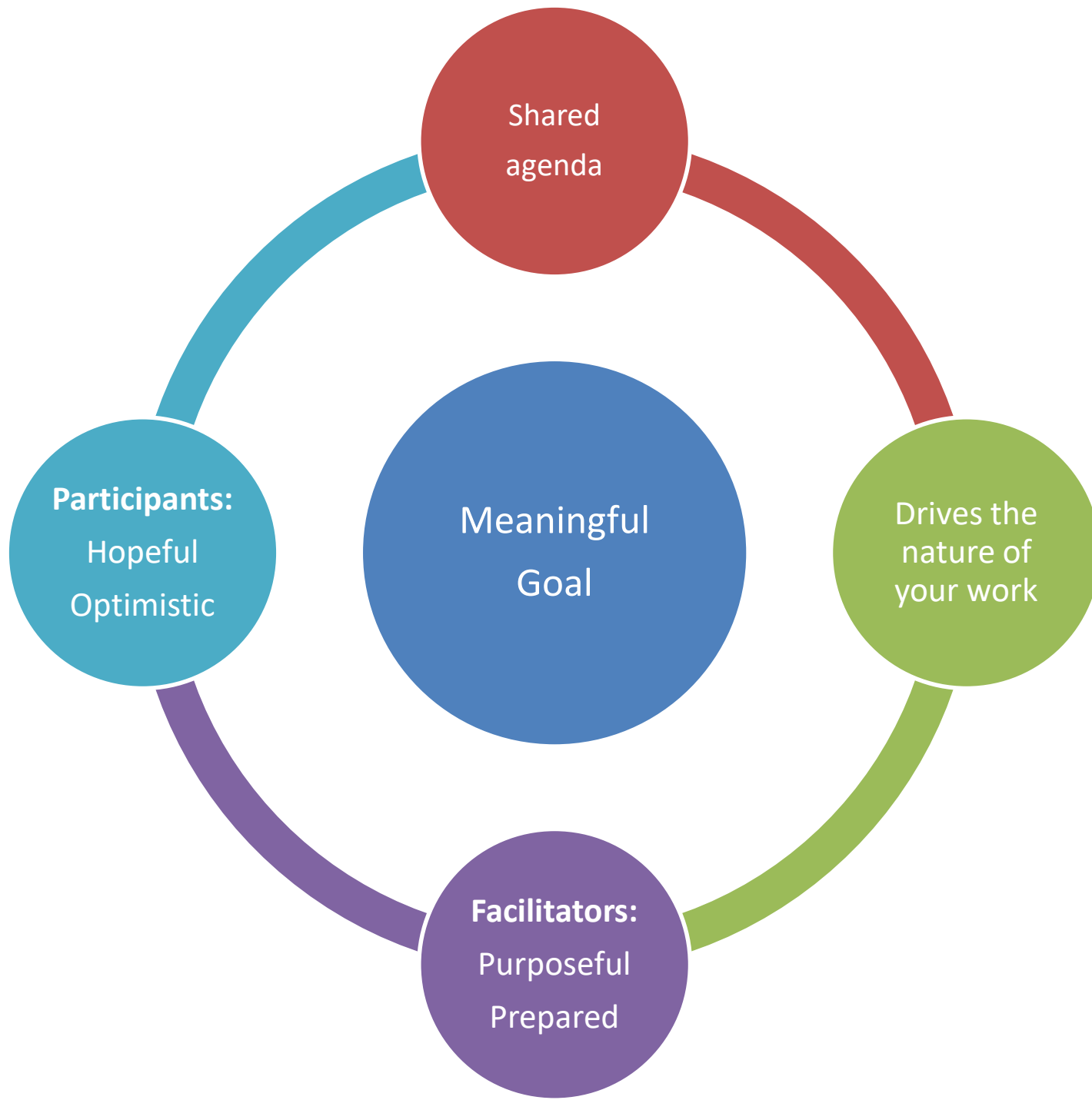
Respect for the inherent worth and potential of the person

Ability to understand another's frame of reference

Respect for choice and autonomy

Acknowledgement of a person's strengths and efforts

Actively creating opportunities for a person's wellbeing and growth potential



Shared
agenda

Meaningful
Goal

Drives the
nature of
your work

Facilitators:
Purposeful
Prepared

Participants:
Hopeful
Optimistic



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: |

continued on next page

Common concerns when using the GTS:

When do I introduce the GTS?

What goal do we write down?

How many action steps should we write out together at a time?

How specific should each step be?

What kind of things should we put in the modified/next steps section?

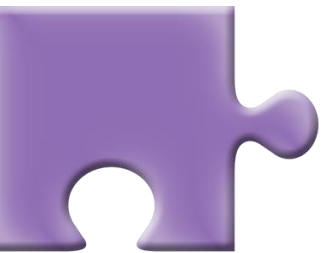
What if there is a crisis while we are working on a goal using the GTS?

What if someone has no goal?

What if someone has an unrealistic goal?



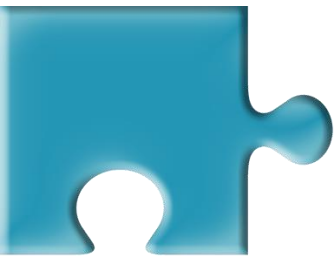
**WHERE IS THE INTERSECTION FOR
INDIVIDUALS WHO ARE JUSTICE
INVOLVED?**



People with wellness challenges are incarcerated at rates much higher than the rest of the population.

(Cox, Morschauer, Banks & Stone, 2001; Mackain & Mueser, 2009; Munetz, Grande, & Chambers, 2001).





A report for the Bureau of Justice Statistics estimates that more than 50% of people in U.S. jails and prisons have a wellness challenge.

Bipolar Disorder: 43% state prisoners, 54% jail inmates

Major Depression: 23% of state prisoners, 30% of jail inmates

Psychosis: 15% of state prisoners, 24% of jail inmates

(James & Glaze, 2006; Mackain & Mueser, 2009)

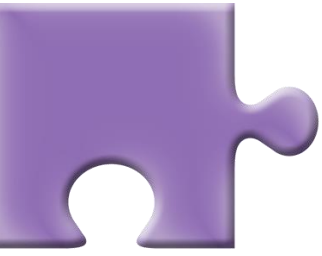




Individuals who are incarcerated and have a wellness challenge are more likely:

1. To have struggles around behavior (Mackain & Mueser, 2009).
2. To be victimized by other inmates (Mackain & Mueser, 2009).
3. To experience greater difficulty understanding and following rules (Adams, 1986; Jemelka, Trupin, & Chiles, 1989; Lovell & Jemelka, 1998).
4. Are more likely to have disciplinary challenges (James & Glaze, 2006).

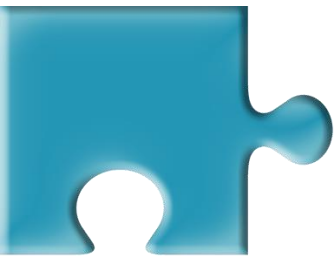




This contributes to far higher costs to the system on multiple levels: human potential, loss of life, legal processing, custody staffing, loss of good time credit and longer rates of incarcerations.

(Lovell & Jemelka, 1996; James & Glaze, 2006; Mackain & Mueser, 2009)





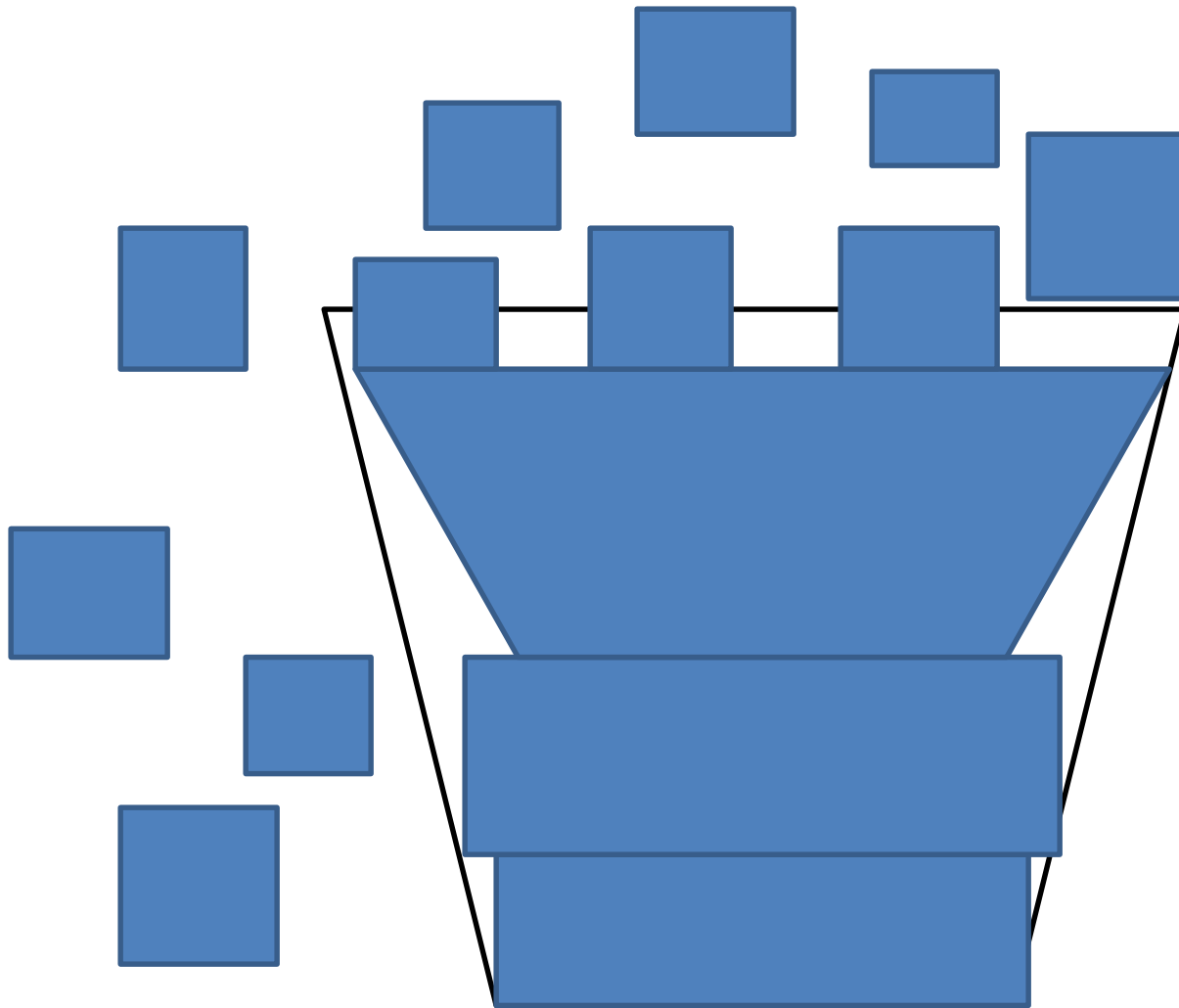
Research has also shown that it is highly unlikely that individuals who are justice involved who have wellness challenges will receive the quality of care and rehabilitation needed to recover beyond just medication or separate housing.

(National Institute of Corrections, 2001)



The Stress-Vulnerability Model





**This cup
represents a
persons
capacity.**

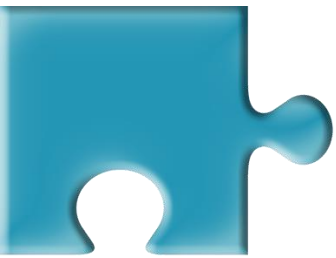


The experience of frequent psychiatric hospitalizations and the losses that come on the other side of that create deeper states of poverty, oppression, and stigma which further the process of societal marginalization.

Losses = employment, housing, relationships, spiritual communities, freedom, parental rights, education, etc.

(Mackain & Mueser, 2009)





Wellness management and reduced relapses lessens the impact of vulnerabilities by decreasing the intensity and frequency of the extreme states of being that lead to those behaviors.

Cognitive disorganization (e.g., disorderly conduct)

Impaired judgement (e.g., excessive spending that can lead to theft, forgery, etc.)

Unusual belief systems & sensory experiences (e.g., responding/interacting with voices & hallucinations that lead to justice involvement)

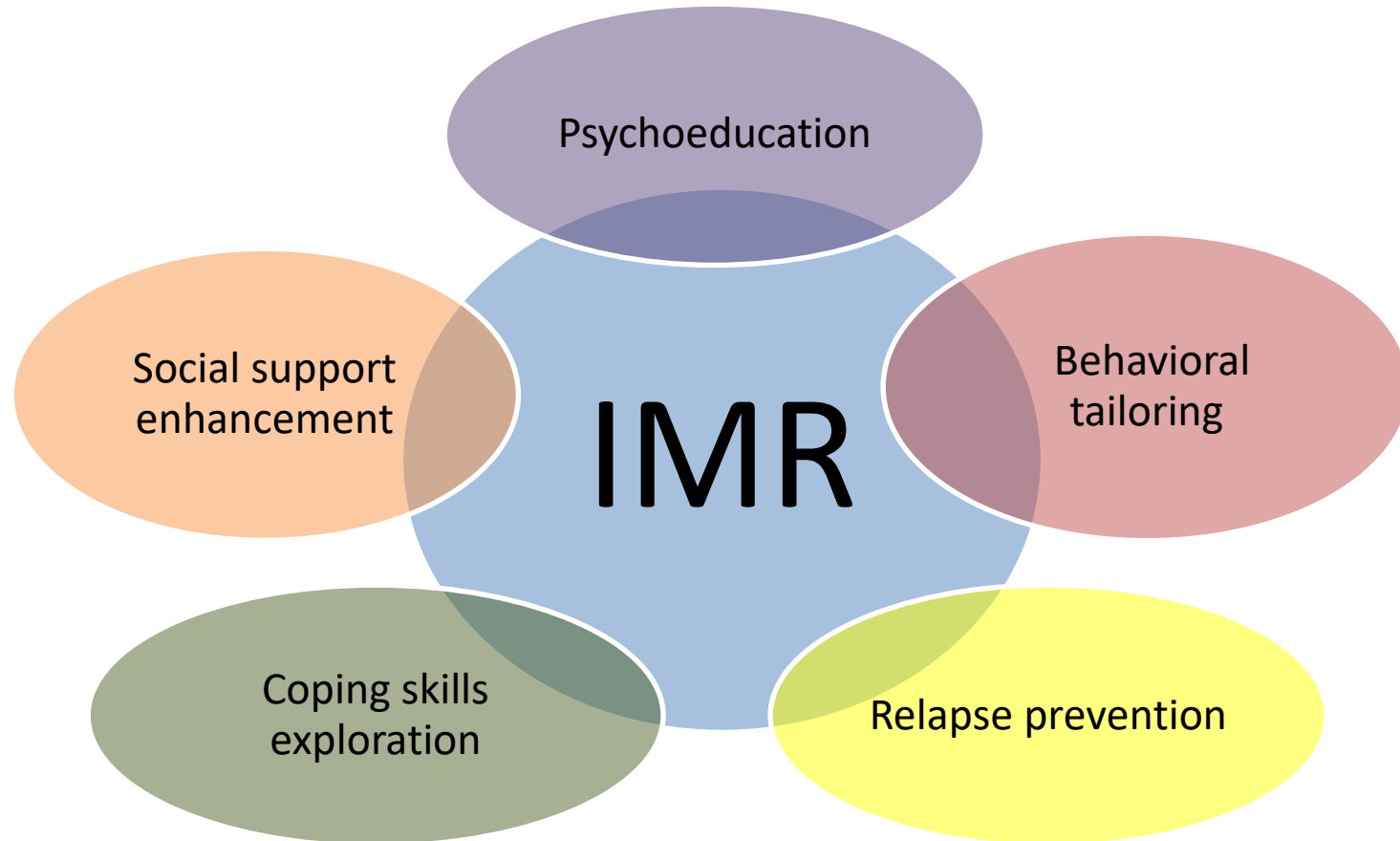
Increased substance use (e.g., DUI, possession, or sale of)

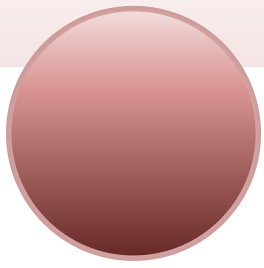
(Mackain & Mueser, 2009)





Core Components of IMR





Benefits to individuals who are justice involved:

- Provides hope for the future
- Identify coping strategies to manage wellness (self-care) and navigate extreme states of being
- Consistency in using medications (if being used)
- Learn to identify and respond to triggers and early warning signs to lessen the impact of trauma and relapse
- Having access to information supports informed decision making
- Social support in a safe space
- Promotes community integration & supports re-entry
- Weekly support to make movement on & towards a meaningful life goal (sense of purpose & self-worth)



An IMR Orientation
Session

11 Modules of
curriculum covered in
weekly sessions

Weekly individual
outreach

Topic Areas and Modules:

- Orientation Session
- IMR Modules
 1. Recovery strategies
 2. Practical facts on mental illness
 3. Stress-Vulnerability Model and treatment strategies
 4. Building social support
 5. Using medication effectively
 6. Drug and alcohol use
 7. Reducing relapses
 8. Coping with stress
 9. Coping with problems and persistent symptoms
 10. Getting your needs met in the mental health system
 11. Healthy Lifestyles
- Wrapping Up IMR

Orientation Session



Module 1: Recovery strategies

Topics:

- Defining recovery and learning what helps people in the recovery process
- Exploring areas of life that you would like to improve
- Identifying a personal recovery goal
- Breaking down your goal and taking the first step towards achieving it
- Following up on your goal and problem solving solutions

Module 2: Practical facts about mental illnesses

Topics:

- Understanding the diagnoses
- Learning what happens after people develop symptoms
- Taking positive steps to manage your wellness
- Dealing with negative attitudes and beliefs about mental illnesses (Stigma)

Module 3: The Stress Vulnerability Model

Topics:

- Exploring & developing own understanding of the cause of wellness challenges
- Surrounding someone with the idea there are things they can do to take care of themselves; self help strategies & personal medicine development
- Understanding treatment options
- Ways to reduce relapses

Module 4: Building social support

Topics:

- Recognizing the importance of social support
- Exploring ways to enhance & grow support networks
- Connecting with people
- Sharing personal information
- Understanding other people
- Developing closer relationships

Module 5: Using medication effectively

Topics:

- Learning about the role of medication in recovery
- Identifying and exploring pros and cons of using medication
- Informed and shared decision making regarding medications
- Getting the best results from your medication

Module 6: Drug and alcohol use

Topics:

- Identifying common reasons people use alcohol and drugs
- Recognizing & exploring potential problems as a result of using
- Weighing the pros and cons of sobriety
- Identifying personal reasons for sobriety, getting social support, and planning for high risk situations (harm reduction)
- Finding new ways of getting your needs met

Module 7: Reducing relapses

Topics:

- Identifying triggers and early warning signs
- Developing a relapse prevention plan or WRAP
- Putting your relapse prevention plan into practice

Module 8: Coping with stress

Topics:

- Learning what causes stress
- Identifying the signs of stress
- Preventing and navigating stress
- Using relaxation techniques
- Making a plan for preventing and coping with stress
- Having social support
- Exploring the concept of personal medicine & other self help strategies

Module 9: Coping with persistent symptoms

Topics:

- Identifying individual persistent symptoms
- Coping w/ depression, anxiety, voices, unusual beliefs, sleep problems, low energy, anger & concentration struggles
- Making a plan for using self-help strategies more frequently
- Developing & enhancing self-help strategies
- Practicing & applying self-help strategies in the context of one's life

Module 10: Getting your needs met in the mental health system

Topics:

- An overview of community mental health services
- Financial and health insurance benefits
- Advocating for yourself in the mental health system

Module 11: Healthy Lifestyles

Topics:

- Nutrition, Part 1
- Nutrition, Part 2
- Exercise
- Regular physical check ups
- Sleep
- Hygiene

Wrapping up IMR



Setting the stage

The *first* group should be spent supporting individuals:

- In becoming familiar with area group will happen; location, restrooms, water fountains, etc.
- ***Brief*** introduction to material
- Time for participants to ask questions
- Setting group expectations together
 - Creating a Safety Contract
- In getting to know one another
 - Ice-breakers

Structuring a session

1) Celebrations/successes

2) Briefly review previous session

3) Goal follow up support

4) Review homework from previous session

5) Set agenda for current session

6) Facilitate material and topic of the day

7) Summarize progress made in the current session

8) At home practice (HW) assignment

Common challenges for individuals who are justice involved:

- Difficulty talking and sharing experiences in/with jail, prison, probation, etc.
- Survival mode can make forward movement challenging
- Thinking styles and behaviors that can lead to further justice involvement
- Limited pathways for coping and choice creates difficulty in navigating emotions

All of these challenges are a result of trauma. They are the **RESULT** of a much deeper problem.

(Gingerich, 2014)

IMR Facilitation Strategies



M

- **Motivational**
- Why should individuals be interested or invested in learning information and skills that are included in IMR?



E

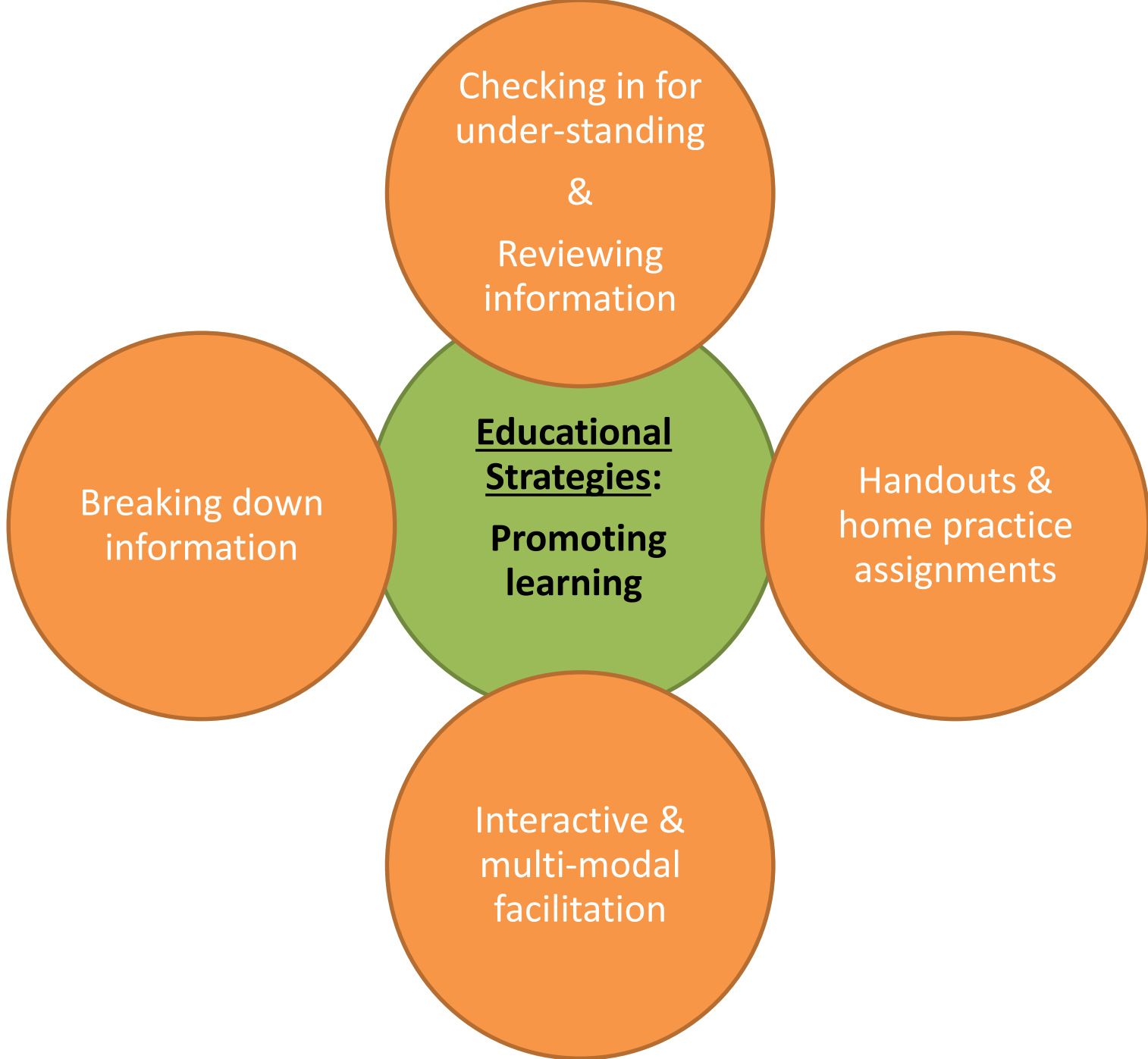
- **Educational**
- Applying information & activities to the variety of learning styles



C

- **Cognitive-Behavioral**
- Learning without application is pointless





Checking in for under-standing
&
Reviewing information

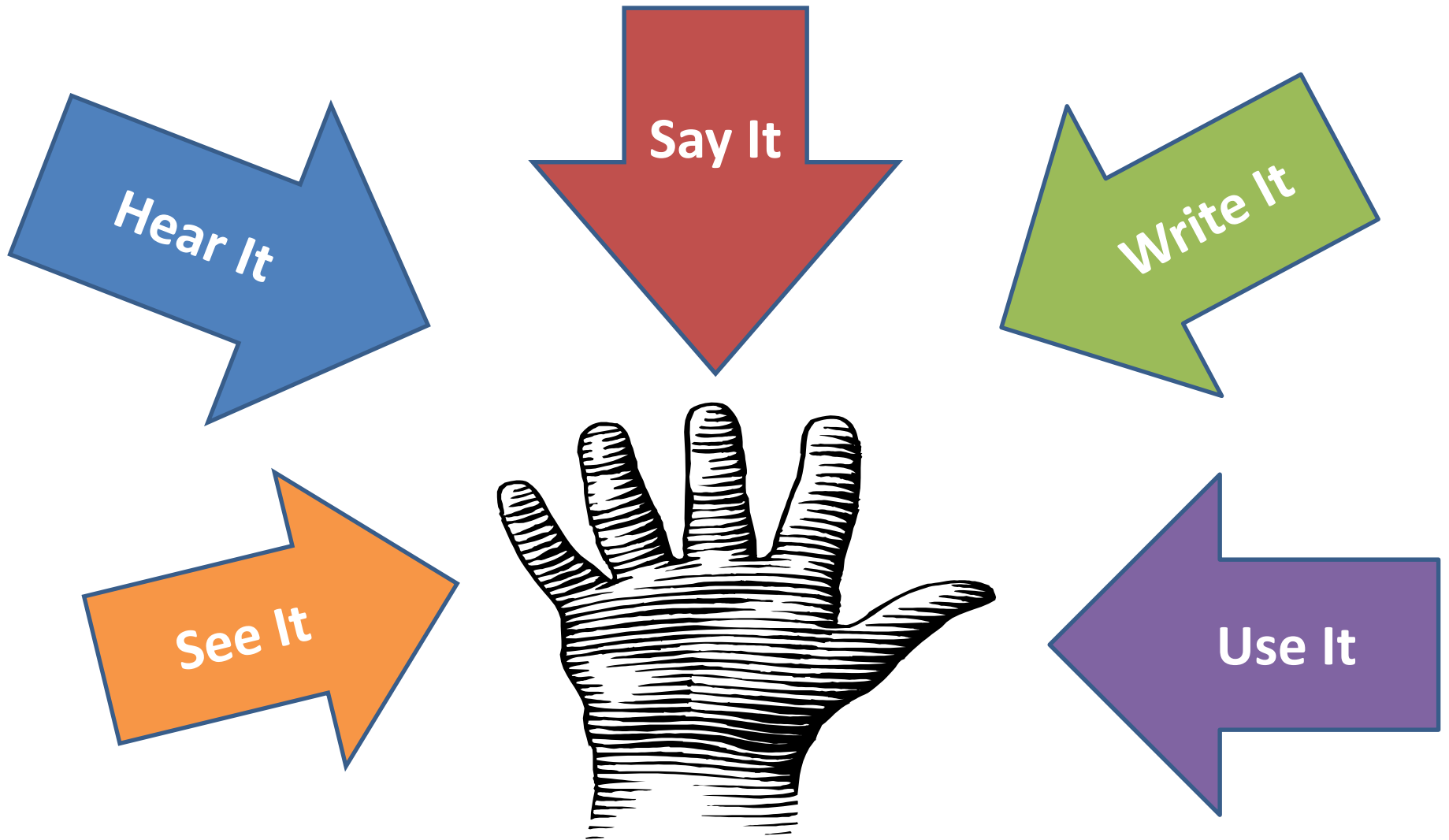
Breaking down information

Educational Strategies:
Promoting learning

Handouts & home practice assignments

Interactive & multi-modal facilitation

Use Multimodal Facilitation



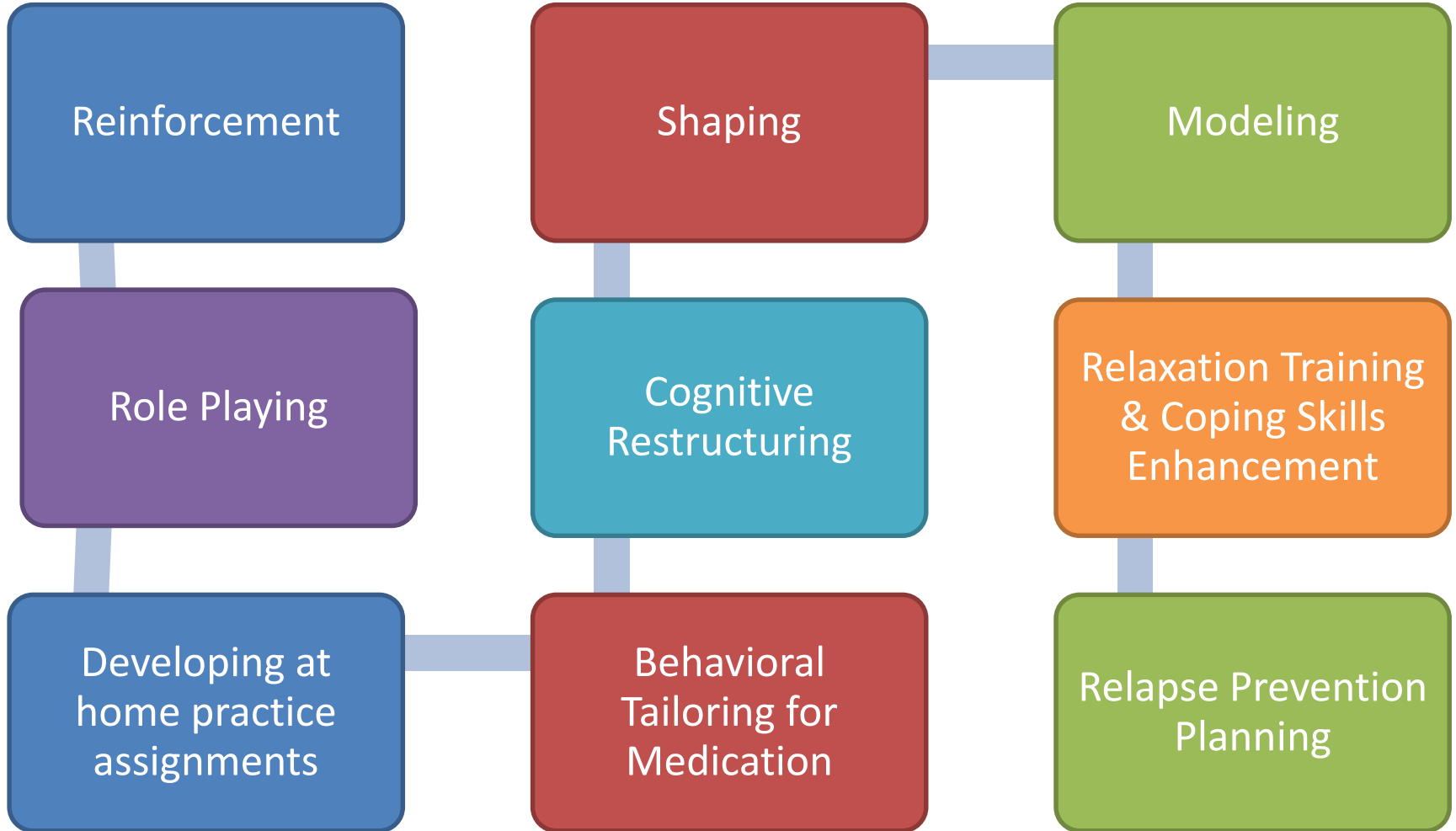
Notes on activities

Remember, who is your target audience? When planning activities, think about the individuals in your session.

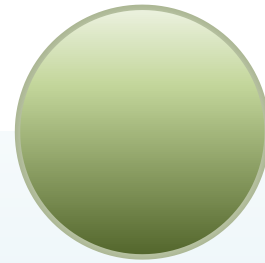
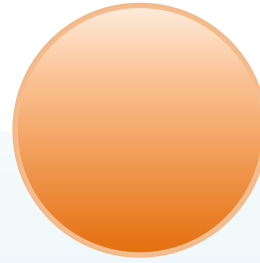
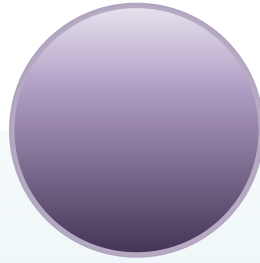
Activities should enhance learning and be related to the topic or theme of the session.

1-2 activities at most per session.

Cognitive Behavioral Strategies: Applying, practicing, & transferring skills



Questions?
k.spencer@ku.edu





Links:

2nd Edition Free Toolkit:

<https://store.samhsa.gov/product/Illness-Management-and-Recovery-Evidence-Based-Practices-EBP-KIT/sma09-4463>

3rd Edition Toolkit:

<https://www.hazelden.org/> Search bar: *IMR*



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National Institute of Corrections. (2001). The incarceration of individuals with severe mental disorders. *Community Mental Health Journal*, 37, 361-372.

Thank You!

