The Future of Behavioral Health Staff Development: College of Wellness

Formerly The Recovery College

Welcome! Thank you for joining us to explore

The College of Wellness as a Mental Health Innovation

With
Abra Arlinsky, MC, LPC, LISAC
Kristin Damron, MA, LAC, CTSS
The College of Wellness

- We invite you to think about the Recovery College as a valuable extension of clinical work.
- We know you will feel inspired by the Recovery College concept.
- Because you are attending this training today, you are putting yourself in a position to implement cutting edge work.
- There are many clinicians and administrators just like you who are ready to add innovative concepts to their work.

We Changed Our Name

- We were the Recovery College from 2016 to 2021.
- We changed our name to the College of Wellness in the interest of movement from recovery to wellness and wellbeing.
- We want to appeal to everyone!
- Other names for Recovery Colleges from around the world include Discovery Centres, Wellbeing Colleges, Empowerment Colleges and Recovery Academies.

(www.researchintorecovery.com)
History of Recovery Colleges

- The concept of “Recovery Education,” or supported recovery through education, was developed in Boston and Phoenix in the 1990s.

- The first Recovery College opened in England in 2009 and now there are more than 80 across the United Kingdom.

- The need for mental health system transformation was identified globally by WHO in 2013 and the UNGeneral Assembly in 2017.

(Bourne, Meddings, & Whittington, 2018)
What is a Recovery College?

- Recovery Colleges are a global innovation in mental health systems with an emphasis on co-development and co-learning by service members, staff and clinicians.
- Recovery Colleges support persons living with mental health issues based on the theory and practice of adult education rather than or in addition to clinical work.
- The skills needed for living well with mental health issues are relevant to anyone.
- The core component of Recovery Colleges is helping people to become experts in their own care.

(Piat, et al., 2021)

What is a Recovery College?

- Recovery Colleges deliver educational courses on mental health and recovery and have co-production at their core.
- Personal and professional knowledge of mental health challenges are combined and co-designed and co-facilitated.
- There is emerging data that suggests Recovery College attendance and participation contributes to a significant reduction in treatment service use.
- The change is from symptom reduction to rebuilding lives.

(Bourne, Meddings, & Whittington, 2018)
Recovery Colleges as a Pioneering Intervention

- Address functional and educational deficits that contribute to societal exclusion for students
- Provide students with individualized curriculum to successfully manage their lives
- Based on a partnership between experts by experience (peers) and experts by training (clinicians)
- Offer a different approach from current psychological and pharmacological interventions

(Whitley, Shepherd, & Slade, 2019)

Recovery Colleges as a Pioneering Intervention

- Attendees are students, not patients, service members, clients, or consumers.
- A range of courses are available for each student to tailor to their own circumstances.
- Students are involved in all aspects of college life to include teaching, college governance and decision making.
- New models of Recovery College include online availability of courses.

(Whitley, Shepherd, & Slade, 2019)
Nuances of Recovery Colleges

- It is a choice, not a “prescription” or “treatment.”
- Students graduate instead of discharge.
- The language in the college is empowering, thereby being a great equalizer.
- Students register; there is no referral process.
- Those who teach in Recovery Colleges are instructors regardless of educational background or position in the company.

(Eloise, 2020)

Nuances of Recovery Colleges

- Students may learn they are not alone by attending classes with other people.
- Students can find meaning and benefit from being enrolled in a college.
- Students may learn interpersonal skills.
- Students can become instructors or course consultants/designers so they can stay connected with the college beyond graduation.

(Eloise, 2020)
Psychoeducation and Recovery Colleges

- Designed to inform service recipients and family about the diagnosis and disorder of the service recipient to promote coping strategies.

- Provides structured forms of communication such as:
  - The course and outcomes of various mental health diagnoses
  - Signs and symptoms of mental health concerns
  - Identifying early signs and symptoms of the problem
  - Triggers when to seek treatment
  - Information to family members regarding how to manage situations
  - Dispelling stigma and negative attitudes about mental illness and patients

(Srivastava & Panday, 2017)

Table 1—Therapy and Education

<table>
<thead>
<tr>
<th>A therapeutic approach</th>
<th>An educational approach</th>
</tr>
</thead>
<tbody>
<tr>
<td>Focuses on problems, deficits and dysfunctions.</td>
<td>Helps people recognize and make use of their talents and resources;</td>
</tr>
<tr>
<td>Strays beyond formal therapy sessions and becomes the over arching paradigm.</td>
<td>Assists people in exploring their possibilities and developing their skills;</td>
</tr>
<tr>
<td>Transforms all activities into therapies—work therapy, gardening therapy etc;</td>
<td>Supports people to achieve their goals and ambitions;</td>
</tr>
<tr>
<td>Problems are defined, and the type of therapy is chosen, by the professional ‘expert’;</td>
<td>Staff become coaches who help people find their own solutions;</td>
</tr>
<tr>
<td>Maintains the power imbalances and reinforces the belief that all expertise lies with the professionals.</td>
<td>Students choose their own courses, work out ways of making sense of (and finding meaning in) what has happened and become experts in managing their own lives.</td>
</tr>
</tbody>
</table>

(Perkins, Repper, Rinaldi, & Bowen, 2012)
The Evidence Base

- Recovery Colleges are popular with students and the college experience can be beneficial to recovery.
- Recovery Colleges can engage students who find existing services unappealing.
- There are significant opportunities to provide research to support the Recovery College concept.

(Whitley, Shepherd, & Slade, 2019)

The Evidence Base

- The National Institute for Health and Clinical Excellence (NICE) defines supporting self-management as a key quality standard of adult mental health services.
- A pilot study prior to the establishment of the South West London Recovery College conducted four Recovery Courses delivered by mental health practitioners and peers.

(Centre for Mental Health, 2012)
The Evidence Base

- The students in the pilot study were in mental health services for six years and 45% had a diagnosis of psychosis.
- An 18-month follow-up indicated 68% felt more hopeful for the future after the courses, 81% developed their own plan for managing their problems and staying well. 70% became mainstream students, gained employment or had become a volunteer.
- Students who attended more than 70% of their scheduled courses showed a significant reduction in the use of community mental health services.
- Research remains in its infancy and there is more to be completed.

(Centre for Mental Health, 2012)

Recovery Colleges are open or planned in 22 countries including England, Australia, Bulgaria, Canada, Sri Lanka, Italy, and Hong Kong.

(Whitley, Shepherd, & Slade, 2019)
Glimpses of Recovery Colleges

- Boston University College of Health & Rehabilitation Sciences: Sargent College: Center for Psychiatric Rehabilitation
  https://cpr.bu.edu/wellness-and-recovery-services/recovery-education-programs/

- Lincolnshire Recovery Colleges
  https://www.lpft.nhs.uk/our-services/adults/recovery-college
  https://www.recoverycollegeonline.co.uk/

- Canadian Mental Health Association
  https://cmha.ca/recovery-college

Why Recovery Colleges?

- The DSM has increased from 66 categories in 1952 to well over 300.

- The number of mental health professionals has increased by 275%.

- Suicidal ideation in adults, Native Americans and youth, especially LGBTQ+ youth are increasing at an alarming rate.

- 2019 U.S. Mental Health Spending Topped $225 Billion.

Even before COVID-19, mental illness among adults was increasing.

(Mental Health America, 2021)
Why Recovery Colleges?

- During COVID-19, there was a 93% increase in anxiety and a 63% increase in depression based on MHA screening compared to 2019.

- Elevated levels of adverse mental health conditions, substance use and suicidal ideation were reported by adults in the US in June 2020.

  (Czeisler, et al., 2020)

Why Recovery Colleges?

- The CDC panel surveys indicate that 40.9% of respondents reported at least one adverse mental or behavioral health condition.
  - Anxiety or depressive disorder symptoms (30.9%)
  - Trauma and stressor-related disorders (TSRD) (26.3%)
  - Having started or increased substance use to cope with stress (13.3%)

  (Czeisler, et al., 2020)
Why Recovery Colleges?

- Seriously considered suicide in the 30 days prior to taking the survey:
  - 18-24 years (25.5%)
  - Hispanic responders (18.6%)
  - Non-Hispanic Black responders (15.1%)
  - Unpaid caregivers for adults (30.7%)
  - Essential workers (21.7%)

(Czeisler, et al., 2020)

Why Recovery College?

- With ongoing and increasing mental health concerns, it seems that we need to identify some alternative approaches.

- Supportive education is one of these alternatives.
Why Recovery College?

- Students can focus on personal recovery that supports empowerment, resilience, community integration and shared responsibility of wellness and wellbeing.

- Education is a form of social rehabilitation and provides the opportunity for the student to separate themselves from the identity of a “psychiatric patient.”

Levels of impact

- There is potential impact on four levels:
  - Students- The primary motivation for creating Recovery Colleges.
  - Staff- The trainers, administrators and healthcare professionals.
  - Services- The mental health care system. There is benefit through global mental health system transformation.
  - Societal- Pathways of action include attendance by family members, involvement of community organizations in co-delivering services, partnerships with higher education colleges and contributions to addressing community stigma.

(Crowther, et al., 2019)
Levels of Impact

<table>
<thead>
<tr>
<th>Level of impact</th>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual outcomes (students, peers)</td>
<td>- Experience of care</td>
</tr>
<tr>
<td></td>
<td>- Individual Recovery Goals</td>
</tr>
<tr>
<td></td>
<td>- Subjective measures of personal recovery</td>
</tr>
<tr>
<td></td>
<td>- Socially valued goals</td>
</tr>
<tr>
<td></td>
<td>- Quality of life, Well Being, Physical Health</td>
</tr>
<tr>
<td></td>
<td>- Service use</td>
</tr>
<tr>
<td>Families, friends and other supporters</td>
<td>- Experience of Care</td>
</tr>
<tr>
<td></td>
<td>- Quality of life, Well Being, Physical Health</td>
</tr>
<tr>
<td>The mental health service system</td>
<td>- Reduced acute service usage</td>
</tr>
<tr>
<td></td>
<td>- Cultural change</td>
</tr>
<tr>
<td></td>
<td>- Recovery orientation of services and staff</td>
</tr>
<tr>
<td>The Community</td>
<td>- Stigma reduction</td>
</tr>
<tr>
<td></td>
<td>- Improved pathways to employment and other opportunities for social and economic inclusion and participation</td>
</tr>
</tbody>
</table>

Recovery Colleges thrive as their own entity

- The separation from the host agency allows for a genuine culture shift.
- Allows for co-production instead of solely professional views
- The culture is based in education rather than clinical concepts.
- The impact of Recovery College on consumer-run services is yet to be determined.

(McGregor, et al., 2015)

(Crowther, et al., 2019)
Impact of London’s RC

History and Background of College of Wellness

- The College of Wellness was formed at SB&H in 2016-2017 based on Dr. Bohanske learning of the Recovery College concept on a trip to England and telling us to “make our own.”

- An administrative team was formed for the oversight of the program. The team was created from and governed by front line staff and supervisors.
Meet the College of Wellness Administrative Team

- Jason Eng, BA, CPRP
- Esther Emadi, M.Ed., LPC
- Jonathan Thomas, MS, LAC
- Nichole Wojtanowski, MC, LPC
- Joel Browner, MA, LAC
- Paul Buttermore, MA, LPC
- Kristin Damron, MA, LAC, CTSS
- Abra Arlinsky, MC, LPC, LISAC

The First Cohort

- We instructed two cohorts per month for the first two years.

- One cohort consisted of supervisors and the other of staff providing direct care in community living and residential facilities.

- We built the plane while we were flying it!
The First Cohort

- The team determined that it would be beneficial to first implement the College of Wellness with behavioral health technicians, peers, and supervisors to create a culture of wellness among the staff who provide the most direct contact with the members, allowing us to extend the educational reach.

- We recognized that front-line staff were often not trained in a theoretical orientation or therapy model.

- We wanted to provide a common language and approach.

History and Background of College of Wellness

- The administrative team designed the template for the classes and provided instruction for the courses.

- Additional instructors were recruited based on recommendations of supervisors and interest in the subject matter.

- The team decided on the use of Positive Psychology as a paradigm.
Why Positive Psychology?

- Positive psychology is the scientific study of optimal human functioning, the goals of which are to better understand and apply these factors that help individuals and communities thrive and flourish.

- Concerned with building strengths, wellness, and well-being

- Helping service members overcome symptoms to lead a fulfilling life without having to resolve symptoms

(Phidgman & Cikszentmihalyi, 2000; Magyar-Moe, Owens, & Conoley, 2015)

Why Positive Psychology?

- Staff use the information from Positive Psychology both personally and professionally.

- Mental health issues can be addressed not only by symptom reduction, but enhancing the individual interests, talents and uniqueness of our members.

- We looked to enhance the paradigm of our service providers to a wellness-based focus.

- Many of our staff only needed permission to make this paradigm shift.

(Magyar-Moe, Owens, & Conoley, 2015)
Why Positive Psychology?

- We trained in great detail the concept of “Wellness is not the absence of illness” and guided towards being able to flourish.
- Using a Positive Psychology basis considered cultural contexts, applications of the approach in a variety of settings, using a strengths-based approach to our staff and members.
- Sought to emphasize concepts such as resilience, hope, positive emotion in the culture of the College of Wellness courses.

The COVID-19 Impact on Recovery College

- Prior to COVID, we were providing all classes in person.
- COVID caused everyone in healthcare to consider how to proceed with providing services, but also how to provide trainings.
- Our team quickly responded by making the classes virtual with only a minor interruption in the class schedule and identified a plan to quickly make up the missed courses.
Course Progression

- Students complete one class per month.
- Each course is two hours.
- There are a total of 24 courses.
- The first year consists of six 100-level courses and six 200-level courses.
- The second year consists of twelve 300-level courses.
- There are graduations at each level.

Course List: 100 Level

1. Positive Psychology
2. Program Development
3. Professional Conduct
4. Crisis & Risk Management
5. Group Process I
6. Substance Use
Course List: 200 Level

1. Compassion
2. Conflict Resolution
3. Resilience & Change
4. Counseling Skills
5. Grit
6. Nutrition & Exercise

Course List: 300 Level

1. Holistic
2. Motivational Interviewing
3. Group Process 2
4. Wellness Language & Thinking
5. Optimism
6. Positive Psychology 2
7. Relationships & Communication
8. Leadership
9. Expressive Arts
10. Cultural Competency
11. Outing
12. Capstone
Course Template

Expectation of Behavior/Participation

• This class will be interactive – be prepared to participate.
• Please use the information from class every chance you get.
• In order for you to fully benefit from class, please turn off your cell phone and any other electronics, be on time/ do not leave early and give the course your full attention. Please feel free to take notes and ask as many questions as you would like.
• Your ideas are valuable so please share them with the class or small group during discussion times.
• If you have any additional expectations from the class, please feel free to let your instructor know.

Course Template

Content
Course Template

References
- Click to add text

Positive Psychology Samples

The PERMA Model
- Positive Emotion
- Engagement
- Positive Relationships
- Meaning
- Accomplishments/Achievement
- (Physical health)
Positive Psychology Samples

Positive Psychology Techniques
- Gratitude
- Acts of Kindness
- Exercise
- Meditation
- Positive Journaling
- Fostering Relationships
- Design a Beautiful Day
- Fun vs Philanthropy
- Pay It Forward

Accomplishment/Achievement
- Many of us strive to better ourselves in some way, whether we are seeking to master a skill, achieve a valuable goal or win in some competitive event. As such, accomplishment is another important part of contributing to our sense of well-being.
- We can strive for success, but it is more important to enjoy the game.
- To achieve Well Being and Happiness, we must be able to look back on our lives with a sense of "I did it and I did it well."
- Be proud of your achievements. You may also inspire others to achieve their own goals.
Online Discussion Boards

- All courses include an online follow up.
- Students post their reflections and implementations.
- Students and instructors comment on one another’s posts, deepening the conversation and focusing on practical application.

Discussion Samples

“I learned a ton of necessary information during this course. It helped me to recognize that being in problem solving mode sometimes lack in my listening skills since I am already trying to come up with a resolution while talking with the service member. I haven't had a ton of experience with service members being in crisis and having to call the crisis line or their team. At least I will know more information than I did before this course. Thank you!”
Discussion Samples

“I have worked on bringing more meditation into my day, both as a practice with the individuals I work with, and as something I do on my own. I especially like mindful breathing and lovingkindness meditations to reorient my mindset. It was very encouraging for me to hear the encouragement to use this self-care even, or rather especially, during our work day, and to consider how it can add to our interactions with those we serve, and doesn't take away from it, as I initially thought.”

Discussion Samples

“Conflict resolution can definitely be a difficult area of communication to navigate. I do find that the reminder of "it is us versus the problem, not us versus each other" really helps to reorient to the concepts discussed in class. Something I really enjoyed from conflict resolution was how it did incorporate some of the concepts from the compassion portion, in the form of how active listening and perspective-taking are key to moving forward, as was shown through the slide on the self-reflective questions and questions about how the other person might be feeling.”
Discussion Samples

“I feel that sometimes we are so eager to help those that we serve for many reasons, and we tend to forget about the importance of listing to others. I took a screenshot of Jonathon's presentation to remind me of the importance of "effective listing." I have been working in this field for a few years, and I learned that my job is not to fix everything or have a solution to every situation. I have seen how my service members have grown by merely guiding them in finding their path and what is essential to them. It is amazing to see our service members accomplish their goals and help them find their voice.”

Preliminary Findings

- To evaluate whether the training program worked, we:
  - Compared knowledge acquisition of College of Wellness staff to non-CW staff and
  - Gathered information on service member satisfaction pertaining to services from CW staff.
  - We found that staff who completed the CW program scored higher on multiple choice knowledge acquisition quizzes.
    - non CW: 80%, CW 88%
  - We also found that there were no significant differences in service member ratings of staff on the Recovery Promoting Relationships Scale between CW and non CW staff.
    - non CW Mean score = 3.98, CW Mean score = 3.90
Preliminary Findings

- In short, we have some budding evidence that the program is effective in teaching relevant information.
- Across all staff Recovery Promoting Relationships Scale scores were very high, suggesting service members may feel satisfied with staff relationships regardless of this additional training.

Future Research

- We are currently in the process of establishing research opportunities.
- We will contribute to the current research from other Recovery Colleges.
- We will consider using the Sense of Coherence Scale (SOC-13) in our research.
- We hope to contribute to the Positive Psychology research.
Research Into Recovery Colleges

- RECOLLECT: Recovery Colleges Characterization and Testing

- Program of research investigating Recovery Colleges

- Awarded two National Institute of Health Research (NIHR) grants to further understanding of Recovery Colleges in England

(www.researchintorecovery.com)

Further Implementation

- The College of Wellness courses have been integrated into Southwest Behavioral and Health Services’ Peer Support Training Program.

- Courses will be opened to public participation, including service members and their families.

- Future plans include recruiting service members and staff who have graduated from the Peer Support Training and/or the College of Wellness to act as instructors and hold administrative positions.
Further Implementation

- The College of Wellness is working to actively collaborate with outside agencies and international communities and is working to provide a training manual for staff training.

- A sufficient number of staff have been trained so as to support students, formerly service members, in their educational pursuits.

- Addition of the Salutogenic Positive Psychology paradigm to courses.

Our WishList...

- We would like to eventually have a building dedicated to the College of Wellness.

- We would like to be grant funded.

- We would like to have staff dedicated solely to the College of Wellness.

- The goal is to be considered the Ivy League of Recovery Colleges.
Testimonials

1st Graduating Class
Support from the City

January 2021

Dear Southwest Behavioral & Health Services Recovery College Graduates,

Congratulations on your profound accomplishment! Over the last several months, each of you has devoted countless hours to learning Positive Psychology strategies for your personal and professional growth, and to support your work with SB&H’s members. With this additional knowledge, you will be able to better the lives of your clients.

Southwest Behavioral & Health Services has a simple, yet powerful motto: “We inspire people to feel better and reach their potential.” I hope each of you are now empowered and know that you’re better able to reach your potential.

Once again, congratulations and best of luck in all your future endeavors.

[Signature]

City of Phoenix
With gratitude to Dr. Bob Bohanske.
May this presentation serve as a tribute to his memory.

References

Contact Us!

Abra Arlinsky
abraa@sbhservices.org

Kristin Damron
kristinda@sbhservices.org