

Pathways of Recovery: Framework for Preventing Further Episodes of Mental Illness Summary Sheet.

The information provided on this summary sheet has been compiled from:
Pathways of Recovery: 4As Framework for Preventing Further Episodes of Mental Illness.
Rickwood, D.
Mental Health and Suicide Prevention Branch, Department of Health and Ageing, Canberra. 2006.
<http://www.auseinet.com/toolkit/index.php>

Background

The Framework has been developed through an extensive consultation process by the National Mental Health Promotion and Prevention Working Party (PPWP), auspiced by the Australian Health Ministers' Advisory Council National Mental Health Working Group and the National Public Health Partnership Group.

This Framework describes ways to promote mental health and reduce future episodes of mental illness for people who have been seriously affected by mental illness. It is designed to guide the development of local implementation plans by the mental health care system - including all those people and services that support people who have experienced mental illness - to reorient toward recovery approaches.

Overview of the Framework – the 4As

The basic elements of the Framework are known as the 4As (awareness, anticipation, alternatives and access) which are adapted from work in crisis prevention. The 4As are not a linear or sequential process - each of the 4As supports each of the others, and together they comprise the basic elements that promote the future mental health of people who have experienced mental illness. Briefly, the 4As are:

Awareness

Awareness is about developing an understanding of one's mental health needs and the potential to be vulnerable to further episodes of mental illness. Such awareness increases the likelihood that a person, their family and the services they are in contact with, will engage in health promoting and illness preventing actions.

A general understanding of one's mental health, but also more specific knowledge of risk and protective factors for mental health, is important. Learning to understand personal wellness needs in terms of these risk and protective factors is essential to supporting future mental health.

Awareness is strongly influenced by attitudes toward mental illness within services and in the community. It is also affected by a wide range of social and cultural factors that impact on self-awareness and self-identity. Stigma and lack of understanding of mental health and mental illness are major barriers to awareness.

Anticipation

Anticipation and planning are processes which support people who have been seriously affected by mental illness to make their own decisions rather than to have decisions imposed on them and to lose control of their life. A sense of personal control is essential to wellbeing, yet this is something that is often lost through current service approaches that do not operate with a focus on recovery.

Planning needs to be undertaken on several levels:

- self-management plans;
- recovery plans;
- plans for continuity of care; and
- crisis plans.

Anticipation and planning are enabled through trust, communication, and ongoing collaborative partnerships. They are ideally undertaken when a person is relatively well, able to make decisions and need to encompass all the actions and supports the person needs to support their wellbeing. Agreements need to be negotiated between all parties identified as necessary to supporting a person's wellbeing.



Alternatives

'Alternatives' recognises the need for an expanded range of treatment and community support options for people who have experienced mental illness. Mental health care must go beyond the traditional medical model to acknowledge the holistic nature of mental health which is made up of social, emotional, physical and spiritual wellbeing. Provision of a broad-based service response across both the health and human services systems has started to occur in many communities. For example:

- the role of primary care, including general practice, is now an integral part of the mental health care system;
- peer support is increasingly recognised for its vital role;
- housing, employment and other forms of psychiatric disability and community support are now identified as essential needs; and
- the services provided by allied health professionals are being acknowledged, expanding therapeutic options to include: cognitive and behavioural therapies, family therapies, relaxation and meditation, and counselling.

Many alternatives are provided outside the public mental health system through private providers, primary care, allied health, and the housing, disability, employment and education sectors. Importantly, much of this service provision is undertaken by the non-government sector and by human services rather than health services. These collaborative partnerships (across sectors and services) are important in overcoming barriers to providing holistic community care.

Access

Access is about timely access to the whole range of services that support wellbeing, and early intervention in times of increased service need. Health and human services need to focus on reducing risk and enhancing protective factors for mental health while also being able to respond quickly and effectively to early warning signs of illness.

Effective access requires services that are truly responsive and adaptable to the changing needs of people who have been seriously affected by mental illness and their families and carers. Of primary importance, services must truly listen to and respond to consumers and, where appropriate families and carers, when they request a service response. At present consumers and their families and carers have difficulty receiving a service response until they are in crisis, and this type of service approach does not support recovery. Services must be able to respond to earlier requests for help.

Access is facilitated through agreed pathways of care that are explicitly negotiated through multi-service collaborative agreements that prioritise the needs of the consumer and their family and carers. All parties must communicate, share information, and be prepared to act on the advice and requests of others.

Actions to implement the Framework

To implement the Framework actions need to be undertaken at a number of levels and by all the relevant sectors. Implementation is based on four basic activities: planning; resourcing; allocating responsibility; and evaluating and monitoring implementation and outcomes.

Implementation of the 4As Framework has begun in all states and territories. It is being progressed through a large and diverse range of programs that are currently underway or being developed and evaluated at all levels – national, jurisdictional and local. However, very few communities could claim to have all the elements of the 4As Framework in place, and many models and approaches are not widely available throughout Australia.

Brief examples of current innovative models and approaches for implementation are provided in "Pathways of Recovery: 4As Framework for Preventing Further Episodes of Mental Illness"

<http://www.auseinet.com/toolkit/index.php>.

