Vocational Illness Management and Recovery: Wellness For Work

Provider's Guide

Adapted by:
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and Cheryl Gagne

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Table of Contents

VIMR: Wellness for Work – Provider's Guide

This guide is designed to provide you with the information, strategies, and tools for using Vocational Illness Management and Recovery (VIMR), a modification of the evidenced-based Illness Management and Recovery (IMR) curriculum that is oriented towards helping people with mental health conditions live well and thrive as they choose, get, and keep meaningful employment. It is a practical step-by-step guide for providers.

This guide contains the values, principles, and key concepts that are the foundation of using VIMR, as well as a lesson plan for each of the nine modules of curriculum using jargon-free language, educational worksheets, and additional resources.

The guide is meant to support providers to assist people who want to work to achieve wellness and employment.

Overview of Vocational Illness Management and Recovery

Vocational Recovery and Wellness

Vocational Recovery is the personal process of finding purpose, meaning, and enjoyment at work. Work is an important part of the recovery experience as it provides people with a valued role and resources to live their lives as they choose. People who live with mental health conditions want to work and can work successfully in careers of their choice.

Wellness is a critical resource for all people to achieve their life goals. Wellness at work is especially important because it supports people to thrive and succeed at work. Wellness is also very personal and self-defined state of being that encompasses eight dimensions: physical, mental, social, emotional, financial, spiritual, community, and environmental (Swarbrick, 2006).

The intent of Vocational Illness Management and Recovery (VIMR) is to support the hope and rights of people who have mental health conditions to thrive with wellness in meaningful work. It is a curriculum that is flexible and can be personalized to meet people where they are in their vocational recovery. The focus of VIMR is providing people with inspiration, information, and the strategies they want to support their goal of successful employment.

Broadly, the goals of VIMR are:

- Inspire hope that meaningful work is possible.

- Work in partnership with a person to achieve wellness at work.

- Teach people information and strategies to support their wellness at work.

The Importance of Helping People Set Meaningful Goals

People who have experienced mental health conditions often have been told to discard their dreams because the condition will prevent them from accomplishing what they hope for in their lives. Self-determining meaningful goals, and then accomplishing them, is an essential part of recovery.

The importance of empowering people to choose, to set, and to work towards their personal goals of wellness and work is the heart of VIMR. Each module guides the provider to support personal goal setting that is specific, measurable, and achievable. This constant provider activity helps the person to move forward with success and happiness towards wellness at work.

Core Values of Vocational Illness Management and Recovery

The core values of VIMR are those upon which recovery-oriented services are based (Farkas 2007; Farkas, Gagne, Anthony, et al., 2005).

- **Hope**

  First and foremost, the process of leading a person through VIMR involves inspiring hope that wellness and work is not only a possibility, but that wellness and work are everyday realities for people with mental health conditions. This message is critical for empowering people to self-direct and self-determine their lives. It is vital that providers of this curriculum teach and support people with the attitude that they have confidence that people will work with wellness. Providers are most successful when they feel hopeful that the person will achieve their goals, even if the person is pessimistic or lacking in hope.

- **Person Orientation**

  VIMR is based on respect for individuals in recovery, including the notion that people have strengths, talents, and interests—not just limitations and illness-related characteristics.

Recovery-oriented providers are interested in people's strengths, looking for ways to engage them in their interests, and use their talents for recovery. It is important for individuals in recovery to know that they have strengths, interests, and talents as they often have been served in mental health services that are predominantly focused on their deficits. Empowering individuals in recovery involves reinforcing and using the individual's strengths to help them choose, get, and keep meaningful work. Involving individuals as people with the capacity to learn new information, involving them in determining their work interests and ideas about the strategies they are interested in learning and using, and helping people to reflect on things they did well in their previous experience are some ways in which the VIMR curriculum focuses on a person orientation.

- **Self-Determination**

  It is essential for providers to support the self-determination of the person they are assisting to achieve wellness at work. Providers recognize that persons with mental health conditions have a right to choose what goals in wellness and work are important to them and how they want to proceed in achieving these goals. Providers assist and support people in VIMR to make informed choices about the content that is relevant to their goals and to their experiences. A constant theme in VIMR is providing information, options, and strategies to expand people's awareness of options for wellness at work.

- **Partnership**

  The spirit of VIMR is that of partnership. The provider and the person work side-by-side in an equal relationship that reflects respect for one another. The provider's role is to facilitate and support the person's use of the information and strategies in their lives and at work. The person feels respected for their expertise and experiences when with the provider. The person feels supported in his or her decision-making and valued for their perspectives. The provider also is respectful and aware of cultural values, practices, and attitudes that the person lives by and is inclusive of a person's cultural worldview.

Participants

The IMR program upon which VIMR is based, was developed from a review of empirically-validated approaches to teaching illness management to people with schizophrenia, schizoaffective disorder, bipolar disorder, and major depression (Gingrich & Mueser, 2011; Mueser, et al., 2002).

Since the original studies, IMR has been tested with a broader group of participants, inpatients, outpatients, and those living independently in the community, including individuals of all races and a wide range of cultures (Gingrich & Mueser, 2011). VIMR was developed for and tested with a wide range of participants working with employment specialists, including individuals with mood disorders, psychotic disorders, Post-Traumatic Stress Disorder, and others.

Participants in VIMR can be anyone with a mental health or behavioral health condition who may be interested in working. Participants do not have to accept their diagnoses to be able to use VIMR. VIMR providers use whatever language to describe their experience that is used by the participant himself or herself. As is true for IMR, participants do not need to be clean and sober as a prerequisite for their participation in the VIMR program. Participants may or may not be currently in a vocational rehabilitation program, such as supported employment. Simply being interested in working is sufficient. Those who are working with an employment specialist as well, may be better able to use what they learn from VIMR to pursue their goals. This has not yet been fully investigated.

Logistics

Settings

VIMR can be used in a wide range of settings, wherever the question of work may arise. This might include outpatient clinics, day programs, residential programs, supported housing programs, supported employment programs, case management programs, etc. The session can be provided in any setting that is convenient for the participant and the provider. As with IMR, this could be the participant's home; or a public setting where privacy and an environment free of distractions is possible, such as a religious organization, school, library, or community center.

Length and Frequency of Sessions

Sessions usually are scheduled for 30-60 minutes at a time, based on the participant's preferences and tolerance. Depending upon whether you are delivering VIMR in a group format or an individual format, the timeframe chosen has to do with participant's level of engagement and ability to learn the material. Some people have limited attention spans or difficulty processing information or may have the type of symptoms that make it difficult to focus for long periods of time. Providers also may find that participants increase their attention span over time as they become more familiar with the format and the content.

The frequency of sessions varies depending upon the participants, their learning style, and the activities or other interventions with which they are involved. For example, if someone is working already, sessions may have to be scheduled in the evenings at whatever frequency makes the rest of daily life possible. For some participants, more frequent sessions at the beginning of VIMR helps them to learn and retain the information better. For others, weekly sessions may be preferable to provide more time to practice what they have learned between sessions. The number of sessions per Module also varies by individual participants.

Some participants learn better and need information presented in smaller chunks. Consequently, breaking a Module into two or three sessions may be preferable to trying to cover the material in one session. Some participants may need to review and use some Modules more than others, depending upon their situation. For example, Preventing Relapses at Work may be an issue that is difficult enough for a participant, that a provider might find its repetition of strategies and practice to be beneficial for the person.

Group or Individual Sessions

VIMR was developed for use in individual sessions. The benefit of holding one-to-one sessions is that participants can move at their own pace and use the Modules in the order that most makes sense to them and their life circumstances. For example, a participant may find that the Module on Coping with Problems and Persistent Symptoms at Work to be highly relevant to their struggles, whereas the Module on Practical Facts about Mental Illness and Work may be of less relevance in the moment. Engaging participants in VIMR and maintaining their interest levels is best done when the Modules can be selected based on preference and relevance.

Some agencies, however, have used VIMR in a group setting. As with IMR, the recommended size of a group is between four and six participants. A group format can be more economical for the agency and can provide participants with more motivation, ideas, and peer support than is available in individual sessions. The main disadvantage of group sessions is that the power of modules that individually reflects the circumstances of the individual, is lost. Some strategies that may help to reduce this issue, is to form the group with people who are at the same stage of their vocational recovery—considering work, choosing work, getting work, or keeping work (Anthony et al., 2002).

In addition, holding some sessions individually and holding some in a group may be another strategy to increase the amount of tailoring possible for the individual participant (Gingrich & Mueser, 2011). For example, the Module on Work and Recovery or the Module on Practical Facts about Mental Illness and Work may be good modules to do in a group, because they present basic ideas about this domain, whereas other modules may be done best individually. Another strategy to both use a group format and maintain the benefit of individual sessions, may be to use a group format to provide social support, share coping strategies, and offer encouragement in pursuing personal goals.

Using the Modules

Vocational Illness Management and Recovery is an educational curriculum. The value of an educational approach when helping people achieve their recovery goals is that the process immediately provides a valued role for the person. An educational approach invites the person to be a student rather than a patient, consumer, or client. This approach values the fact that learning is a lifelong process that helps people achieve their goals. Learning reflects the hope and expectation that people will work with wellness.

The VIMR modules incorporate engagement, educational, motivational and cognitive-behavioral techniques. Research has indicated that learning is enhanced for persons with this blended approach (e.g., Meyer, Rose, & Gordon, 2014; Gronneberg, & Johnston, 2015).

Engaging strategies, motivational, educational, and cognitive-behavioral strategies are used in the VIMR program to engage a person in the VIMR process, enhance a person's participation and progress through the VIMR, and to assist the person to apply knowledge and skills gained in the VIMR program in his or her life.

Overview of Strategies

Engaging people in a mutual partnership involves using excellent communication skills. Actively listening to people and reflecting back what the provider has heard, demonstrates respect for the person. Responding to a person's feelings with empathy conveys a message of compassion that helps build trust. Sharing observations in a balanced manner with an emphasis on person's strengths assists them to develop their confidence and hope. Persisting in reaching out to people who struggle to attend their sessions, also conveys the message that they are important and they are valued. Connecting consistently demonstrates to people that their participation is important. Reminding them of their vocational and wellness goals and coaching them to persist and attend sessions builds hope, resiliency, and self-determination.

Motivational Strategies

Motivational strategies are included in VIMR. These strategies address the fundamental question of why the person wants to learn, to work, and to live with wellness. If a person does not view learning certain information or skills as relevant to his or her needs, that person will not be motivated to invest in the necessary effort of learning and using new strategies.

Motivation should never be assumed and lack of motivation should never be used to shame or judge a person. Motivation can be developed, and it also can wax and wane. Providers assist

people in recovery to develop motivation by using strategies that inspire hope, partnering with the person, teaching information that expands their knowledge, and strategies and providing opportunities for self-determination and success.

Motivating People

Motivating people involves connecting the VIMR information and skill learning with their personal goals and work goals. This is a critical strategy as people often lose sight of why they are learning information. Addressing people's fears, perceived barriers, lack of confidence; and acknowledging their negative realities are essential as these issues erode self-efficacy, confidence, and hope. Assisting people to weigh the pros and cons of change, both change in their roles and change in their behaviors, helps people to self-direct and self-determine their goals. This builds motivation. Reframing people's experiences in a positive light so they are more able to assume a hopeful expectation also will build motivation.

Sharing stories about recovery and expressing your confidence that the person will achieve his or her vocational goals is critical. Acknowledging their negative realities and helping them connect their experiences to personal growth and resilience is essential. Assisting people to connect to and utilize peer support is paramount for motivation, as peers truly understand what the person is attempting and striving to achieve. Peer support is inspirational and mutual.

Educational Strategies

Educational strategies aim to provide people with information and strategies they can use in their daily lives. Thus, this education is interactive, not didactic. It reinforces active learning rather than passive absorption of information. People best learn information by hearing, seeing, doing, and discussing. Providers are encouraged to use the teaching framework of **TELL-SHOW-DO-DISCUSS** as a method to develop an interactive educational experience. Each module provides ample opportunities to TELL information, SHOW an example of the topic, DO a learning activity and include opportunities to DISCUSS throughout. This TELL-SHOW-DO-DISCUSS also ensures that all learning styles are supported. Everyone learns differently and this approach incorporates a universal framework.

In addition to TELL-SHOW-DO-DISCUSS, it is critical that providers check for understanding on a regular basis. Engaging the person by inquiring what the material means to them, why they want to learn it, and what they feel about the topics will ensure that they are engaged and the material is presented in a way that meets their needs. Checking for understanding allows the provider to modify the content in each module to meet the person's learning needs. VIMR is meant to be modified to meet the person's cultural views, literacy levels, and personal relevance.

Preparing to Teach

Preparing to teach is, therefore, a critical provider strategy. Each learner has a unique learning style which requires the provider to customize what material they actually TELL-SHOW-DO-DISCUSS in the curriculum. This tailoring requires proactive planning.

Teaching strategies bring the VIMR curriculum to life for the person. Using a TELL-SHOW-DO-DISCUSS framework ensures that the modules will be interactive.

- Orienting the person to why this particular module is relevant to their goal of wellness and employment engages the learner from the beginning of the teaching.

- Sharing your stories of wellness and work, and asking them for their stories of wellness and work creates a bond in the teaching process.

- Modifying the modules to meet the person's cultural, linguistic, and literary needs helps make the content relevant and useful to the person.

- Providers are encouraged to personalize VIMR using their own style and tools with which they have become comfortable.

- Adding materials, social media, and including the person in modifying the modules helps to meet them where they are in their vocational recovery and educational level.

- Using humor and cultural references can increase enjoyment and the meaningfulness of the learning.

- Checking for understanding throughout the session, and if necessary, breaking the information down into smaller chunks promotes greater understanding and meaning.

- Coaching people to try new strategies and skills helps reinforce the impact of the information provided.

- Using yourself as a demonstration of a strategy and role playing together also can strengthen the bond between provider and learner.

- Reviewing the previous session each week allows the provider to assess how much was remembered and understood. Asking them to summarize the highlights of the lesson back to you also helps the provider assess how much has been retained of previous materials and modify current and future teaching accordingly.

- Designing specific, achievable, and meaningful homework assignments together increases the chance that the person will attempt the homework.

- Summarizing the key points and themes helps to connect the key points and themes to the person's goals and dreams and consolidates the learning.

It can be helpful to break the modules down into smaller chunks to make it easier to understand. It is useful to develop role plays, social media, and visual aids to demonstrate the content. It is really helpful to develop practice assignments, in partnership with the learner, to assist the person to apply the strategies to their daily lives. Setting small achievable goals for each week builds a foundation of success that empowers people over time.

Cognitive-Behavioral Techniques

VIMR incorporates cognitive-behavioral techniques throughout the modules as they have been proven through research to enhance the application of information and strategies into people's lives. Five techniques are used: reinforcement, shaping, modeling, practice, and cognitive restructuring.

1. **Reinforcement**

   Providers use reinforcement in two fundamental ways. First, providers use positive reinforcement to encourage, praise, and demonstrate confidence and enthusiasm to the person who is learning the material. This is important because it acknowledges people's efforts and helps build their self-efficacy and confidence. Secondly, as the person in recovery learns the information and chooses relevant strategies for wellness, they begin to experience the naturally occurring reinforcing effects including achieving their personal goals.

2. **Shaping**

   Shaping refers to the reinforcement of successive approximations to a goal. The expression, 'Rome wasn't built in a day', summarizes the concept of shaping. It takes time for people to learn, apply new strategies; and each person learns differently and at his or her own pace. It is important for providers to recognize and acknowledge the small steps along the way and provide ample feedback, support, and encouragement. Providers share their understanding of the time, the effort, and the courage it takes to make changes, to learn new strategies and to achieve one's goals. This shaping of attitude by providers promotes empowerment and hope.

3. **Modeling**

   Modeling is a very powerful technique when teaching people new skills. Modeling involves the provider or someone expert in the skill demonstrating the skill. It is what is implied in the 'SHOW' of teaching, and it plays an important role in VIMR. Modeling can be done by actually demonstrating the skill for the person or watching the skill being used by another person. Modeling is especially powerful when it is followed by the person practicing the skill with support and feedback.

4. **Practice**

   Practice opportunities are key elements of VIMR. In order to learn new skills, they must be practiced both in the session and in the person's work and community environments. Practice helps the person become more familiar with a new skill, the obstacles to using the skill, and provides opportunities for feedback from the provider. Role plays help ensure that learning is interactive and permit practice of a new skill with feedback. Providers always strive to give balanced feedback after a role play by emphasizing the strengths first and areas for improvement second. Another type of practice is to develop weekly homework assignments in partnership. Encouraging the person to try the skill out at work or in their other environments and then return to discuss it with the provider, allows for problem-solving and reinforcement of the strategy.

5. **Cognitive Restructuring**

   Cognitive restructuring is a strategy that involves helping a person reframe and develop an alternative, more adaptive, and often more accurate way of looking at things. People's beliefs about themselves, the world of work, their wellness and their personal styles of processing information, shape how they respond to events. Their beliefs and personal styles of processing information can be influenced by many factors including stigma, negative experiences, and symptoms. Cognitive restructuring helps people evaluate the accuracy of their thoughts, examine the evidence, and teaches them to challenge their interpretation of events in their lives in a more accurate and positive way. VIMR includes opportunities to learn cognitive restructuring strategies that can help people minimize distress that comes from inaccurate interpretations of thoughts and feelings at work.

Summary

Techniques	Strategies			
	Engagement	Motivation	Education	Cognitive-Behavioral
Express Empathy, Demonstrate Understanding	X	X	X	X
Outreach, ongoing connecting	X	X		
Identify personal benefits of learning	X	X		
Highlight past accomplishments		X		
Use decisional balance exercises and examples		X		
Reinforcement, Praise Progress And Efforts		X	X	X
Shaping				X
Modeling			X	X
Practice			X	X
Cognitive Restructuring				x

Involvement of Significant Others

Many people benefit from the involvement of significant others in helping them live well and work. Involvement of significant others may be helpful in several ways. By providing accurate information about mental health conditions to significant others, who may be misinformed, it may reduce criticism of the person's wellness and work goals.

Encourage people to share their wellness and vocational goals with important people in their lives, as it can generate support, and help the person achieve their goals. Peers with lived experience, who are working, can be strategic mentors and provide important supports. People can share their worksheets and educational handouts with their Employment Specialist as well, so the person is supported in their use of wellness strategies from on the job coaching they may receive.

The decision to involve significant others is always the person's choice. Explore with the person the benefits of involving them and respect their decision about whether and how to involve them.

The Content

The curriculum of Vocational Illness Management and Recovery is divided into nine modules. Each module follows the same format including Introduction, Things to Know, Examples from people with Lived Experiences, Tips and Strategies, Self-Assessments, and Summaries. Some modules include a Personal Plan.

Order of Modules

There is an advantage to starting with Module 1: Recovery and Vocational Recovery, as it provides a critical framework and foundation for the remaining modules. Research has demonstrated that VIMR is flexible. People in recovery find using the modules that they determine are most relevant to them, to be supportive of their vocational wellness. Providers are encouraged to begin with Module 1, and then in partnership, determine with the person, which module makes the most sense to them to next learn. The modules can be repeated as often as the person desires or needs.

Regardless of the order of presentation, it is helpful to make sure that over the course of time, the person is exposed to all modules as a form of education about different aspects of Wellness for Work. If the person never gets a job during the course of VIMR, the information about Performing Your Best at Work or Social Relationships at Work may be helpful as a preview or introduction to future situations, or may indeed reassure the person about ways of handling issues he or she may worry about currently as he or she considers work. Sometimes, if a person is not working, the content in these modules can be applied to other domains to help the person understand the concepts. For example, a person may use strategies from Performing Your Best at Work when they return to a school program. Developing a tracking sheet to keep note of which modules have or have not been covered over time, may be helpful in moving through the modules.

Each Module aims to raise awareness, share people's lived experiences with the topic, identify a range of strategies, and help the person then apply what they are learning to their own experiences.

Vocational Wellness Management Recovery Modules

Module 1:   Recovery and Vocational Recovery

Module 2:   Practical Facts About Mental Health Conditions and Work

Module 3:   The Stress Vulnerability Model and Vocational Recovery

Module 4:   Using Medication Effectively and Avoiding Drugs and Alcohol for
             Vocational Success

Module 5:   Coping With Challenges and Symptoms at Work

Module 6:   Coping with Stress at Work

Module 7:   Building Social Relationships at Work

Module 8:   Preventing Relapses

Module 9:   Performing Your Best at Work

Format of the VIMR Sessions

Each session of the Vocational Illness Management and Recovery program follows the same structure. After participating in a few sessions, most people become familiar and comfortable with the format. As providers use the same format consistently, it becomes comfortable to them as well. A Provider's lesson plan is included in each module in this guide to give instruction on how to use the format with the particular topic as well as the module goals and key strategies.

Here is a general process that is recommended when using the VIMR modules.

Steps:

1. Welcome the person and inquire about their well-being and any problems.

2. Review the previous session and any homework assignments.

3. Determine together the module for the session.

4. Discuss why the topic is important or helpful to the person.

5. Discuss what the goals and activities of the session will be.

6. Show or demonstrate an example.

7. Teach or share the information.

8. Discuss or practice the information or skill.

9. Summarize the session and determine together an assignment.

10. Thank the person for their participation and invite them to the next session.

It is vital that the provider is sensitive to the person's energy levels, attention span, and literacy levels. It is important to personalize each session's pace to the person's needs. It may be desirable to take breaks during each session or to simply have brief sessions. Research has shown that sessions generally last between 30 and 60 minutes. Providers also have found that it is very important to balance the time spent welcoming and inquiring about problems in order to leave enough time to work on the module.

Goal Setting

Many people are not eager to identify or work on specific goals. For people who may have had a lot of disappointments in their lives, they may see goals as another occasion for inevitable failure. Others may have had negative experiences of having had goals forced upon them. Setting goals for oneself and then getting provider assistance in reaching those goals, however, is an integral part of VIMR in that it helps people move towards recovery.

Focusing on vocational recovery and what it means to the person, instead of on goals initially, may help the person begin to consider changes he or she might like to make. The provider may never use the term 'goal', if it is a term that brings many negative feelings to mind for the person. The provider may choose to use the terms 'changes you would like to make' or 'thing you want to do'.

Sometimes the vocational recovery goal is about making a choice of the kind of work or job the person would like. This is an important and defining goal. Reviewing the person's overall values and criteria for making a work choice (e.g., 'having people respect me', 'helping others', 'enough money to pay for a car', etc.) and then brainstorming options are useful strategies to helping a person, with limited experience in the world of work, make a choice. Sometimes working together with the employment specialist, who actually is helping an individual get a job, can be critical in helping the person to identify their work values and personal criteria. Trying different jobs is an experiential way for many individuals to learn about their interests and values for work, but may be beyond the scope of VIMR providers.

Breaking down the overall vocational recovery goal or 'thing I want to do' into short term goals, and then turning each short term goal into manageable steps, can be a helpful way to facilitate the person's ability to think in future terms and have a success experience that builds other success experiences.

Using a VIMR tracking sheet can be a helpful way to keep progress towards goals clear in the individual's mind. Reviewing a Tracking Sheet on a weekly or regular basis, checking off steps, discussing issues that come up when trying to achieve these steps and strategies to overcome them, modifying goals all work to keep the person engaged, moving towards their goals and experiencing success over time. Following up on goals on a regular basis allows the provider to reinforce any steps taken as well as to link the material in the modules to the person's real life efforts to progress towards their goals. An example Tracking Sheet is provided at the end of this Manual.

Following up on goals can be difficult for people. A goal may have been meaningful when the person set it and over time is less so and so needs modification. The person may not follow through, because they lack the skills needed to achieve the goal, and may need some skill teaching to develop the skills. They may need additional support (i.e. cues, reminders) to remember to work on the steps that were identified. The goal or steps may not be sufficiently well defined to act on, or the steps may not be small enough for the person's level of functioning and therefore need to revise the goals or the steps to be more concrete. When a person is not following through on his or her goals, it is important for the provider to explore with the individual, the obstacles that are getting in the way and to identify doable strategies to overcoming them.

Developing Effective Practice Assignments

Practicing what is learned in the sessions, outside of the sessions is critical to learning new material. Practice provides participants with the chance to review what they learned and apply it to their daily lives, and also to make progress towards their specific goals. Each successful step towards a goal provides concrete evidence to the person that they can make change happen, and that there is reason to hope for a more meaningful life that includes work.

When talking about home practices, it is important that the provider is sensitive to the potential of negative reactions. Many people have had bad school experiences and have had many failures in educational settings that can be triggered by the word 'homework'. Others have no such associations. Using a neutral terms, such as 'practice' or 'follow up', can be a strategy to avoid triggering a negative reaction and lack of investment. Orienting participants to the fact that VIMR includes follow up to each new Module and its information, helps people know what to expect. In addition, the provider's tone and description of practice possibilities are critical to setting positive expectations and follow through on the practice. Making clear the benefit of each practice and describing its relationship to the person's goals is helpful in setting the tone.

There are two types of practices presented in VIMR: 1. Reviewing or practicing material taught in the module, and 2. Steps towards personal goals. For example, reviewing handout materials

is one type of assignment. Practicing relaxation skills at home is another example of reviewing or practicing module information. Tracking steps taken towards the achievement of a specific goal and then reviewing that step with the provider is an example of the second kind of practice, i.e., steps towards the goal.

Practices need to be developed collaboratively with the participant and tailored to his or her specific circumstances, including exploring how the practice will have specific benefits for the participant and designing specific instructions to help the person understand *what to do, when to do it, who to do it with, and how to remember to do it.*

While people often do not initially follow through on practices, with reinforcement and troubleshooting difficulties in following through, over time many participants do begin to invest in the practice and see its benefits in relation to their personal goals. Focusing on small, gradual improvements in following through on practices, can be encouraging and reinforcing to the person. Common problems in follow through include: lack of understanding of what the practice was supposed to have been, forgetting the practice, or the lack of hope or belief in their ability to make change happen. Reviewing the causes of participant's lack of follow through is essential to addressing the difficulty and promoting successful completion of VIMR.

Helpful strategies to deal with follow through problems include:

1. Remembering to praise all efforts, large and small. For example, you might say to someone who did not do the practice because they felt overwhelmed by the number of words on the page: "It's clear you looked at the practice we discussed—great job!"

2. Explore the challenges that came up: Remembering? Not being sure what to do? Not believing that it mattered? Being afraid that it was not 'doable' or that they would fail?, etc.

3. Problem solve around the specifics of the challenges so that people can be successful. For example, break the practice into smaller pieces than originally planned, begin the practice in the session itself, set a reminder to do the practice on a smart phone, or pick a specific time to do it and set an alarm to remind the person at the time.

Module 1: Recovery and Vocational Recovery

PROVIDER'S GUIDE:

Useful Materials:

Goal: Participants will set goals towards recovery and work and identify personal wellness strategies.

It is helpful to have a small whiteboard to write down concepts, ideas, and make the experience interactive. Pens, markers, paper, as well as any recovery, wellness, peer support and work materials (e.g., resources related to finding peer support, websites on health promotion and wellness, stories of successful work experiences and vocational recovery, such as Employment Repository, <cpr.bu.edu/Resources>) are also useful to have on hand. If English is the person's second language, seek to hand out materials in his or her language.

Environment:

Choose a space that is convenient for the person and also allows for some privacy and quiet.

Structure:

1. Welcome the person and inquire about their well-being. Listen for themes of wellness, resiliency, determination, as well as negative realities. These themes can be sources of connection with VIMR materials.

2. Review the purpose of working together on VIMR. Orient to the process of partnership and what that means for the person. Orient the person to the Curriculum, the 9 modules, and explain that the process begins with module 1 and after that, the person determines which module they want to work on until all the modules are complete. Explain that the sessions typically last 30-60 minutes. Ask them to share their understanding of what the VIMR is and how the partnership will work to confirm that they have heard and understand.

3. Explore the person's understanding and experience with their recovery. Ask them what Recovery means to them and why they want to work. It can be validating to write their responses down on a whiteboard to view while in the session.

4. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

5. This session focuses on inspiring the person to set small goals towards both their personal recovery and work. Connecting their hopes and dreams to the VIMR and the process you will be partnering on is your goal as the provider.

6. Motivational strategies include exploring the pros and cons of working, and reframing past work difficulties into positive learning, and promoting hope and positive expectation for recovery, wellness, and work. Acknowledge the negative realities of stigma, prejudice, and discrimination that mental health condition brings into their lives; and use the peer comments in the curriculum to inspire them that people can work with wellness.

7. Cognitive strategies include reframing as many people have had negative life and work experiences that can deplete their hope. Reinforcement of their efforts to engage in partnership and consider new strategies and goals are essential.

8. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR.

9. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 2: Practical Facts about Mental Health Conditions and Work

PROVIDER'S GUIDE:

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources, support, and treatment for mental health conditions. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will gain information about their mental health condition, their symptoms, and wellness strategies they can use to succeed at work.

Environment:

Since this module is about mental health conditions, it is particularly respectful to have a quiet environment to ensure privacy and confidentiality.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It also is important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week, and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the first module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that it is very helpful to learn practical facts about their particular diagnosis and what wellness strategies can support them at work and in their life. The major diagnoses are included in the module, so it is only necessary to review the person's diagnosis.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People typically like this module as they often have been misinformed about their diagnosis and have a limited view of what kinds of wellness strategies can be helpful. It is an opportunity to challenge misconceptions and fears about work, wellness, and mental health conditions.

7. Motivational strategies include connecting the information and strategies about their mental health to their goals in life, and how the strategies are their wellness tools to help them achieve their life goals. Point out their strengths and strategies they already are using as examples of their resiliency and wellness. Use the language of wellness instead of illness as a way to promote hope, health, and positive expectations.

8. Acknowledge the negative realities of stigma, prejudice, and discrimination that diagnoses bring into their lives and use the peer comments in the curriculum to inspire them that people can work with wellness.

9. Cognitive-behavioral strategies in this module include reinforcement of the wellness strategies they already use, reframing negative experiences with their health into positive learning, and modeling through self-disclosure any wellness strategies you employ for wellness.

10. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Other possibilities include asking the person to focus on one wellness strategy in the coming week as a way of practicing positive self-care.

11. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 3: The Stress Vulnerability Model and Vocational Recovery

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers and handouts on resources, support, and treatment for stress. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will learn about the stress vulnerability model and how stress impacts their health and success at work.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week, and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that it is very helpful to learn about how stress can play a significant role in our health and wellness. Inquire about their knowledge of stress, what it means to them, and how they experience stress in their bodies, thoughts and feelings and behaviors.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. It is very useful to draw the stress vulnerability model on the whiteboard or on a piece of paper. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People typically like this module as they often have little knowledge of how stress can impact their health. While they may understand stress, they enjoy making the connection to their personal stressors and how it impacts their health. They also learn about the negative ways of coping with stress and have an opportunity to learn about resources that are more supportive of their goals. It is an opportunity to empower them that they can befriend their stress and develop strategies that minimize or eliminate the negative impact of stress on their wellness.

7. Motivational strategies include connecting the information and strategies about their mental health to their goals in life and how the strategies are their wellness tools to help them achieve their life goals. Point out their strengths and strategies they already are using as examples of their resiliency towards stress. Use the language of wellness instead of illness as a way to promote hope, health, and positive expectations. Challenge fears about stress, and point out that life and work is full of stress that they can successfully manage.

8. Cognitive-behavioral strategies in this module include reinforcement of the wellness strategies they already use, reframing negative experiences with their stress into positive learning, and modeling through self-disclosure any stress strategies you employ for wellness at work.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Other possibilities include asking the person to focus on one stress strategy in the coming week as a way of practicing positive self-care.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 4: Using Medication Effectively and Avoiding Drugs and Alcohol for Vocational Success

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources and supports for treatment choices and substance abuse issues. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will learn information about medications and how they may impact work performance.
> Participants will identify strategies to minimize substance use or choose a sober lifestyle.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that the module is about the role of medications in wellness as well as the role of substance use in wellness. Emphasize that use of medications and substances is very personal choice and that together you will

learn information that can help the person make informed choices. Inquire about their experiences with medication and substances. It is critical to acknowledge the difficulties and negative experiences people have had with the mental health system and medications. Many people feel very traumatized by these experiences.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. It is very useful to focus on only those medications they may be taking or are interested in knowing about. Some people may not use substances or be challenged by substances. If this is the case, then there is no reason to spend time in this section. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People have strong feelings about psychiatric medications. Many people have developed adverse physical health problems as a result of the medications they take. This module is an excellent opportunity to learn about the medications and the potential impact they may have on the person's ability to work with wellness. It is an opportunity to empower them and assist them to share decisions with their providers to enhance their wellness for work. It is also a powerful module to connect people with peer support around their health and sobriety issues.

7. Motivational strategies include connecting the information and strategies about medications and substance use to their goals in life. Point out their strengths and strategies they already are using as examples of their wellness and self-determination. Use the language of wellness instead of illness as a way to promote hope, health, and positive expectations. Explore shared-decision making and cultural views towards partnering with their providers. Respect their choices about medication.

8. Cognitive-behavioral strategies in this module include reinforcement of the wellness strategies they already use, reframing negative experiences with medications into positive learning and reasons for shared-decision making with their provider. Connect people to peers who are working, who can model their choices on medications and substance use.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Other possibilities include

encouraging the person to share with their medication provider their work goals and the need for wellness at work.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 5: Coping With Challenges and Symptoms at Work

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources and supports for wellness strategies that can be used at work. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will identify potential problems at work that may interfere with success and happiness as well as develop a plan for coping with persistent symptoms.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that this module is about identifying potential problems or persistent symptoms that might interfere with their work and developing a strategy plan for success and satisfaction. Explore with them their past experiences with work and their wellness. What got in the way? What kinds of problems do they

have in their life? How did they handle or solve these problems? Share that problems are a part of life and work. Everyone struggles with problems at work, and by being proactive and planning on how to cope, can lessen the stress that these problems may bring.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. People have many problems, so it is useful to help people prioritize which problems are most likely to interfere with their goal of working. Spend time encouraging them to discuss reasonable accommodations with their employment specialist, if they feel they need them. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People who have not worked for a long time or have had unsuccessful experiences at work often lack self-confidence and hope that they can work. Persistent symptoms may be exacerbated at work, and people may have struggled in finding strategies for wellness at work. Many people have had interpersonal difficulties at work, and as a result, may have developed inaccurate ways of interpreting thoughts, feelings, and behaviors. This module spends time teaching people about problem-solving and distorted styles of thinking that we all use. People really enjoy identifying their particular style of thinking that can cause them problems and sharing these stories. It is a great module for sharing any of your own distorted styles of thinking, as it strengthens the validity that all people struggle with problems at work, and that learning strategies empowers people to be more successful and happier.

7. Motivational strategies include connecting the information and strategies about problem solving, particular symptom issues at work, distorted thinking and planning to their goals in life. Point out their strengths and strategies they already are using as examples of their wellness and self-determination. Share your observations of their styles of thinking and your positive expectation that they can learn to challenge that type of thinking. Use the language of wellness instead of illness as a way to promote hope, health, and positive expectations. Explore their cultural perspectives in terms of problem-solving, distorted thinking styles, and work relationships. Use humor to create a sense of mutuality around problems at work.

8. Cognitive-behavioral strategies in this module include reinforcement of the positive problem-solving strategies they already use, challenging cognitive thinking styles, and increasing mindfulness of the connection between their thoughts, feelings, and

behaviors. Connect people to peers who are working, who can share successful stories of problem-solving at work.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Other possibilities include encouraging the person to be mindful of their particular cognitive distortion over the coming week and encourage the use of strategies to challenge those thoughts. This module also includes a plan that they develop at the end. Encourage the person to place the plan somewhere they can access it easily, such as on the refrigerator at work or in their desk at work.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 6: Coping with Stress at Work

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources and supports for coping with stress. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will build effective strategies for dealing with stress at work. Participants with learn how stress hardiness can be a wellness tool for success at work.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that the module is coping with stress at work. It is an opportunity for them to improve their understanding how they experience stress and how to best handle stress at work, so they can be happy and successful. Share that coping with stress in positive ways builds their stress hardiness, or their ability to face

stress with wellness. This stress hardiness can become a wellness tool at work. Ask them about how they have handled work stress in the past. Ask them what they do to resist stress. Share your positive and negative experiences with stress at work and your stress hardiness tools.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. It is very useful to talk about the fact that adding work to their lives, in and of itself, can cause stress to their routines, commitments, and responsibilities they may have. This module is an opportunity to begin exploring those work/life balance issues that everyone struggles with. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People want to work. Work with all its benefits, also creates costs for our lives. This module provides opportunities to discuss the daily hassles of life and how to integrate work into the person's routines through preventive coping. It teaches simple coping and relaxation techniques that can be done anywhere, and assists people to make a prevention plan for stress at work.

7. Motivational strategies include connecting the information and strategies about coping and relaxation to their goal of work. Point out their strengths and strategies they already are using as examples of their and coping. Teach the coping and relaxation skills and practice them with the person. Use the language of wellness instead of illness as a way to promote hope, health, and positive expectations. Explore any cultural coping strategies they may have and connect them to peers who may have similar interests in wellness alternatives.

8. Cognitive-behavioral strategies in this module include reinforcement of the wellness strategies they already use, reframing negative experiences with stress into positive learning, and practicing of the coping and relaxation skills learned.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Coach the person to use the plan they designed for coping with stress and see how it works. If they use a smart phone, encourage them to place the simple breathing exercise in their notes application, so they can easily access it when they need it. Share other applications they can download for relaxation.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 7: Building Social Relationships at Work

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources and supports for peer support. Peer support is extremely powerful in the recovery process and often is the catalyst for health and wellness. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will identify supportive relationships and how to strengthen relationships at work to be successful and happy. Participants will create a support plan for work.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that the module is about the role of support and relationships at work. Most jobs require some social interaction, and everyone has personal choices when it comes to support and relationships at work. Ask the person

about who is supportive in their life. Ask the person to share past relationship experiences with co-workers and supervisors. Inquire about their preferences for relationships.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. It is helpful to point out the concept of 'unspoken' expectations about work relationships as people may be inexperienced with navigating social relationships at work. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story- telling. Check frequently for their wellness during the session.

6. People have personal needs and preferences when it comes to support and social relationships. Cultural and ethnic preferences also are very important to people's relationships, so it is important to understand the person's perspective. People also have a wide range of interpersonal skills and how to build successful relationships. This module often requires modifying to meet the person's skill and knowledge needs on how to interact with others at work. It is a great opportunity to discuss issues of stigma, prejudice, and discrimination that can interfere with building social relationships and how to share personal information in proactive ways. Practice social skills for work with the person. It helps develop their confidence that they can use these skills at work.

7. Motivational strategies include connecting the information and strategies about social support and relationships to their goal of work. Point out their strengths and strategies they use to socialize with others. Use the language of wellness instead of illness as a way to promote hope, health and positive expectations. Explore their hopes and values around relationships and how relationships can support their recovery and work.

8. Cognitive-behavioral strategies in this module include reinforcement of the social engagement strategies they already use, reframing negative experiences with people and relationships into positive learning, role modeling social skills, and practicing social skills. Connect people to peers who are working, who can provide powerful support for the person.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Encourage the person to seek support in important wellness domains including their spiritual communities, peer communities, and family and friends.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 8: Preventing Relapses

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources and supports for learning how to create wellness recovery action plans, which is a peer developed and delivered practice. It is also useful to have addiction support resources in your community. If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will identify personal situations that may prompt illness and relapse. Participants will personalize warning signs and wellness strategies in a relapse prevention plan for work.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that the module is about proactive planning for if and/or when their wellness is depleted and they experience illness, addiction

problems, and/or distressing symptoms. Share that having a relapse plan or wellness recovery plan is critical at work, so that they can minimize the impact of any illness or addiction issue on their work. Ask them if they have experience in wellness recovery action planning. Ask them about their personal experiences with relapse and how the event has impacted their life and their past work experiences.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. It is very useful to assist people to identify their personal triggers and warning signs as well as what strategies make them feel safe, well, and supported. Emphasize that their wellness is personal, and they are more empowered when they choose strategies that will work for them, not strategies that others want them to use. Gauge the person's energy, attention, and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People often have significant trauma around their experiences of relapse and addiction struggles. Many people have experienced lack of choice and coercion from the mental health and legal system and their family. People have had profound losses as a result of past relapses. This module is a critical opportunity to return people's power over their wellness by helping them proactively plan to stay well and what to do if they relapse. It is an opportunity to self-determine choices and consequences about their health and wellness. It is also a powerful module to connect people with peer support around their health and sobriety issues.

7. Motivational strategies include connecting the information and strategies about relapse and proactive planning to their goals in life. Point out their strengths and strategies they already are using as examples of their wellness and resiliency. Use the language of wellness instead of illness as a way to promote hope, health, and positive expectations. Explore alternative wellness strategies they might add to their plan. Respect their choices about medication, hospitalization, and involvement of significant others.

8. Cognitive-behavioral strategies in this module include reinforcement of the wellness strategies they already use, reframing negative experiences with relapse into positive learning and planning. Connect people to peers who are working, and to peer-delivered wellness recovery action planning classes. Reinforce the power of peer support.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as

asking them to seek out a peer for support and friendship, or sharing with their employment specialist the information they learned in VIMR. Other possibilities include coaching the person to put the plan in a visible location to refer to on a daily basis.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Module 9: Performing Your Best At Work

PROVIDER'S GUIDE

Useful Materials:

It is helpful to have a whiteboard for writing, pens, markers, and handouts on resources and supports on work, wellness and work/life balance issues (including transportation, childcare, educational opportunities). If English is the person's second language, seek to hand out materials in his or her language.

> **Goal:** Participants will learn information and strategies for creating optimal conditions at work so they experience wellness and career success.

Environment:

This module can be delivered in any convenient environment for the person. It is helpful to have space for writing, and some degree of quiet and privacy.

Structure:

1. Welcome the person and inquire about their well-being and anything else they might want to share about their past week or several days. It is important to take the time to engage first before starting the module. It is also important to listen for any current theme that you can connect to the material in the module.

2. It sometimes can be difficult to switch from engaging to the module. It can be helpful to watch the time and after five minutes or so, respond to their last comment and say something like, "It sounds like you have had a hard week and I would like to start the module now as I think the material we are going to talk about today will be helpful to you."

3. Ask them to review what they remember from the last module and review the practice assignment. Explore briefly any challenges they had with the practice.

4. Orient them to the module and explain that the module is about creating the best work/life balance they can, so they can grow and thrive with wellness at work. Ask the person what an ideal job would look like? What would the ideal job conditions be for

that person? Have they had jobs where these 'best' conditions were in place or not? Share what your best work conditions are and why they support your wellness at work.

5. Proceed through the Things to Know, Tips and Strategies, and Self-Assessments in the module. It is very helpful to encourage the person to identify those critical conditions they need to succeed and those conditions that will make the job more satisfying. Remind them they have both responsibilities and rights at work. It is okay to ask for accommodations and conditions that will enhance their chances for success. Gauge the person's energy, attention and engagement in the module by using the teaching methods of tell-show-do-discuss. Encourage discussion and story-telling. Check frequently for their wellness during the session.

6. People often have worked in jobs that have not been an ideal choice, activity, or environment for them. They lack knowledge and experience on how to identify what makes a good job match for them. They may feel they don't deserve to ask for conditions that will improve their work experience. They lack positive experience in the skill of asking and negotiating. This module is a wonderful opportunity to empower people's sense of work worth and their self-efficacy to create a positive job experience. Assisting them to figure out what will support them best at work, whether it is people, places, things, or activities can expand their view of work greatly, and in turn, their work experience. Practice the skills with them so they feel empowered to try them at work.

7. Motivational strategies include connecting the information and strategies about personally important conditions to work success and work happiness. Point out their strengths and strategies they already are using to get their needs met at work. Use the language of wellness at work and personal responsibility as a way to promote hope, health and positive expectations. Explore cultural views about work responsibilities, work ethic, and negotiating with people at work.

8. Cognitive-behavioral strategies in this module include reinforcement of the strategies they are learning to use, reframing negative experiences with poor work conditions into positive lessons and learning how to identify personally important work conditions. Connect people to peers who are working, who can share their personally important work conditions and how they have been able to create or achieve them.

9. End the session with a brief summary and develop together a small practice assignment that has relevance to the person and the work done together. It may be as simple as asking them to seek out a peer for support and friendship, or sharing with their

employment specialist the information they learned in VIMR. Other possibilities include the actual use of the skills taught in the workplace.

10. Appreciate the person for coming to meet with you. Share your observations of their strengths, their hopes, and dreams. Make a date for the next session, and confirm the best strategy for connecting with them to remind them of their meeting (phone, e-mail, text).

Example: Goal Tracking Sheet

Personal Vocational Recovery Goal:

Keep my job as a cashier at the Thrift Store for the next six months.

Review Date: December 15th

Short-term goal related to vocational recovery: Identify the job accommodations I need to do my best.		Short-term goal related to vocational recovery: Request the job accommodations I need to do my best.
STEPS: 1. Review accommodations I have had in the past that worked. 2. List physical accommodations I need. 3. List the cognitive accommodations I need.		**STEPS:** 1. Ask the boss for a date to meet with him. 2. Review the final accommodations list. 3. Role play the request meeting.
Start Date- January 20th		**Start Date- February 20th**
Weekly Review Date: Achieved the steps: Fully Partially Not at all		*Weekly Review Date*: Achieved the steps: Fully Partially Not at all
Changes in goal? **Changes in steps?**		**Changes in goal?** **Changes in steps?**

Worksheet: Goal Tracking Sheet

Personal Vocational Recovery Goal:

_____

Review Date: _____

Short-term goal related to vocational recovery:		Short-term goal related to vocational recovery:
STEPS: 1. 2. 3.		**STEPS:** 1. 2. 3.
Start Date-		**Start Date-**
Weekly Review Date: Achieved the steps: Fully Partially Not at all		*Weekly Review Date*: Achieved the steps: Fully Partially Not at all
Changes in goal? **Changes in steps?**		**Changes in goal?** **Changes in steps?**

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Notes

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Group Process Guidelines for Leading Groups and Classes

Vocational Illness Management and Recovery: Wellness For Work

Participant Workbook

Adapted by:

Dori Hutchinson, Cheryl Gagne,
and Marianne Farkas

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Table of Contents

Overview of Vocational Illness Management and Recovery

Vocational Recovery and Wellness

Vocational Recovery is the personal process of finding purpose, meaning, and enjoyment at work. Work is an important part of the recovery experience as it provides people with a valued role and resources to live their lives as they choose. People who live with mental health conditions want to work and can work successfully in careers of their choice.

Wellness is a critical resource for all people to achieve their life goals. Wellness at work is especially important because it supports people to thrive and succeed at work. Wellness is also very personal and self-defined state of being that encompasses eight dimensions: physical, mental, social, emotional, financial, spiritual, community, and environmental (Swarbrick, 2006).

The intent of Vocational Illness Management and Recovery (VIMR) is to support the hope and rights of people who have mental health conditions to thrive with wellness in meaningful work. It is a curriculum that is flexible and can be personalized to meet people where they are in their vocational recovery. The focus of VIMR is providing people with inspiration, information, and the strategies they want to support their goal of successful employment.

Broadly, the goals of VIMR are:

- Inspire hope that meaningful work is possible.

- Work in partnership with a person to achieve wellness at work.

- Teach people information and strategies to support their wellness at work.

The Importance of Helping People Set Meaningful Goals

People who have experienced mental health conditions often have been told to discard their dreams because the condition will prevent them from accomplishing what they hope for in their lives. Self-determining meaningful goals, and then accomplishing them, is an essential part of recovery.

The importance of empowering people to choose, to set, and to work towards their personal goals of wellness and work is the heart of VIMR. Each module guides the provider to support personal goal setting that is specific, measurable, and achievable. This constant provider

activity helps the person to move forward with success and happiness towards wellness at work.

Core Values of Vocational Illness Management and Recovery

The core values of VIMR are those upon which recovery-oriented services are based (Farkas 2007; Farkas, Gagne, Anthony et al., 2005).

- **Hope**

  First and foremost, the process of leading a person through VIMR involves inspiring hope that wellness and work is not only a possibility, but that wellness and work are everyday realities for people with mental health conditions. This message is critical for empowering people to self-direct and self-determine their lives. It is vital that providers of this curriculum teach and support people with the attitude that they have confidence that people will work with wellness. Providers are most successful when they feel hopeful that the person will achieve their goals, even if the person is pessimistic or lacking in hope.

- **Person Orientation**

  VIMR is based on respect for individuals in recovery, including the notion that people have strengths, talents, and interests—not just limitations and illness-related characteristics. Recovery-oriented providers are interested in people's strengths, looking for ways to engage them in their interests, and use their talents for recovery. It is important for individuals in recovery to know that they have strengths, interests, and talents as they often have been served in mental health services that are predominantly focused on their deficits. Empowering individuals in recovery involves reinforcing and using the individual's strengths to help them choose, get, and keep meaningful work. Involving individuals as people with the capacity to learn new information, involving them in determining their work interests and ideas about the strategies they are interested in learning and using, and helping people to reflect on things they did well in their previous experience are some ways in which the VIMR curriculum focuses on a person orientation.

- **Self-Determination**

  It is essential for providers to support the self-determination of the person they are assisting to achieve wellness at work. Providers recognize that persons with mental health conditions have a right to choose what goals in wellness and work are important to them

and how they want to proceed in achieving these goals. Providers assist and support people in VIMR to make informed choices about the content that is relevant to their goals and to their experiences. A constant theme in VIMR is providing information, options, and strategies to expand people's awareness of options for wellness at work.

- **Partnership**

  The spirit of VIMR is that of partnership. The provider and the person work side-by-side in an equal relationship that reflects respect for one another. The provider's role is to facilitate and support the person's use of the information and strategies in their lives and at work. The person feels respected for their expertise and experiences when with the provider. The person feels supported in his or her decision-making and valued for their perspectives. The provider also is respectful and aware of cultural values, practices, and attitudes that the person lives by and is inclusive of a person's cultural worldview.

How Will This Workbook Help You?

The VIMR process teaches skills and strategies that have been shown to be helpful in alleviating distress caused by symptoms and work-related stress. The strategies in this workbook also can help you solve work relationship issues, handle stress better at work, improve your work-life balance, become more confident, and experience greater wellness. Further, these strategies can help you if you are struggling to maintain sobriety or to live and work without substances. The VIMR provides a structure that can help you make these changes so you achieve your work and recovery goals.

How to Use this Workbook

This workbook teaches you how to reframe experiences and use strategies and skills that are necessary to make changes at work and in your wellness. Therefore, it is important for you to complete the checklists and complete the exercises in each module. Each module assists you to discover individualized strategies to use that are valuable to you. We recommend you start with Module 1, as it provides you with a foundation of work and recovery. After that, we encourage you to choose those modules you believe will be most relevant and useful to you in achieving your work and wellness goals. We hope this workbook will provide you with the opportunity and inspiration to achieve your goals that have meaning to you.

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Notes

Module 1

Recovery and Vocational Recovery

"There is ME, and then there is my illness….I am not defined by my illness!"
-DJF

Table of Contents

Introduction

The intention of Module 1 – Recovery and Vocational Recovery is to:

- Increase your understanding of recovery.
- Identify what helps your recovery.
- Explore how work can contribute to your recovery.

As you go through the Module, you will be encouraged to think about what recovery means to you, to consider what steps may be helpful in reaching your recovery goals, as well as reflect on how work might contribute to your own recovery.

Things to Know about Recovery

Recovery is a very personal experience. People define recovery in their own way. Here are a few descriptions of recovery that people have shared:

> *"Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of mental illness."* (Anthony, 1993)

> *"Recovery is a process, a way of life, an attitude, and a way of approaching the day's challenges."* (Deegan, 1988)

> *"It's about recovering your life and your identity."*

> *"It's about having a job that I like, that I am good at, that helps me make a living so I can have a home and a car and do the things I enjoy."*

> *"Recovery to me is about having good health, living without a lot of symptoms, and feeling well enough to do the things I want to do in life."*

> *"Recovery for me is having good relationships and feeling connected. It's about being able to enjoy life."*

Reflective Questions

- What does recovery mean to you?

- If you were to choose one word that best captures what recovery means to you, what would that word be?

- What has influenced your views on recovery?
  Consider, for example, the life experiences you have had, your family's perspective on mental illness and mental health, your cultural and/or religious beliefs.

- What do you want to accomplish in your life?

- What has supported you in achieving what you want in life?

- What has gotten in the way of you achieving what you want in life?

Recovery Tips and Strategies

There are many things that can support a person's recovery. Helpful strategies that others have identified include:

- **Using Peer Support**
  "Through our peer support center, I share my life with others in hope that they too may meet and overcome challenges that are similar to those I have overcome. I like to believe I am 'opening doors' that will allow others to move forward in their journey of recovery."

- **Working**
  "Work is very therapeutic for me because I found a job that is nurturing and that allows for creativity, control, and personal growth. I take great joy in my work."

- **Learning more about my Illness**
  "When I stopped blaming life and others for challenges imposed by my illness, I was more able to handle stress, disappointments, and even my successes. I educated myself about my symptoms and how to cope better. Now, they don't interfere as much."

- **Finding ways to enjoy my Life**
  "I make a plan for my weekends now, so that at least once, I do something that gets me out…I go get a cup of coffee, go to a movie, anything so I don't get too isolated in my room."

- **Joining Self-Help Groups**
  "With the help of others in my AA group, I am learning to go easier on myself, accept who I am, and be okay with me, flaws, scars, and all."

- **Volunteering**
  "I have a volunteer job. I have people who need me now. I have good friends. I have a good life."

- **Making Cultural Connections**
  "I found a network of people from my country who have become my friends and we talk together in our language… It has been very healing for me. We understand each other."

- **Exercising and Eating Well**
  "Good nutrition has been a key part of my recovery. Exercising has helped me 'recover' my body from all the side effects of my illness. For me, recovery is a feeling of wellness."

- **Using Complementary Health Practices**
  "I learned to practice Tai Chi, and it has helped me heal my mind with my body and my spirit. It brings me into the moment, and I feel so much better after I practice."

- **Taking Small Steps to reach my Goals**
  "Breaking my goals into small steps helped me finish school and finally get a job. I felt better about myself because I was succeeding and making steady progress."

- **Having a Pet**
  "My dog needs me and I need her. We are best friends, and she has helped me recover as I need to be well enough to take care of her. I am responsible for her, which helps me remember to take good care of myself."

- **Using Spiritual Practices**
  "Prayer allows me to be fully alive and spiritually awakened, which has made all the difference."

- **Practicing Creativity: Poetry, Music, Art, Writing**
  "Deliberate mental activity, such as writing, listening to music, playing a musical instrument…developing a hobby, enables me to sharpen and refocus my mind."

- **Spending Time with Friends and Family**
  "It is crucial to have someone who believes in you and sees the good in you, and will never give up on you. I have a close friend who is always there for me."

- **Choosing to take Medications and Participating in Therapy**
  "I came to understand that there was no exact treatment, and that it was a work in progress, with victories, and setbacks along the way. I now work with my doctor and direct my recovery."

Self-Assessment – Recovery Strategies

Recovery Strategies Checklist

Directions: Consider your own recovery experience. Check the strategies you currently use that support your recovery. Check the strategies you would like to try. Check the strategies you have no current interest in exploring. For 'Other', add any of your own strategies that are not listed.

Strategy	I use	I want to try	No interest
Using Peer Support			
Working			
Learning more about my Illness			
Finding ways to enjoy Life			
Joining Self-Help Groups			
Volunteering			
Making Cultural Connections			
Exercising and Eating Well			
Using Complementary Health Practices			
Taking Small Steps towards my Goals			
Having a Pet			
Using Spiritual Practices			
Practicing Creativity			
Spending Time with Friends and/or Family			
Medication and/or Therapy			
Other:			
Other:			

Summary of Recovery

- The experience of a mental health condition may be a part of a person's life, but it does not define the person.

- Recovery is very individualized.

- People use many strategies in their recovery.

- Challenges are a part of recovery.

- Recovery is an ongoing process.

- Recovery is possible for all people.

Things to Know about Vocational Recovery

- Vocational Recovery is a process of finding purpose, meaning, and enjoyment in a job or a career.

- For many, work is an important part of their recovery from the experience and impact of mental health conditions.

- Most people who work believe that work helps them to recover.

- Many people diagnosed with mental health conditions enjoy full and meaningful careers.

Describing Vocational Recovery

Here are some examples of descriptions of what vocational recovery means to others.

"I have a job that I like."

"I work at a job that matches my talents and values, which makes me feel good."

"I don't have to depend on SSI for the rest of my life. I have a little extra money to do fun things that I enjoy."

"I have friends who I like at work."

"I feel much better about myself because I work and get paid to work."

"I am able to support my family financially."

"I feel valued by other people when I have a job and go to work."

Reflective Question

- What does vocational recovery mean to you?

Self-Assessment – Benefits of Work

Work can promote recovery because of the many benefits it provides. The table below list some possible benefits of work.

Benefits of Work Checklist

Directions: Check how important each of the list of potential benefits of work are to you. For 'Other', add any of your own benefits that are not listed.

Benefits of Work	Extremely Important	Important	Not Important
Earning money and benefits			
Doing something I enjoy			
Feeling better about myself			
Meeting new people and making new friends			
Feeling like everyone else in my community			
Learning new skills and ideas			
Being respected by others			
Other:			
Other:			

Reflective Questions

- Which benefit of working is most important to you?

- Which benefit of working is least important to you?

Self-Assessment – Costs of Work

There are potential costs or losses associated with any changes we consider making in our lives. The table below lists some possible costs related to working.

Costs of Work Checklist

Directions: Check how important each of the listed potential costs are to you. For 'Other', add your own costs that are not listed.

Costs of Work	Big Concern	A Concern	No Concern
Loss of benefits			
Increased daily stress			
Less free time			
Less time with friends			
Anxiety about job performance			
Worry about increased symptoms and/or other health issues			
Concerns about getting along with coworkers and/or supervisor			
Concerns about prejudice and discrimination if I tell anyone about my diagnosis			
Conflict with my role and responsibilities in my family			
Other:			
Other:			

Reflective Questions

- Which cost of working concerns you the most?
- Which cost of working concerns you the least?

Self-Assessment – Benefits/Costs of Work

If you have had the opportunity to have worked, what have been the greatest benefits of working to you? If you haven't had the opportunity to work, what do you hope will be the greatest benefits of working for you?

If you have had the opportunity to have worked, what have been the greatest drawbacks of working? If you haven't had the opportunity to have worked, what do you anticipate would be the greatest drawbacks of working?

Given your hopes and worries and considering the benefits and drawbacks, how confident do you feel about succeeding at work right now?

Directions: Place an X on the line that best matches your current feeling of confidence.

1	5	10
No	Some	Strong
Confidence	Confidence	Confidence

List two or three things that you have done that shows you have confidence about succeeding at work.

Describe two or three things that you could do to increase your confidence about succeeding at work.

Looking Back at Work Experiences

You have chosen work as an important goal in your life. From your past experiences, you can figure out what skills and supports you may need to be successful in your future jobs.

Sometimes it is helpful to look back at our past jobs to learn from them. Every job, whether it was a success or not, is filled with things you liked and disliked, and things you did well or things that were difficult for you.

John's Example: Looking Back at Work Experiences

My Work Experience	Things I Liked	Things I Did Not Like
Stock clerk at a Large drug store. I worked 10 hours a week for one month	- Working with other young people - Helping customers - Finding stuff in the store - Handling money	- Cleaning and vacuuming - Dealing with my uptight boss - Working long hours - The lights and music were hard to handle sometimes
	Things I Did Well	**Things I Did that Were Challenging**
	- Talking to nice customers - Helping customers who wanted to find things	- I was a little slow on the cash register - I sometimes would forget where to put things when I stocked the shelves - Long hours were hard. I had trouble if I had to work more than 5 hours at a time - Speaking comfortably in English to customers, as it is my second language

Self-Assessment – Work Experiences

Worksheet: Looking Back at Work Experiences

Directions: In the table below, list and describe the different types of work experiences you have had. Start with a review of your most recent work experience. Use any type of work you have ever done including volunteer, part-time, or full-time. Please start with your most recent work experience and fill in each of the boxes.

My Work Experience #1	Things I Liked	Things I Did Not Like
	Things I Did Well	**Things I Did that Were Challenging**

Worksheet: Looking Back at Work Experiences - Continued

My Work Experience #2	Things I Liked	Things I Do Not Like

	Things I Did Well	Things I Did that Were Challenging

Taking Good Care of Our Health While Working

People recovering their mental health often have physical health challenges to attend to as well. Taking good care of both your mental health and your physical health is important to recovery. People often describe the time, effort, and energy it takes to get and stay well; to attend to health care appointments and to engage in self-management and self-care activities.

Continuing to prioritize staying well and attending to health care needs while working can be challenging. Good mental and physical health forms the foundation for success at work, and intentionally and proactively using self-care and wellness strategies supports you on the job.

People often have strategies that they already do to take care of their mental and physical health that also will support them at work.

From past work experiences and challenges, some people have devised new wellness strategies or goals to help them be more successful and happy at work than they were previously.

Here are some examples of wellness strategies that working people have used to help themselves maintain positive health and work.

- **Participating in Support Groups**
  "I go to AA meetings about four times a week. There I can talk about things that are happening at work. I also have some good friends at the meeting who really seem to care about me."

- **Establishing good Eating Habits**
  "In order to have the energy I needed to get through a day at work, I really had to change the way I ate. Now I eat a good breakfast, and I pack a lunch and snack for work. I have the energy I need to get through the day."

- **Getting regular Exercise**
  "I have found that exercise really makes the difference in the amount of energy I have and how I cope with stress. I now look forward to going for a walk or doing my workout at home after work."

- **Getting adequate Rest**
  "I find I feel better and function better when I get at least eight hours of sleep. I've had to establish a night-time routine that gets me to bed before 11:00, so I can wake up feeling rested. I get out of bed early, even on days that I don't work, so that I can stick to my routine."

- **Taking good care of Health Problems**

   "I've learned to take good care of my diabetes. I worked with a diabetic nurse to help me establish an eating and testing routine that fits with my work schedule. I feel better than I've felt in a long time."

- **Practicing Relaxation Techniques**

   "I listen to my meditation recording every day. I love it! It's so soothing and I can do it lying down. I find that I can calm myself when things get busy at work. It's really made the difference in how I handle stress in my life."

- **Managing my Time**

   "I use the calendar function on my smartphone to help me organize my time. I schedule work, appointments, and fun activities for each week. I've found that I have more time for myself when I organize my schedule."

- **Practicing Self-Care**

   "Working means I have to take more time with my appearance and hygiene, because I am with people much of the time. I've gone to the dentist for the first time in years. It wasn't that bad!"

- **Avoiding Drugs and Alcohol**

   "I've found that it's really hard to enjoy the work day when I've stayed out partying with friends. I mostly stay away from alcohol and drugs now. I find I have a lot more money to spend on other things I want when I stopped partying so much.

- **Connecting with Others**

   "I have to make sure I schedule time with my friends and family each week. If I don't, then I get stressed and lonely, even though I am working. It helps me to talk with at least one person every day."

Self-Assessment – Wellness Strategies

Wellness Strategies Checklist

Directions: Read the strategies listed on the table. Check off the ones that you currently use. Put a check in the column if you would like to use or learn more about the strategy. If you use the strategy, please write a few words that describe what you're doing when you use the strategy. Put a check in the last column if there are some additional strategies that you would like to begin using or to learn more about.

Wellness Strategy	I use this strategy	How I use this strategy	I would like to use or learn about
Participating in support groups			
Establishing good eating habits			
Getting regular exercise			
Getting adequate rest			
Taking good care of health problems			
Practicing relaxation techniques			
Managing my time			
Practicing self-care			
Avoiding drugs and alcohol			
Connecting with others			
Other:			
Other:			
Other:			

Work Needs vs. Work Challenges

In the Self-Assessment – Work Experiences worksheet on pages 23-24, you reviewed your past work experiences. As well as reflecting upon what you liked and what you did well in past jobs, you also considered what you didn't like and what you found challenging to do.

Consider describing work challenges as *work needs.* Doing so can help to identify potential solutions or strategies that might be beneficial in overcoming similar challenges in future jobs. Often within a solution or strategy are skills and supports you might want to put into place. Developing needed skills and supports can contribute to having greater success and happiness at work.

Read how John described his work challenges as work needs, and how he identified some skills and supports goals that would be helpful for him to put into place.

Work Challenges	Work Needs	Skill/Support Goal
I couldn't get out of bed on time to get to work	• Get more sleep	• I will organize what I need to do in the evening so that I can get to bed on time
	• Take medication on time	• I will organize my medications in a pill box • I will set my watch alarm
I had a lot of anxiety at work	• Manage my anxiety at work, especially when listening to my boss's requests and feedback	• I will identify signs of stress • Choose one stress reduction technique to practice • Talk with my work counselor to see what support she can give me while I am at work

Self-Assessment – Work Needs

Work Needs Worksheet

Directions: Review your Work Experiences Worksheet(s). Consider what you need in relation to each of the challenges you experienced in past jobs. Identify what would be helpful to do (skill) or to acquire (support) in order to avoid or minimize future work challenges.

Work Challenges	Work Needs	Skill/Support Goal

Getting and Keeping Work - Tips and Strategies

Research tells us that *Setting Short-term Goals* and *Getting Support* are key to accomplishing the recovery goal of working.

Setting Short-term Goals

Many people, who are effective in getting what they want, write down short-term goals for themselves. A short-term goal is something you can accomplish with some effort in a short amount of time. Short-term goals are written in a clear and concise way.

Tips for Setting Short-Term Goals

- Break down long-term goals into smaller, more manageable steps. This may help you feel less overwhelmed.

- Start with short-term goals that you can achieve with relative ease.

- Focus on one goal at a time.

- Write down clear action steps that will lead you toward your short-term goal.

- Create timelines for yourself. It's good to set a date by which you will start and accomplish each step. You can adjust the date, if once you have begun, it does not seem possible to attain.

- Remain hopeful. Accomplishing your goals may take time, and that's ok.

- Remain persistent. It typically takes most people more than one attempt to achieve a goal.

- Try a variety of strategies until you find something that works for you!

Example: Phil's Experience in Setting Short-term Goals

Phil is participating in a work program that will help him get and keep a job. He would like to find a job as an administrative assistant as he likes working on computers and has office skills. He has reviewed his past work experiences and realizes that he has difficulty managing his anxiety at work. He gets anxious that his work will not be good enough. In the past, this had led to several job losses. He already takes a lot of medication, so he would like to manage his anxiety better at work using stress reduction techniques. His counselor suggested he learn a breathing technique to help lessen his anxiety in the moment.

Short-term Goal #1:

I will manage my anxiety better by using a breathing technique.

Steps toward the Goal:

1. Attend a stress reduction course at the clubhouse.

2. Schedule the stress reduction course into my weekly schedule with help from my work counselor.

3. Attend the course twice a week.

4. Practice the breathing technique with my counselors and at the clubhouse.

Evaluating my Process:

Check in each week with Ruth (VIMR counselor)

Self-Assessment – Setting Short-Term Goals

Directions: Choose a short-term goal that you want to work on to help you achieve your recovery goal of working. Write the small steps you'll take to achieve your short-term goal and how you will evaluate your progress. If you get stuck, you can look at Phil's example on the preceding page.

Short-term Goal #1:

Steps toward the Goal:

1. _____

2. _____

3. _____

4. _____

How I will evaluate my Progress:

Things to Know about Vocational Support

- In addition to developing vocational skills, people who are most effective in achieving their work goals, often use a wide range of vocational supports.

- Supports may be *people, places, things,* or *activities* that improve a person's ability to accomplish his or her work goal.

- People's vocational support needs are unique. Individuals' particular support needs are influenced by their preferences, their experiences, the work role they are fulfilling as well as their work setting.

- Identifying your vocational support needs is in important step in enhancing your success and happiness in choosing, getting, and keeping work. Choose the supports that are best for you.

People Supports

People supports are individuals who help you by doing things for you or with you.

Some examples of support that people can offer are:

- Giving you a ride to work.
- Going to a doctor's appointment with you.
- Checking in with you to see how you are doing.
- Encouraging you to do something you find challenging.

Possible People Supports	
Spouse/partner	Co-workers
Family member	Supervisor
Neighbor	Counselor
Friends	Spiritual advisor
Doctor	Pets
Teachers	Service provider

Reflective Questions

- Who are the people that support you in your life today? Describe the way that each person supports you.

- Are there additional people supports that would be helpful in choosing, getting, and keeping work? What kind of support might they offer you?

Place Supports

Place Supports are physical places that you go to that assist you by providing an environment for you, by helping you accomplish a task more easily, or by just making you feel better.

Some examples of what place supports can do include:

- Provide a space to spend your work day.
- Help you relax before or after your work day.
- Provide a place for you get what you may need for work.

Possible Place Supports	
Clubhouse	Office
Shopping center	Gym
Park	Restaurants
Movie theater	Library
Coffee shop	Copy center

Reflective Questions:

- What are some of the places that support you in your life today? Describe the ways that they support you?

- Are there other places where you would like to go that could support you in choosing, getting, and keeping work? Describe how these places might support you.

Thing Supports

Thing Supports are physical objects that assist you by doing something for you, by helping you accomplish a task more easily, or by just making you feel better.

Some examples of what thing supports can do include:

- Help you organize your work day
- Help you use public transportation
- Help you get to work on time

Possible Thing Supports	
Cell phone	Watch
Bus pass	Computer
Gym membership	Coffee
Work clothes	Desk
Money	Anxiety App for smartphone
Medication	Day planner

Reflective Questions:

- What are some of the things that support you in your life today? Describe the ways that they support you?

- Are there other things that you would like to have that could support you in choosing, getting, and keeping work? Describe how these things might support you.

Activity Supports

Participation in Activity Supports help you to do better and/or feel better in your life.

Some examples of what Activity Supports can do:

- Help you feel more relaxed and less anxious.
- Help you feel more hopeful.
- Help you get to work on time.
- Help you get more organized in your life.

Possible Activity Supports	
Participating in a support group	Joining a lunch group
Exercising	Walking in nature
Attending a class	Practicing yoga
Taking a walk	Meditating
Going out with friends	Making arts and crafts

Reflective Questions

- What are the activities that you currently engage in that support you in your life today? Describe the ways that each of these activities support you.

- Are there additional activities that you could engage in that would be helpful to you in choosing, getting, and keeping work? How might these things support you?

Self-Assessment – Vocational Supports

Vocational Support Worksheet

Directions: List the supports you currently have in the table below. Consider the additional supports that would be helpful to you in choosing, getting, and keeping work. List these supports in the table below.

Supports I Currently Have			
People	Places	Things	Activities

Supports that will help me in Choosing, Getting, and Keeping Work			
People	Places	Things	Activities

Vocational Recovery Summary

- Vocational Recovery is a process of finding purpose, meaning, and enjoyment at work.

- Work is an important recovery goal for many people.

- People experience many benefits from working.

- People also may experience some costs from working.

- It is helpful to review past job challenges and to describe these as needs—skill or support goals that will help you be successful and happy at work.

- It is helpful to identify your personally important wellness strategies you already use to support your success and happiness at work.

- It is helpful to break your vocational goals into small steps.

- It is helpful to identify the people, places, things, and activities that can support you in choosing, getting, and keeping work.

Recovery and Vocational Recovery Summary Worksheet

1. The greatest benefit to me of working is or will be:

2. My biggest worry about work is or will be:

3. The Wellness Strategies I think I need to be successful at work are:

4. The supports I think I need to be successful at work are:

5. The first short-term goal I would like to work on is:

Module 2

Practical Facts about Mental Health Conditions and Work

"And to me....work gives meaning to life."

-Judi Chamberlin Psychiatric Survivor and Activist

Table of Contents

Introduction

Understanding your Mental Health Condition and how it impacts you will assist you in choosing healthy strategies to be successful and happy at work.

The following handouts will help you to learn the practical facts about mental health conditions and will suggest positive strategies to support your recovery. You will explore your own experiences with a psychiatric diagnosis and how it might impact your goal of choosing, getting, and keeping work.

The intention of *Module 2 Practical Facts about Mental Health Conditions and Work is to:*

- Gain more understanding of the relationship of your mental health condition to your work experiences.

- Identify symptoms that might interfere with your success and happiness at work.

- Establish and practice possible coping strategies that will support your goal of working.

Things to Know about Mental Health Conditions

- It is important to know that there are many reasons to be optimistic about your future and choosing, getting and keeping work, in spite of living with a mental health condition.

- There are effective treatment approaches and coping strategies for all mental health conditions.

- People diagnosed with a mental health condition work successfully in all types of jobs and careers. They make important contributions as employees, supervisors, directors, and business owners.

- People experience the symptoms of a mental health condition in different ways, and how you experience and manage your symptoms can have an impact on your success and happiness at work.

- Every day people are proactive in managing their mental health at work by using positive health and coping strategies.

Practical Facts about Schizophrenia

What is schizophrenia?

- Schizophrenia is a mental health condition that affects many people.

- About one person in every 100 people (1%) develops schizophrenia.

- Schizophrenia occurs in every country, culture, racial group, and income level.

- People who develop schizophrenia typically first experience symptoms as teenagers or young adults.

How is schizophrenia diagnosed?

- Schizophrenia is diagnosed based on a clinical interview conducted by a mental health practitioner. During the interview, the practitioner asks questions about symptoms the person has experienced and how they are functioning in different areas of their life, including their work and social life.

- The practitioner also may request a physical exam and other tests in order to rule out other causes of symptoms.

What are the causes of schizophrenia?

- Schizophrenia is nobody's fault. The person experiencing schizophrenia did not cause the mental health condition, nor did their family members or anyone else.

- Scientists believe that schizophrenia is caused by a chemical imbalance in the brain. Chemicals called 'neurotransmitters', which send messages within the brain become out of balance and can cause the brain to send messages containing the wrong information.

- Stress also is believed to play a role in the onset of schizophrenia and can trigger symptoms once a person has developed the mental health condition.

What is the course of schizophrenia?

- Schizophrenia is a mental health condition that often has episodes.

- Symptoms may come and go and change in intensity.

What are the symptoms of schizophrenia?

People with schizophrenia may experience different symptoms. The expression of symptoms of schizophrenia also varies across cultures.

Symptoms of schizophrenia may include:

- Visual, auditory, or olfactory (smell) hallucinations.

- Paranoid delusions or suspicious thoughts.

- Difficulty with concentration and memory.

- Low energy, slowed thoughts, and body movements.

- Difficulty expressing thoughts clearly.

- Lack of enjoyment in usual activities.

At times, the symptoms can interfere with work. A person's ability to perform work tasks, fulfill work responsibilities, and meet work expectations may be affected.

Learning coping strategies and practicing self-care can really help a person to take charge of their mental health and wellness.

Do people recover from schizophrenia?

- Yes! People recover from schizophrenia. People can and do lead fulfilling lives while living with this mental health condition.

- People work in full-time, part-time, and volunteer jobs.

- People live in their own homes and communities and experience good health.

- People fall in love, marry, parent, and enjoy their families.

Reflective Questions

- What do you know about your mental health condition?

- How has living with schizophrenia affected your life?

- How has your family's views of schizophrenia impacted you?

- How have your culture's views of schizophrenia impacted you?

- In what ways has schizophrenia affected your work and/or school experiences?

- What has supported you in coping with your symptoms?

- Who do you know who is living with schizophrenia and is working?

- What would you describe as their strengths?

The Role of Work in Recovery from Schizophrenia

- Research shows that work plays an important role in living with and recovery from schizophrenia.

- Many people with schizophrenia are able to work successfully in full-time or part-time employment, or volunteer work. People with schizophrenia work in all types of jobs.

- At times, symptoms may interfere while a person is at work. Sometimes, their ability to concentrate, plan, organize, remember, and complete their work responsibilities can be affected.

- The more you know about your symptoms and how they influence your ability to be successful and happy at work, the better you can learn to cope with and compensate for them.

Read the following examples of people who have experienced symptoms of schizophrenia at work. Consider whether or not you have experienced similar challenges.

Hallucinations
Hearing, seeing, feeling, or smelling something that is not there.

"*I was working at my computer, and I started hearing mean comments about me coming out of the speakers on my computer. They were telling me I was doing a lousy job and that I should never have been hired. I got so upset and shut off the computer, and lost all the work on the database. This kept happening, but I didn't tell anyone. My boss was frustrated with me as I couldn't do the job well enough, and eventually they let me go.*"

Delusions
Having a belief that is held strongly in spite of contrary evidence.

"*I was really anxious about people liking me at my job, and I didn't know how to get to know them. I would hear my co-workers talking on their breaks, and I started to believe they were talking about me and how they didn't like me. I mean they never invited me out at night or asked me to lunch, I was convinced they hated me even though my vocational counselor told me I needed to reach out to them. I felt more and more isolated with each day, and really lonely. One day, I just quit my job because I didn't want to work at a place where everyone hated me.*"

Thinking Difficulties
Difficulty with thinking clearly and expressing oneself clearly.

"I got this great job at a local animal shelter. I felt great and decided I didn't need to take as much medicine as it was making it hard for me to get up on time for work. So I just stopped and after a week or so, when my supervisor would ask me about a certain animal and how the animal was doing; I couldn't really understand what she was asking me. I was struggling to find the words to tell her what I thought, and it would take a long time for me to respond. She pulled me aside and told me she was worried about me and called my job coach. Together they told me how I was responding, and they encouraged me to make sure I was taking my medicine."

Cognitive Difficulties
Difficulty with paying attention, problem solving, planning ahead, speed of responding, speed of thinking, and memory.

"My boss is very busy and always is asking me to do little tasks for her while I am typing. I have a hard time switching my attention, and then I lose track of what I was doing and forget what she asked me to do. I then have go to her a lot and ask her to repeat it. I think she gets annoyed with me as I am always interrupting her to help me. My IPS coach suggested keeping a notebook next to my computer and writing everything down that she asks me to do. I started doing it this week, and it has really helped!"

Disorganized or Catatonic Behavior
Random behavior or remaining motionless for a period of time.

"At my first job, my supervisor came into my office and closed the door to give me feedback. And it was negative. I felt trapped in there with her with no way to escape. I am a trauma survivor and this really triggered me. I became catatonic for about 20 minutes…I lost that time. It scared my supervisor, and she called 911. I ended up in the emergency room. My doctor called my vocational counselor, and together we talked to my supervisor about some different ways of giving me feedback so I would not be triggered."

Negative symptoms
Lack of energy, motivation, pleasure and emotional expressiveness.

"Since I was diagnosed, I have had a lot of problems with my motivation. When I am feeling unwell, I just don't feel like doing anything, I don't care how I look, I don't care about my work, my friends or my home. I let my IPS counselor know and she helped me design a relapse prevention plan so at the first sign that I am feeling this way, I know to do a self-inventory of my health strategies: am I getting enough sleep, eating well, using my medications the right way? This has helped me gain some control over these symptoms so they don't interfere with my job."

Self-Assessment – Managing Symptoms at Work

Directions: Think about your past work experiences and identify a personal example of a symptom you experienced while working. Describe how this symptom interfered with work. Then describe a strategy you used or tried to use to manage the symptom.

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Hallucinations (Hearing, seeing, feeling, or smelling something that is not there.)			
Delusions (False beliefs that are firmly held in spite of contrary evidence.)			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Thought Difficulties (Problems with thinking and/or expressing myself clearly.)			
Cognitive Difficulties (Problems with concentration, memory, speed of responding, problem solving, and planning.)			
Decline in Social or Work Functioning (Loneliness, poor job performance, difficult relationships at work.)			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Disorganized or Catatonic Behavior (Random or purposeless behavior or remaining motionless at work.)			
Negative symptoms (Lack of energy, motivation, pleasure, and feeling numb at work.)			

Tips and Strategies for Managing Symptoms at Work

You are taking an important step by learning some practical facts about your mental health condition. The more you know about your symptoms, the more empowered you will be in managing them if they occur at work.

Strategies to consider include:

- Use peer support to inspire your efforts to be successful at work. Peer support is incredibly powerful.

- Give yourself a lot of credit for big and small accomplishments, especially when you persevere through hard times.

- Use wellness and health strategies effectively for employment success.

- If you use medication, talk to your doctor about the type and timing of your medications to best support your work.

- See challenges at work as opportunities to learn.

- Learn how to cope with stress at work.

- Build a network of social support inside and outside of work.

- Develop a relapse prevention plan for work.

- Learn how to positively cope with symptoms and cognitive problems at work.

- Work as partners with your mental health providers and support network.

People diagnosed with schizophrenia who have worked successfully:

John Nash
An American mathematician who made discoveries in math that had important applications for the field of economics. He won the Nobel Prize for Economics in 1994. His story, *'A Beautiful Mind'*, was both a book and a movie.

Daniel Fisher
A psychiatrist who is an advocate for recovery. He is the Director of the National Empowerment Center, a consumer advocacy organization as well as continuing to work as a psychiatrist.

Patricia Deegan
A psychologist who was diagnosed with schizophrenia as a teenager. She writes about recovery and has formed a company to promote recovery.

JR
An administrative assistant and assistant peer facilitator in a recovery program. He maintains databases of participants, makes deliveries, and assists in a variety of recovery groups as a peer facilitator.

SB
A peer provider and mentor in a consumer-run program. She connects people to resources in the community. She shares her successes and strategies of her recovery to inspire people who come to the program.

Summary of Work and Schizophrenia

- People diagnosed with schizophrenia can work successfully.

- There are effective wellness and treatment approaches for schizophrenia.

- Work can be an important part of recovery for people diagnosed with schizophrenia.

- Symptoms can interfere with success and happiness at work.

- There are effective health and wellness strategies for schizophrenia.

- Identifying how your symptoms may interfere at work is important in choosing effective coping and support strategies that will help you be successful and happy at work.

Practical Facts about Bipolar Disorder

What is bipolar disorder?

- Bipolar disorder is a mental health condition that affects many people. It is sometimes called 'manic-depression'.

- About 1 person out of 100 (1%) develops bipolar disorder at some time in his or her life.

- Bipolar disorder occurs in every country, culture, racial group, and income level.

How is bipolar disorder diagnosed?

- Bipolar disorder is diagnosed based on a clinical interview conducted by a mental health practitioner. The practitioner asks questions about symptoms the person has experienced and how he or she is functioning in different areas of life, especially work and social life.

- The Practitioner also may request a physical exam and other tests in order to rule out other causes of symptoms.

What are the causes of bipolar disorder?

- Bipolar disorder is nobody's fault. The person did not cause the mental health condition, and neither did their family members or anyone else.

- Scientists believe that bipolar disorder is caused by a chemical imbalance in the brain. Chemicals called 'neurotransmitters', which send messages in the brain, become out of balance and can cause the brain to send messages that contain the wrong information.

- Stress also is believed to play a role in the onset and course of bipolar disorder.

What is the course of bipolar disorder?

- People usually develop bipolar disorder as teenagers or young adults, approximately age 16 to 30 years old. People can also develop the mental health condition in their 40s and 50s.

- Bipolar disorder affects different people in different ways. Some people will experience symptoms only a few times in their lives, while others experience symptoms more frequently.

What are the symptoms of bipolar disorder?

- Bipolar disorder may cause symptoms that can interfere with many aspects of a person's life.

- Bipolar disorder can cause severe mood swings, from the highest of highs (mania) to the lowest of low (depression).

- Extremes of energy, too much or too little, and extremes of sleep from no sleep to sleeping all the time.

- Excessive talking, racing thoughts, supreme confidence, and extreme irritability.

- Poor judgment, trouble concentrating.

- Feelings of worthlessness, hopelessness and helplessness, and extreme feelings of guilt.

- Psychotic experiences.

Do people with bipolar disorder recover?

- Yes! People diagnosed with bipolar disorder can and do lead productive meaningful lives.

- Work plays an important part in recovery from bipolar disorder.

- Many people diagnosed with bipolar disorder are able to work successfully in full-time, part-time or volunteer jobs.

Reflective Questions

- What do you know about your mental health condition?

- How has your life changed from having bipolar disorder?

- How have your family's views of bipolar disorder impacted you?

- How has your culture's views of bipolar disorder impacted you?

- How have your symptoms influenced your work and/or school experiences?

- How have you coped with your symptoms?

- Do you know people who live with bipolar and work? What are their strengths?

The Role of Work in Recovery from Bipolar Disorder

- Research shows that work plays an important role in recovery from bipolar disorder.

- Many people with bipolar disorder work successfully in full-time employment, part-time employment, or volunteer work. People with bipolar disorder work in all types of jobs.

- At times, symptoms may interfere in the workplace. The episodes of bipolar symptoms can be emotionally intense and may affect a person's ability to respond to feedback, develop good relationships at work, and make the right decisions. Sometimes, a person's ability to concentrate, plan, organize, remember, and complete their work responsibilities may be affected.

- The more you know about your symptoms and how they may interfere with your ability to be successful and at work, the better you can learn to cope and compensate for them.

Read the following examples of people who have experienced symptoms of bipolar disorder at work. Consider whether or not you have had similar experiences.

Extreme Mood States
Euphoria or despair.

> *"There have been times when I was so happy, I felt like everyone loved me at work, even worshipped me. And then there have been times when I felt so worthless, so useless, that I was suicidal. There have been times when I was so depressed, I felt like I couldn't breathe. As a result of all this emotional intensity, I have had a hard time making and keeping good friends at work. I now take really good care of my health and that has made all the difference in my relationships at work."*

Extremes of Energy
Too much or too little.

> *"Sometimes I would work 20 hour days until I crashed, and then I couldn't lift my head off the pillow. I would drag myself to work, and then didn't have the energy to do what I needed to do."*

Extreme Irritability

"I thought I had a brilliant plan for our peer education center; and when no one else agreed with me, I snapped and threw the stapler across the room. If I begin to feel that irritable over little things at work, I now know that it is a symptom, and I have to increase my self-care strategies."

Excessive Talking, Racing Thoughts, Supreme Confidence

"I was working at a grocery store and over a couple of weeks, my thoughts were beginning to race 24/7. They were racing through my head, 50 thoughts at once, and I would have to 'grab' a thought. It was really hard, and I was struggling to have a conversation with my boss because I couldn't focus on one piece of the conversation. I lost that job and was hospitalized."

Poor Judgment

"When I have manic episodes, my judgment about the consequences of my actions is usually not very accurate. At times, I have decided to walk across the street in the midst of traffic, instead of waiting for the walk signal. I have spent all the money in my checking account on an outfit that I felt I just had to have."

Feelings of Worthlessness, Hopelessness, and Helplessness

"*Sometimes I get into this place where I feel like such a loser at work and am sure that I just can't do it. I feel totally overwhelmed, horribly guilty that I am taking up a job that I can't do, and I hate myself. I see no possible way I can be successful. I have a tendency to write late-night emails to my bosses telling them this and threatening to quit and not come in the next day. A helpful strategy is when my boss tells me she expects me to come and believes that I can do it. It helps to know that someone thinks I can do it."*

Psychotic Experiences

"*I had lived with bipolar disorder for about three years and was working at my clubhouse in the kitchen. I had stopped taking my lithium because I was doing okay and because I had put on a lot of weight, and I wanted a boyfriend. There are a lot of people from diverse cultures there, and I became convinced that the members who were Russian were actually communist spies. I was absolutely sure they were watching me, following me to and from work, and watching my apartment building. It got so bad that I didn't feel safe leaving my apartment, so I just stopped going to work."*

Self-Assessment – Managing Symptoms at Work

Directions: Think about your past work experiences and identify a personal example of a symptom you experienced. Describe how this symptom interfered with work. Then describe any strategy you used or tried to use to manage this symptom.

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Feeling extremely happy or excited			
Feeling irritable			
Feeling supremely confident			
Sleeping less			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Talking a lot			
Having racing thoughts			
Being easily distracted			
Having poor judgment			
Sad mood			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Eating too much or too little			
Sleeping too much or too little			
Feeling tired or low energy			
Felling helpless, hopeless, or worthless			
Feeling guilty for things that were not my fault			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Suicidal thoughts or actions			
Trouble concentrating or making decisions			
Hearing , seeing, or smelling things that are not actually present			
Confused thinking			

Tips and Strategies for Managing Symptoms at Work

You are taking an important step by learning some practical facts about your mental health condition. The more you know about your symptoms, the more empowered you will be in managing them if they occur at work.

Strategies to consider include:

- Use peer support to inspire your efforts to be successful at work. Peer support is incredibly powerful.

- Give yourself a lot of credit for big and small accomplishments, especially when you persevere through hard times.

- Use wellness and health strategies effectively for employment success.

- If you use medication, talk to your doctor about the type and timing of your medications to best support your work.

- See challenges at work as opportunities to learn.

- Learn how to cope with stress at work.

- Build a network of social support inside and outside of work.

- Develop a relapse prevention plan for work.

- Learn how to positively cope with symptoms and cognitive problems at work.

- Work as partners with your mental health providers and support network.

People who have been diagnosed with bipolar disorder and work:

Kay Redfield Jamison
Is a psychologist, researcher and writer. In 2001, she won a MacArthur Fellowship, sometimes referred to as 'the genius award'.

Patrick Kennedy
Was an 8-term in Congress as the Representative to Rhode Island. He has been open about his own struggles with bipolar disorder and substance use. He is an advocate for the nation's mental health.

AS
Is married, a mother of three children, and works part-time in her church's administrative office.

DF
Is a part-time writing instructor at a local community college and volunteers at a community theater.

Summary - Work and Bipolar Disorder

- People diagnosed with bipolar disorder can and do work successfully.

- There are effective treatment choices for bipolar disorder.

- Work is an important part of recovery for people diagnosed with bipolar disorder.

- Symptoms can interfere with success and happiness at work.

- There are effective health and wellness strategies for bipolar disorder.

- Identifying how your symptoms may interfere at work is important in choosing effective coping and support strategies that will help you be successful and happy at work.

Practical Facts about Depression

What is depression?

- Depression is one of the most common mental health conditions.

- 15-20 people out of 100 people (15-20%) experience depression at some time in their lives.

- Depression occurs in every country, culture, racial group, and income level.

How is depression diagnosed?

- Depression is diagnosed based on a clinical interview conducted by a mental health practitioner. The practitioner asks questions about symptoms the person has experienced and how he or she is functioning in different areas of life, especially work and social life.

- The practitioner also may request a physical exam and other tests in order to rule out other causes of symptoms.

What are the causes of depression?

- Depression is nobody's fault. A person does not cause the mental health condition, and neither did their family members or anyone else.

- Scientists believe that depression is caused by a chemical imbalance in the brain. Chemicals called 'neurotransmitters', which send messages in the brain, become out of balance. This can cause the brain to send messages that contain the wrong information.

- Stress also is believed to play a role in the onset and course of depression.

What is the course of depression?

- People can develop depression at any time in their lives.

- Depression affects different people in different ways. Some people will experience symptoms only a few times in their lives, while others experience symptoms more frequently.

What are the symptoms of depression?

- Depression causes people to have extremely low moods, when they feel very sad or 'blue'.

- Feeling helpless, hopeless, and worthless.

- Feeling guilty about things that are not the person's fault.

- Suicidal thoughts or actions.

- Eating too much or too little.

- Sleeping too much or too little.

- Trouble concentrating and making decisions.

Do people recover from depression?

- Yes! People with depression lead productive and meaningful lives.

- Depression may seriously interfere with work and social lives of some people.

- Work plays an important part in recovery from depression.

- People diagnosed with depression work full-time, part-time, or volunteer.

Reflective Questions

- What do you know about your mental health condition?

- How has your life changed by depression?

- How have your family's views of depression impacted you?

- How has your culture's views of depression impacted you?

- How have your symptoms interfered with your work experiences?

- How have you coped with your symptoms?

- Do you know people who live with depression and work? What are their strengths?

The Role of Work in Recovery from Depression

- Research shows that work plays an important role in recovery from depression.

- Many people with depression are able to work successfully in full-time or part-time employment, or volunteer work. People with depression work in all types of jobs.

- Symptoms may, at times, interfere in the workplace. The episodes of depression symptoms can be emotionally intense and affect your ability to get to work, stay at work and have the stamina to work. Sometimes, your ability to concentrate, plan, organize, remember and complete your work responsibilities can be affected.

- The more you know about your symptoms and how they interfere in your ability to successful and happy at work, the better you can learn to cope and compensate for them.

Read the following examples of people who have experienced symptoms of depression at work. Consider whether or not you have had similar experiences.

Sad Mood

"I couldn't see anything positive in my life, at work. My girlfriend had broken up with me, and I would close the door to my office and cry and cry and cry. I couldn't get anything done."

Eating too little or too much

"*When I am depressed, all I do is eat. I eat too much of too many foods that make me gain weight. Then I feel terrible about myself, my weight, and my clothes don't fit me. I have nothing to wear to work and will call in sick to work because I feel ashamed of my body."*

Sleeping too little or too much

"I had trouble falling asleep at night, and then when I finally would fall asleep at the crack of dawn, I would have to get up to go to work. I felt afraid of going to work without sleeping, so I would call in sick, day after day, until I used up all my sick time. I finally talked to my IPS counselor about it, and she encouraged me to talk to my doctor about my sleep patterns."

Feeling tired and low energy

"I dragged myself to work every day, but I was so exhausted that I could never go out after work with my co-workers. I felt left out and lonely."

Feeling hopeless, helpless and worthless

"My depression really can take away my hope that I can be the person I want to be. I want to work and do well at my job, but the depression sometimes can take over my life, and I cannot believe that things will ever get better. The most important strategy I have when I feel this way is to talk to my friends who also have depression, they really can understand and support me."

Feeling guilty for things that aren't your fault

"People are stressed at work, with the economy and all, and everyone is always bickering. Sales are down, and the future seems uncertain. I feel like it is my fault, I am sure if I were better at my job, this wouldn't be happening to our company."

Suicidal thoughts or actions

"My father died in the middle of the semester. I was devastated and just didn't think I could survive life without him. He always had been the one to help me and stand by me through thick and thin. On top of it, I had to finish teaching my courses, give a final, and grade exams. I couldn't see any way out. I began to think the best option was to take all my pills and just go to sleep forever. Luckily, these thoughts scared me, and I called my therapist."

Trouble concentrating and making decisions

"I am responsible for ordering the supplies for our entire division. It took me three weeks to do the supply order that usually takes me three hours. I couldn't decide if I should order this pen or that pen and this file or that file. Then I spent days checking and rechecking the order, afraid that I had missed something. I got in trouble as the supplies were late coming in, and no one had what they needed."

Self-Assessment – Managing Symptoms at Work

Directions: Think about your past work experiences and identify a personal example of a symptom you experienced. Describe how this symptom interfered with work. Then describe any strategy you used or tried to use to manage this symptom.

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Sad mood			
Eating too much or too little			
Feeling helpless, hopeless, and worthless			
Feeling guilty about things that were not my fault			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Suicidal thoughts or actions			
Trouble concentrating and making decisions			
Feeling tired or no energy			
Sleeping too much or too little			

Tips and Strategies for Managing Symptoms at Work

You are taking an important step by learning some practical facts about your mental health condition. The more you know about your symptoms, the better you learn to manage them if they occur at work.

Strategies to consider:

- Use peer support to inspire your efforts to be successful at work. Peer support is very powerful and helpful.

- Give yourself a lot of credit for big and small accomplishments, especially when you persevere through hard times.

- Use other health strategies effectively for employment success.

- If you choose to use medications, talk to your provider about the timing and type of medications that will support you at work.

- See challenges at work as opportunities to learn.

- Learn how to cope with stress at work.

- Build a network of social support inside and outside of work.

- Develop a relapse prevention plan for work.

- Learn how to positively cope with symptoms at work.

- Work as partners with your mental health providers and support network.

People who have been diagnosed with depression and work:

Roseanne Barr

Is a comedian who has lived with depression while working as a television star.

Gwyneth Paltrow

Is a successful movie actress and mother of two children.

DH

Is the Executive Director of a research consulting group.

LK

Is personal care assistant for adults with development disabilities.

Summary of Work and Depression

- People diagnosed with depression can and do work successfully.

- There are effective treatment choices for depression.

- Work is an important part of recovery for people diagnosed with depression.

- Symptoms can interfere with success and happiness at work.

- There are effective health and wellness strategies for depression.

- Identifying how your symptoms may interfere at work is important in choosing effective coping and support strategies that will help you be successful and happy at work.

Practical Facts about Post-Traumatic Stress Disorder

What is Post-Traumatic Stress Disorder?

- Post-Traumatic Stress Disorder is a type of mental health condition that affects many people.

- About 3-4 people in every 100 people (3.6%) develop Post-Traumatic Stress Disorder

- Post-Traumatic Stress Disorder occurs in every country, culture, racial group, and income level.

How is Post-Traumatic Stress Disorder diagnosed?

- Post-Traumatic Stress Disorder is diagnosed based on a clinical interview conducted by a mental health practitioner. The practitioner asks questions about symptoms the person has experienced and how he or she is functioning in different areas of life, including work and social life.

- The practitioner also may request a physical exam and other tests in order to rule out other causes of symptoms.

What are the causes of Post-Traumatic Stress Disorder?

- Post-Traumatic Stress Disorder is caused by exposure to traumatic event(s) and/or psychological trauma.

- Scientists believe that there are genetic and neurobiological factors that pre-dispose a person to developing Post-Traumatic Stress Disorder.

- Research has shown that early childhood neglect, abuse, and chronic poverty may predispose a person to Post-Traumatic Stress Disorder.

What is the course of Post-Traumatic Stress Disorder?

- Post-Traumatic Stress Disorder (PTSD) is a mental health condition that has many different presentations. Some people experience PTSD symptoms for a few months, while other people experience them for several years.

- Symptoms of PTSD may come and go and change in intensity.

What are the symptoms of Post-Traumatic Stress Disorder?

- Flashbacks or reliving the traumatic event(s) for a few minutes or days at a time.

- Upsetting dreams about the traumatic event(s) and trouble sleeping.

- Trying to avoid talking or thinking about the traumatic event(s).

- Feeling emotionally numb and avoiding activities once enjoyed.

- Difficulty maintaining intimate relationships.

- Trouble concentrating and memory problems.

- Hopelessness about the future.

- Being easily startled or frightened.

- Experiencing physical symptoms or pain.

- Hearing or seeing things that are not there.

- Different people experience different symptoms, and there are different cultural expressions of symptoms.

- Many of these symptoms can interfere with work or a person's ability to meet responsibilities.

Do people recover from Post-Traumatic Stress Disorder?

- Yes! People with Post-Traumatic Stress Disorder lead productive and meaningful lives.

- Post-Traumatic Stress Disorder may seriously interfere with work and social lives of some people.

- Work plays an important part in recovery from Post-Traumatic Stress Disorder.

- People diagnosed with Post-Traumatic Stress Disorder work full-time, part-time, or volunteer.

Reflective Questions

- What do you know about your diagnosis?

- How has your life changed from having Post Traumatic Stress Disorder?

- How have your family's views of PTSD impacted you?

- How have your culture's views of PTSD impacted you?

- How have your symptoms influenced your work experiences?

- How have you coped with your symptoms?

- Do you know people who live with PTSD and work? What are their strengths?

Role of Work in Recovery from Post-Traumatic Stress Disorder

- Research shows that work plays an important role in recovery from Post-Traumatic Stress Disorder.

- Many people with Post-Traumatic Stress Disorder are able to work successfully in full-time employment, part-time employment, or volunteer work. People with Post-Traumatic Stress Disorder work in all types of jobs.

- At times, symptoms may interfere while a person is at work. Sometimes, a person's ability to concentrate, plan, organize, remember, and complete their work responsibilities can be affected.

- The more you know about your symptoms and how they interfere in your ability to be happy and successful at work, the better you can learn to cope and compensate for them.

Read the following examples of people who have experienced symptoms of PTSD at work. Consider whether or not you have had similar experiences.

Flashbacks or reliving the traumatic event(s)

"I would get so upset when the boss asked me to get things out of the stockroom in the back because the room was dark and I was alone. I would start having flashbacks of being abused by my neighbor. I couldn't control it. I simply could not go into the stockroom alone."

Upsetting dreams about the traumatic event(s) and trouble sleeping

"I was having a lot of trouble sleeping, in part, because I was afraid to go to sleep and have dreams that terrified me. I knew I needed a good night sleep if I wanted to feel well for work the next day, but the harder I tried, the harder it was to go to sleep."

Trying to avoid talking or thinking about the traumatic event(s)

"My therapist encouraged me to talk about the rape. She said that the more comfortable I felt with the facts of the story, the less the experience would have on me emotionally. For years, I had avoided anything that would remind me of the attack. I never went out at night, never watched television, and I seldom talked to friends."

Feeling emotionally numb and avoiding activities you once enjoyed

"Everyone told me that I had changed, that I wasn't any fun anymore. Not everyone knew about what had happened to me, but everyone knew that I had changed. I never laughed and never wanted to go out anymore."

Difficulty maintaining intimate relationships

"I have a lot of trust issues. I always think that if someone wants to be my friend, then he probably wants something from me. I'm friendly enough with my co-workers, but I've resisted making any real friends. I do feel lonely a lot of the time, and I wish that I could make a couple of close friends, but something seems to get in my way."

Trouble concentrating and memory problems

"When I am feeling anxious at work, I have a hard time staying on task. I hop out of my chair every few minutes. I forget what I was working on. I feel worried that my boss will notice how unproductive I am some days and will fire me. Of course this thought makes me even more nervous. It feels like a vicious circle."

Hopelessness about the future

"I used to have a lot of plans for the future. I wanted to go to college, get married, and start a family. Now it doesn't seem to matter to me. All I want to do is come home from work and lock myself in my house. I can't imagine that I'll ever feel better. I've lost all my dreams."

Being easily startled or frightened

"I am so embarrassed at work because whenever there is a loud noise, I jump. I am sure that everyone has noticed. I can't help it. If I am focused on my job, and someone opens the door, or the phone rings, or even when someone says, 'hi', I flinch a little. I wish I could calm my nerves more so this didn't happen."

Experiencing physical symptoms or pain

"I missed a lot of work because I wasn't feeling well; I had a lot of pain in my stomach and pelvis. My boss told me that she wouldn't be able to keep me, if I didn't stop taking so many sick days. She encouraged me to see my doctor to get a good check-up. My doctor couldn't find any reason for the pain I was having. Knowing that there were no physical reasons didn't help. I still felt pain most days, and I continued to miss a lot of work."

Hearing or seeing things that are not there

"I thought that my computer screen was vibrating and that it was going to explode. I shouted out for help, but when my boss came, he couldn't see it. I insisted that it was. I thought he was trying to trick me into using a dangerous computer. I left work and went straight home."

Self-Assessment – Managing Symptoms at Work

Directions: Think about your past work experiences and identify a personal example of a symptom you experienced. Describe how this symptom interfered with work. Then describe any strategy you used or tried to use to manage the symptom.

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Flashbacks or reliving the traumatic event(s)			
Upsetting dreams and trouble sleeping			
Avoiding talking or thinking about the event(s)			
Feeling emotionally numb and avoiding activities you used to enjoy			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Difficulty maintaining intimate relationships			
Trouble concentrating and memory problems			
Hopelessness about the future			
Being easily startled or frightened			

Symptom	Personal Examples	How the symptom interfered with my success and happiness at work	Strategies I used, or tried to use, to manage the symptom
Experiencing physical symptoms or pain			
Hearing or seeing things that are not there			

Tips and Strategies for Managing Symptoms at Work

You are taking an important step by learning some practical facts about your mental health condition. The more you know about your symptoms, the better you learn to manage them if they occur at work.

Strategies to consider include:

- Use peer support to inspire your efforts to be successful at work.

- Give yourself a lot of credit for big and small accomplishments, especially when you persevere through hard times.

- Use medication and other health and wellness strategies effectively for employment success.

- If you choose to use medication, talk to your provider about the timing and type of medications that will best support you at work.

- See challenges at work as opportunities to learn.

- Learn how to cope with stress at work.

- Build a network of social support inside and outside of work.

- Develop a relapse prevention plan for work.

- Learn how to positively cope with symptoms and cognitive problems at work.

- Work as partners with your mental health providers and support network.

People diagnosed with Post-Traumatic Stress Disorder who have worked successfully:

Johnny Depp
A famous and popular actor. He struggled for many years, while beginning his career as an actor.

Fiona Apple
An award-winning singer-songwriter. For years she used self-injury to cope with the symptoms of PTSD.

Oprah Winfrey
One of the most famous women in America. She experienced serious neglect and trauma as a child and had used her experiences to help thousands of others recover.

Francis
Is a veteran of the first Gulf War where he experienced severe trauma and a head injury. He works as a computer programmer for Apple.

LL
Is a vice president of a behavioral healthcare organization. She has used her experiences to develop services that are designed to be non-traumatizing for people who experience PTSD.

Summary of Work and Post-Traumatic Stress Disorder

- People diagnosed with Post-Traumatic Stress Disorder can and do work successfully.

- There are effective treatment choices for Post-Traumatic Stress Disorder.

- Work is an important part of recovery for people diagnosed with Post-Traumatic Stress Disorder.

- Symptoms can interfere with success and happiness at work.

- There are effective health and wellness strategies for PTSD.

- Identifying how your symptoms may interfere at work is important in choosing effective coping and support strategies that will help you be successful and happy at work.

Things to Know about Stigma, Prejudice, Discrimination and Work

What are Stigma, Prejudice, and Discrimination?

Prejudice is the word used to describe negative attitudes and opinions towards a group of people, such as people with mental health conditions.

Discrimination refers to the prejudiced acts, including person to person disrespect and policies that work to exclude people from housing, jobs, and the opportunity to be a full member of their communities.

When people with mental health conditions believe the stereotypes and negative opinions, this is called *self-stigma*. Self-stigma often is experienced as a feeling of shame by people who have a mental health condition.

Self-stigma, prejudice, and discrimination all can have a negative impact on your goal of working.

Self-stigma is negative beliefs that people diagnosed with mental health conditions have about themselves. Self-stigma can increase your anxiety, fears, and can be a real obstacle to your success in getting and keeping work.

Prejudice and discrimination that are directed at the person diagnosed with a mental health condition in the workplace also can have a negative and powerful effect on people's success and happiness.

Reflective Question

- Have you ever experienced stigma, self-stigma, prejudice, or discrimination because of your mental health condition?

Tips and Strategies for Addressing Stigma, Prejudice, and Discrimination at Work

- **Educate Yourself**

  You are taking an important step by learning about your mental health condition and symptoms, the possibility of recovery, and how important work is in your recovery. This step will help reduce your own anxieties and fears.

- **Correct Misinformation about Mental Health Condition without Self-Disclosure**

  One strategy you can choose is to correct others when you hear them state an incorrect fact about mental health condition. A co-worker might say, "All people with mental health conditions are dangerous." You might decide to reply, "Actually, I just read an article that stated that the majority of people diagnosed with mental health conditions are not violent, and that the media sensationalizes the rare case." You are correcting misinformation without disclosing your personal experience.

- **Choose the best time to disclose your experiences with symptoms**

  Disclosing or sharing your personal experiences with a mental health condition is a very personal decision. It is important to think about how the other person will react to this information. It is important to weigh the benefits and risks of sharing this information. Will it help you to disclose? Or will it hurt you? As you return to work, these questions become very important, and it can be helpful to talk over your decision with someone you trust.

  Some people only disclose when it is necessary, such as when they decide they will need a reasonable accommodation to be successful. Reasonable accommodations are supports that are designed to help you access work, transportation, and recreation. The law, the *Americans with Disabilities Act*, protects people with disabilities by allowing reasonable accommodations, but disclosure is necessary to obtain a reasonable accommodation.

  Some people decide to fight prejudice and discrimination by disclosing their experiences. People sometimes are willing to speak publically about mental health conditions to advocate and educate others. This is a very personal decision.

Practical Facts about Mental Health Condition and Work
Summary Worksheet

- The most helpful fact I learned about my mental health conditions is:

- The two most successful strategies I use to manage my symptoms at work are:

- The most important thing I want to learn to more effectively manage my wellness at work is:

Module 3

The Stress Vulnerability Model and Vocational Recovery

*"Knowing what triggers my symptoms, has me gain control over them,
and now they interfere less at work."*
– DH

Table of Contents

Introduction

A model is a simplified picture of a complex experience. The Stress-Vulnerability Model takes the complicated experience of mental health conditions and makes it easier to understand why people have symptoms at certain times, but not at others.

The *Module 3: Stress Vulnerability Model and Vocational Recovery* is intended to support you to:

- Learn about the Stress Vulnerability Model.

- Understand the model in relation to experiences of mental health conditions and vocational recovery.

- Consider coping strategies for addressing stress and managing symptoms.

Things to Know About Symptoms

What Causes Symptoms?

No one really understands exactly why some people with mental health conditions experience symptoms and others do not. Even scientists cannot explain why some people have significant symptoms over a long period of their lives, others only for a short duration, and still other people never experience symptoms. One theory that offers a strong explanation is the Stress-Vulnerability Model. According to the model, stress, alcohol, and some drugs combine with a biological vulnerability to produce symptoms. This model also proposes that certain health and wellness strategies may help lessen the experience of symptoms related to mental health conditions.

Reflective Questions

- What makes the symptoms of your mental health condition more severe?

- What makes the symptoms of your mental health condition less severe?

The Stress-Vulnerability Model

Alcohol and Drug use increases biological vulnerability

Coping:

- Meaningful activities
- Healthy lifestyle
- Supportive relationships
- Strategies for coping with symptoms

WORSEN

HELPS

Biological Vulnerability to Symptoms

HELPS

HELPS

Medication can reduce biological vulnerability

WORSENS
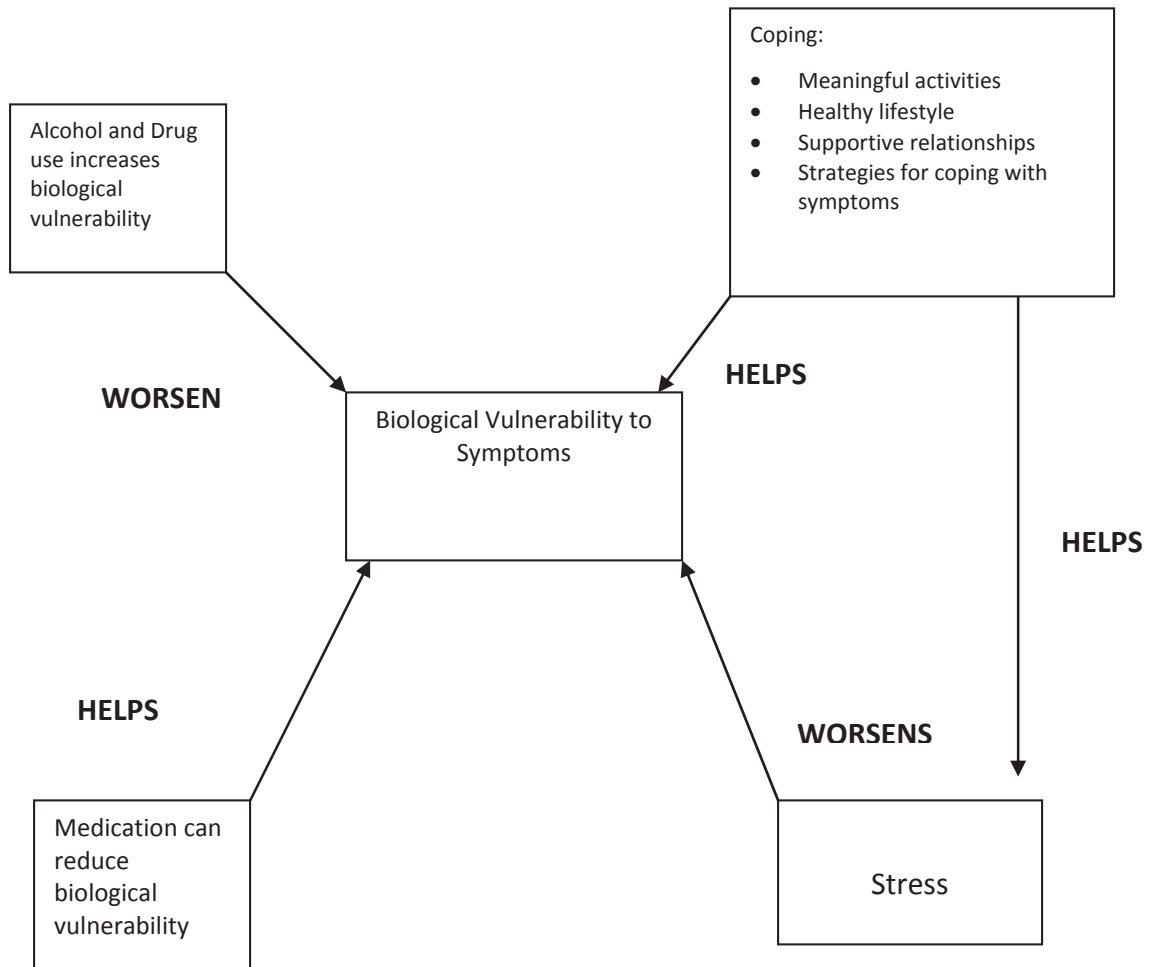
Stress

According to the stress-vulnerability model, symptoms related to mental health conditions often have a biological basis that can be made worse by stress and by using certain substances, like alcohol and drugs. These same symptoms can be improved by work, healthy lifestyles, relaxation, and certain medications.

Parts of the Stress-Vulnerability Model

1. Biological Vulnerability

The term biological vulnerability refers a tendency to develop a problem in a specific medical area. A person could be born with a biological vulnerability or acquire it early in life. For example, heart disease seems to run in families, so we might say a person has a biological vulnerability to develop heart disease. It's not a guarantee that a person will develop heart disease, but it is perhaps more likely than a person who does not have a family history of the disease. Similarly, it is thought that a person with a family history of schizophrenia or bipolar disorder may be more likely to develop the condition because of a biological vulnerability.

Family history or genetic factors do not explain everything about why some people develop symptoms and why others do not. For example, many people who develop mental health conditions have no family history, while others with a strong family history will not ever develop a mental health condition.

Reflective Question

- Are there any members of your family who have (or may have had) a mental health condition?

2. Stress Factors

Most people recognize that stress plays an important role in the occurrence of symptoms related to mental health conditions. Stress can trigger the onset of symptoms or make symptoms worse.

How people experience stress is very individualized. What is stressful to one person may not be stressful to another person. The following list includes examples of situations that people commonly find stressful:

- Having too much to do. For example, being expected to complete a lot of tasks in too little time.

- Having too little to do. For example, having no work tasks and having no structure in the day.

- Having conflict in a relationship. For example, being in relationship with people who are always critical or angry, or having a supervisor or co-workers who are negative and unsupportive.

- Major life changes in life. For example, the death of a loved one, losing a friendship, divorce, moving away from home, starting a new job.

- Having financial problems or legal problems.

- Dealing with a physical illness or always feeling tired.

- Being the victim of a crime.

- Living in poverty or poor conditions.

- Abusing alcohol and drugs

- Daily hassles of life. For example, waiting for the bus, getting to work on time, doing laundry.

Stress is a part of life. Although it isn't possible to avoid all stress, it is helpful to be aware of times when you are experiencing a lot of stress, and to learn and use strategies for coping with stress. Module 6 Coping with Stress at Work will go into more detail about coping with stress.

Reflective Questions

- What situations do you find stressful?

- What situations at work do you find stressful?

3. Alcohol and Drug Use

Alcohol and drug use affect neurotransmitters in the brain that can lead to worse symptoms and relapses. It is believed that alcohol and drug use interferes with the beneficial effects of medication. Excessive alcohol and drug use also can lead to legal, financial, and health problems; resulting in significant stress that can trigger symptoms. Another problem caused by alcohol and drug use is that it can cause problems with relationships with the people you care about, thereby increasing stress and reducing the support others may provide.

Reflective Question

- Have you had an experience with alcohol or drugs that seemed to make the symptoms of your mental health condition worse?

4. Medication

Medications for mental health conditions are designed to reduce biological vulnerability. Medications can help to correct the chemical imbalances that may lead to symptoms. Everyone responds to medications differently. A person's age, gender, race, and ethnicity also can influence how medications work. Not everyone has positive experiences with medications. There are many different medications to treat different types of conditions and symptoms. It is a personal choice whether or not to take medications. Working with a doctor or nurse to make informed decisions about using medications is an important strategy. We will learn more about using medication to reduce symptoms in *Module 5: Using Medications Effectively.*

Reflective Questions

- What role has medication had in helping you to manage or reduce the symptoms of your mental health condition?

- What medications have been helpful?

- What medications have been ineffective?

5. Coping Strategies

Coping strategies are actions that you can take to reduce the harmful effects of stress and gain control over distressing symptoms. Coping strategies are helpful when they become part of your daily life.

Examples of Coping Strategies:

- Talking to a peer about your experiences.

- Using relaxation techniques, such as deep breathing, meditation, picturing a pleasant scene, or progressive muscle relaxation.

- Using positive self-talk by giving yourself positive messages.

- Keeping your sense of humor by trying to see the lighter side of things. Seeking out a funny movie or spending time with someone who is funny.

- Getting active. Moving your body by going for a walk, swimming, lifting weights, or dancing.

- Using the creative arts:
  o Writing your thoughts and feelings in a journal, listening to or playing music, painting.
  o Engaging in a pleasant hobby, such as cooking, knitting, reading, or going to the movies.

- Using a religious or spiritual practice that you find gives you meaning.

- Practicing self-care by getting enough sleep, eating well, and exercising daily.

Reflective Questions

- What coping strategies do you use to reduce the effects of stress in your life?

- What coping strategies have you used to address stress related to working?

- Which coping strategies would you like to develop to support you in managing stress related to working?

Self-Assessment – Coping with Stress

Coping with Stress Checklist

Directions: Read each of the following list of coping strategies. Check whether you currently use the coping strategy, would like to try the strategy or are not interested in using the strategy.

Strategy for Coping with Stress	I Currently Use the Coping Strategy	I Would Like to Try this Coping Strategy or Improve the Way I Use the Strategy	I am not Interested in Using This Strategy at this Time
Talk to someone about my situations and feelings			
Use relaxation techniques			
Use positive self-talk			
Keep a sense of humor			
Get active! Take a walk or exercise			
Write in a journal			
Expressive myself artistically			
Engage in a hobby			
Use religious or spiritual practices			
Practice self-care			
Other:			
Other:			
Other:			

Mental Health Services that Help People Achieve their Vocational Recovery Goals

There are many services and supports that can help you achieve your goals. Your goals are what you want from your life. You can select and participate in services that you believe will be helpful. Things to remember:

- You are the expert about your mental health and what makes you feel better.

- You have right to make informed choices about which services are most helpful to you.

- Effective services are those services that support you and the achievement of your goals.

Depending on your own individual situation and what is available in your community, you can choose among several different mental health services to best meet your needs. You also may determine that you need certain resources to help you reach your recovery goals. Making an informed choice as to possible options, availability and what will be a best match for you is important. Seeking the perspective of Peers - Peer support is a way to find out about the services in your community and peoples experience of the services.

The following is a chart of some common recovery goals with a list of potential mental health service options that may helpful in supporting the achievement of recovery goals. Note: This is only a partial list.

Mental Health Service Options

Recovery Goals	Mental Health Service Options
Gaining the perspective and getting support from other people who have experienced symptoms of a mental health condition.	• Peer support groups • Psychosocial clubhouses • Group therapy • Self-help groups
Finding or maintaining a medication that helps manage symptoms of a mental health condition.	• Peer support groups • Psychiatrist • Medication group • Psychiatric nurse
Getting and keeping a job.	• Peer support groups • Supported employment programs • Vocational rehabilitation • Psychiatric rehabilitation programs • Clubhouse programs
Solving personal problems.	• Peer support groups • Individual therapy • Group therapy • Legal aid
Improving communication skills.	• Peer support groups • Recovery education classes • Group therapy
Improving relationships with family.	• Peer support groups • Family education groups • Family therapy
Having daily structure and activities.	• Peer support groups • Peer run programs • Psychosocial clubhouses • Social clubs

Reflective Questions

• Which mental health service options might support your goal of working?

• Which of these options are you currently using?

• Which of these options would you like to try or learn more about?

Examples: Using mental health services and coping strategies

Even when people have the same mental health condition, they may experience symptoms very differently. For this reason, people may find some mental health services more helpful to them than others. The following examples describe what different people have found helpful in their recoveries. It is important to make your own choice about mental health services and coping strategies to best meet your own needs and goals.

Example 1:

"I work part-time, and I've noticed that I need to take regular breaks or else I start to feel stressed out. I always eat breakfast because if I skip it, I start to feel irritable. Exercise helps me relax, so I try to jog every other day before dinner, just for 15-20 minutes, but it makes me feel good."

Example 2:

"It took me a long time to find a medication that worked well for me, but now I take it regularly. Medication helps me to concentrate better and not feel so down all the time. I belong to a support group, which meets twice a month. It helps me to talk to people who have gone through some of the same things that I have."

Example 3:

"When I first started to have symptoms and was told a diagnosis, I tried to learn everything I could about it. It helped me to make sense of what was happening, and it also made me feel like I wasn't the only one. I went to a recovery group led by someone who also had mental health conditions. This gave me a lot of hope."

Example 4:

"I've gone to several different doctors, and I think that the one I have now is good. She suggested trying one of the newer medications because it had fewer side effects. I'm considering it. But I don't want to change anything too fast as I work full-time, and I want to keep working as I decide which options are best for me."

Example 5:

"I've been seeing a therapist every week to talk about some of the stress that I'm under. He taught me how to do some yoga exercises to relax myself after the kids go to bed. I never thought I was the yoga type, but it does help me feel more relaxed."

Summary - Stress-Vulnerability Model

- Both stress and biology can contribute to the experience of symptoms.

- Biology plays a part in whether someone is vulnerable to developing symptoms.

- Stress can make symptoms worse or may even trigger the onset of symptoms.

- Taking medications is a personal choice that, for some, can help reduce biological vulnerability.

- The use of alcohol and drugs can cause symptoms to get worse.

- Reducing stress can help reduce the occurrence and severity of symptoms.

- Using coping strategies for dealing with stress can help reduce symptoms.

- It is important for you to choose mental health services that work for you as an individual.

The Stress Vulnerability Model - Summary Worksheet

1. My sources of stress are:

2. Coping strategies that I use are:

3. Coping strategies I might like to learn more about or try to support me at work are:

4. Effective mental health services I use are:

5. Mental health services that I might like to try or learn more to support my goal of work:

Module 4

Using Medication Effectively and Avoiding Drugs and Alcohol for Vocational Success

*"I have chosen to use medications as one of the treatments for my mental health conditions.
They help relieve my symptoms so I can do my job well."*
-JB

*"Since I have chosen to be sober,
I no longer relapse and have worked successfully for 10 years."*
- DS

*"I have chosen to use a variety of alternative health strategies including Chinese herbs,
acupuncture and Reiki to support my mental health.
I only use medications as needed for intolerable symptoms.
This plan has worked well, and I am in my 5th year as a transition-age youth coordinator."*
-PD

Table of Contents

Introduction

The intention of *Module 4: Using Medication Effectively and Avoiding Drugs and Alcohol for Vocational Success* is to:

- Learn about the role of medication in managing mental health conditions.

- Learn about the impact of drug and alcohol use on mental health and vocational success.

- Identify strategies for making treatment decisions that best support your mental health and vocational success.

Using medication is a complex and personal choice. It may be influenced by your cultural or family view of your mental health condition and/or healing practices. Information is provided on the different types of medications as well as the effects of medications, including the benefits and drawbacks. This Module also provides education and encouragement around avoiding and/or limiting drugs and alcohol in order to enhance vocational success.

Things to Know about the Role of Medications in Recovery

People with mental health conditions often are prescribed medication. Medications are used to reduce the symptoms related to the mental health condition and to decrease the risk of relapse. Many people who take medications regularly, as part of their overall recovery process, often are less affected by psychiatric symptoms and are less likely to have relapses.

In *Module 3: Stress-Vulnerability Model and Vocational Recovery*, you learned about the stress-vulnerability model and how both biological vulnerability and stress contribute to the occurrence of symptoms of mental health conditions. Medications often are prescribed to reduce the biological vulnerability. Their purpose is to correct the chemical imbalances in the brain that can lead to the experience of symptoms.

In addition to supporting their wellness, for many, taking medication as prescribed can help support their goal of working.

Reflective Questions

- Have you used medications to support your recovery?

- Have they helped or hindered your efforts to work?

The Benefits of Medications for Mental Health Conditions

Medication has been found to be helpful for some people in two important ways:

- Reducing symptoms during and after an acute episode of the mental health condition.
- Reducing the chances of having episodes in the future.

Reducing symptoms during an acute episode

When the occurrence of the symptoms related to a mental health condition are severe, it usually is described as an acute episode or a relapse of the mental health condition. The experience of acute episodes or relapses is very individualized. Some people have only one or a few occurrences, while other people experience them more often.

During and after an acute episode, medications often are introduced to reduce the severity of the symptoms. Sometimes the medications have a fast impact, and people are able to relax, think more clearly, and feel less overwhelmed in a few days. Other times, medications can take a few weeks before they effectively reduce symptoms.

Severe symptoms are very distressing and can make it harder for people to do what they need or want to do in order to work, to go to school, to be in a relationship, or take care of their families.

Reducing the likelihood of relapses

Although medication does not cure mental health conditions, research shows that for many people who take medications as prescribed can prevent relapses of severe and distressing symptoms related to their mental health condition. One person described his medications as "a protective layer between me and my symptoms". Another person said, "Medication is my insurance policy for staying well.". Other people see their medication as protection against the negative consequences of a relapse, such as a losing a job or having to leave school.

Working in partnership with your mental health provider, the person prescribing medication, is important.

You are the expert in your experience of your mental health condition—your symptoms and how they influence your ability to work, to learn, to love, and to parent. You also know how certain medications have impacted you in the past. It is your responsibility to let your provider know about your treatment goals and how the medications make you feel in both positive and/or negative ways.

Your medication prescriber, a doctor or nurse practitioner, has expertise in the different types of medications, and likely will have recommendations as to which ones might be useful in the treatment of your mental health condition. It is your right to receive information about recommended and/or prescribed medication and to make an informed choice about the use of medication to support the management of you mental health condition.

Remember that new medications always are being developed, and you can consult your mental health practitioner about changing, reducing, or eliminating medications.

Reflective Questions

- Have you had an experience where stopping your medications or not using them as prescribed, has made your symptoms worse or has caused you to have a relapse?

- What impact if any did this experience have on your ability to work?

Types of Medications used to Improve Symptoms

There are different types of medications that are intended to help reduce or eliminate types of symptoms related to different mental health conditions.

People often experience a range of symptoms and more than one medication may be prescribed to treat them the variety of symptoms.

There are four major categories of medications that are used to treat the major mental health conditions. Medications have both benefits and side effects; and knowing information about specific medications is important in making decisions about the best treatment approach for your mental health condition.

Medications and Possible Benefits

Medication Categories	Possible Benefits
Anti-Depressants	Can reduce the symptoms of depression, including low mood, poor appetite, sleep problems, low energy and difficulty concentrating. They also can be effective in treating anxiety disorders.
Mood Stabilizers	Can help reduce extremes of moods, including mania and depression.
Anti-Psychotics	Can reduce the symptoms of psychosis, including hallucinations, delusions, disorganized speech, or behavior.
Anti-Anxiety and Sedative	Can reduce anxiety, feeling over-stimulated, and difficulty with sleeping.

Reflective Questions

- Do you take medication(s) for the treatment of your mental health condition?

- What are the type(s) and name(s) of the medication(s) you are taking?

- What impact do the medication(s) have on your experience of the symptoms related to your mental health condition?

- If you took medications when working, how did they influence your work experience?

Self-Assessment - Checklist of Medication Benefits

Directions: List the medication(s) in each category you have taken and any benefits you experienced in relation to taking the medication(s).

Category	Name of Medication	Benefits
Anti-Depressants		
Mood Stabilizers		
Anti-Psychotics		
Anti-Anxiety, Sedatives		
Other		

Side Effects of Medications

Medication affects each person in different ways. Some people have no side effects, some people have very few side effects, some people have many side effects, and some people have serious side effects. It is very important to know the side effects of any medication that you have been prescribed, including medications used to treat mental health conditions.

A person's reaction to a particular medication depends upon many factors including: age, weight, race, ethnicity, sex, metabolic rate, and other health conditions, as well as other medication they may be taking. Sometimes side effects are temporary and diminish over time as the person's body adjusts to the medication. Some side effects are long lasting and even permanent.

Some medications may help reduce symptoms of mental health conditions, but can cause physical health challenges at the same time. For example, increased weight gain may contribute to the onset of diabetes.

It is very important to recognize if you are having side effects to the medication you are taking. Inform your practitioner as soon as possible if you are experiencing side effects. They will help you evaluate and assess how serious the side effects are, and what can be done to address them.

Consider your willingness and ability to tolerate the side effects. Ask yourself how much they are interfering with your ability to function at work, at school, at home, or in your relationships. Share this information with your practitioner.

There are strategies practitioners use to help people manage the side effects of medications. They include:

- Reducing the dosage of medication.
- Changing the medication.
- Adding another medication to reduce the side effects.

In addition, there are healthy lifestyle strategies people can use to cope with the side effects and discomforts of medications.

Reflective Questions

- What side effects have you experienced from medications used to treat your mental health condition?
- How did the side effects influence your functioning at past jobs, schooling as well as in your personal life?
- What did you do to cope with the medication side effects that you experienced?

Self-Assessment - Medication Side Effects Checklist

Directions: In the boxes below, record the medications that you currently use and side effects that you currently experience.

Category of Medication	Type of medication I use	My side effects
Anti-Depressants		
Mood Stabilizers		
Anti-Psychotics		
Anti-Anxiety, Sedatives		
Other		

Shared-Decision Making

People who have mental health conditions have a right to make decisions about the types of medications they will use to support their vocational recovery.

In setting the goal of work as part of the recovery process, it is important that a person assess their medications to determine if the medications are supporting them to function as best as they can in their work role and setting.

Medications can be a valued tool in your recovery if they help you to function successfully at work. However, if the medications you are taking interfere with their ability to get and keep work, then conferring with your practitioner to identify new or different medicines and/or regimens, is critical.

Shared Decision-Making is a process where you work together with your practitioner to find the best treatment option for you. Here in the United States, both you and your practitioner, have equal responsibility for creating a treatment regimen that you believe will support you in being successful at work.

Reflective Questions

- What questions would you like to ask your prescribing practitioner about your medications?

- How comfortable are you in asking the practitioner your questions?

- What will support you in speaking with your practitioner about your medications?

Helpful Questions to Ask your Prescriber about Medications

Asking your prescriber some of the questions on the following list may be helpful.

Benefits
- How can this medication help me?
- How long might it take for the medication to help me?
- How can this medication help me get or keep a job?

Side Effects
- What are the side effects of this medication?
- How long do they last?
- How might the side effects impact my ability to get or keep work?

Coping with Side Effects
- What can be done if I have side effects?
- Can you suggest non-pharmaceutical coping strategies that will help with side effects?
- Will these solutions help me or hinder me with my work?

Managing Medications
- Will I need blood tests to make sure I have the right level of medication in me?
- How frequent is the testing?
- Will the testing frequency interfere with my work schedule?
- Are there other options besides oral medications that have to be taken daily?
- What if the medications interfere with my ability to work?
- What if the medications cause serious health issues, how will we handle this?
- Can you work with me simplify my medications so I get the most benefit from the least amount of medications?

Other Questions You Have:

It can be a challenge to talk to your medication prescriber and ask your questions. Many people get nervous and often forget what they wanted to or needed to ask.

It is difficult to disagree with a health care provider, but disagreement can be done in a way that promotes partnership. Disagreement is used to contrast your perspective with the health care provider's perspective. You can use a statement such as, "I feel (my experience with medications)," while you feel (their experience with medications).

Our family and cultural upbringing can influence how we feel in a health care provider's office. Some cultures see the health care provider as the expert and would never consider asking questions to him or her as it might be seen as a sign of disrespect.

Often appointments with health care providers are short, making it difficult to get all your needs met with all the tasks that need to happen in one visit.

Tips and Strategies for Shared-Decision Making

Here are tips for talking with your health care provider that will support your efforts to share in the decision-making process about your medicines.

- Write down your three questions before your visit.

- Bring a pad of paper and a pen so you can write down what he or she says about your medicines. Ask for information sheets about the medications.

- Hand your questions to your health care provider. Ask for time in the visit to review and discuss these questions.

- Try to summarize what you hear the health care provider say.

- Acknowledge what you agree with.

- Share you experiences with medications and your goal of work.

- If you have a different opinion from your health care provider, acknowledge that you do, and explain why you disagree. The following format may help you state your disagreement: "I feel (my experience with medications), while you feel (prescriber's experience with medications)."

- Ask for medication options that will meet your needs and help you function successfully.

The Pros and Cons of Using Medications to Support Work

Assessing the potential benefits (pros) and disadvantages (cons) about medications is an important task in making an informed decision.

People often feel some conflict about medicine as most medicines help <u>and</u> have side effects. Weighing out your pros and cons can help you make a decision about whether your medicines are supporting you in choosing, getting, and/or keeping work.

Self-Assessment - Pros and Cons of Taking Medications

Directions: List how your medications benefit you (pros) as well as the disadvantages (cons) of your medications.

Medications – Pros	Medications – Cons

Reflective Question

- Do the pros of taking your medications outweigh the cons?
- Or do the cons of taking your medications outweigh the pros?

Using Medications as a Support Tool in your Vocational Recovery

If you have decided to use medications as a support in your recovery, including your vocational recovery, it is helpful to look at how you can get the healthiest results from your medications.

It can be helpful to explore how both the most important benefits to you about medications, as well as how the least tolerable side effects of medication impact, or can potentially impact, you at work. It is useful to identify your top benefits are from the medication as well as what you absolutely unwilling to tolerate as side effects.

For example, you might decide that the most important benefit of your medication is that it stops the voices you hear, and as a result, you are able to concentrate at work. You might decide that the side effect you are least willing to tolerate at work is sleepiness as it prevents you from getting your job done.

Self-Assessment - Medication Priorities

Directions: With respect to your vocational recovery, prioritize the two most important benefits you get from your medications and also the two side effects that you are least willing to tolerate.

Most Important Benefit	Least Tolerable Side Effect
• *Clears head of voices*	• *Sleepiness*

Managing Your Wellness at Work

A common challenge in any medication regimen for any illness is fitting your medication routine into your daily life. One of the cons of taking daily medicine is that you have to remember to take the medicine at the right time and right dose. This can be challenging when you return to work and have to adjust your regimen according to your new daily schedule.

Reflective Questions

- Have you had difficulties taking medications while working in the past?

- If yes, what got in the way and what happened?

Tips and Strategies

Behavioral tailoring is a name used for strategies that are designed to help you fit your medications into your daily life so you achieve the healthiest results. Since everyone is individual and has different needs and routines, it is important to tailor the following strategies so they benefit you.

- **Simplify your medication schedule**

  It is difficult to keep track of medications, especially if you take several different ones at different times. Discuss with your doctor your need to have a simple medication routine that supports you at work. The fewer medications you have to take, the easier it is to keep track. Explore other options with your doctor, such as long-acting injectable medications, if you are interested in not having to take daily pills.

  Example:
  "I used to have a very complicated medication schedule that was a job in itself! Four different pills, some twice a day, some three times a day, some with food and some without food. When I returned to work, I knew the regimen would interfere with my job. I met with my doctor, and we worked together to reduce the number of pills I needed to take. Together, we chose some different medications that actually have helped me more. I hardly ever miss a dose, I am healthy, and doing well at work."

- **Take medications at the same time every day**

  Taking your medications at the same time (or times) every day makes it easier to remember. It also keeps a steady level of medication in your bloodstream, which gives you maximum benefit throughout the day.

  Example:
  "I take my medications every night before I go to bed. This helps me sleep more soundly, which helps me function better at work the next day."

- **Pair your medication regimen with another daily regimen**

  It often is easier to integrate your medication routine into your daily life when you pair it with another task, such as brushing your teeth, showering, eating breakfast, and getting ready for work.

  Example:
  "Before I got into a routine, I often would forget to take my medications. I take my medications at the same time that I brush my teeth in the morning and at night. It is a routine that works for me. I don't have to think about it."

- **Use cues to remember**

  A lot of people develop cues to help them remember to take their medications. Some examples of cues include: using a pill box that is organized into daily doses, using a calendar, using the alarm on their watch and asking a partner or spouse to check in each night.

  Example:
  "I have set my watch alarm for 6:30 a.m. each day. It wakes me for work and also reminds me to take my daily medications and vitamins."

  "My wife says good night each night and says, 'Did you take your medication?" It is a good check step for me and has been really helpful over the years."

- **Remember the benefits may help you be successful at work**

  No one likes to take medications. It can help to remind yourself <u>why</u> you have chosen to take medications. You have chosen to work as part of your overall recovery, and medication is a treatment strategy you have selected to help you work successfully.

  Example:
  "I really don't like taking medications, and I can feel pretty conflicted about it. But then I think about how much I love my job and how important it is to me, to my life, to my recovery."

  "I don't want to be so depressed again, that I lose my job and can't function. I then see my medications as tools to help me achieve what I want out of life."

Reflective Questions

- If you take medications, what helps you to fit your medications into your daily life so you achieve the healthiest results?

- Do you have cues to help you remember to practice good self-care as well as take your medications?

Self-Assessment – Strategies for Using Medication Effectively

Directions: Use the checklist to identify what helpful strategies you have used to support you in using medication effectively and what strategies you would like to use.

Strategy	I have used this strategy	I would like to try this strategy
Simplify my medication schedule.		
Take my medications at the same time each day.		
Pair medication routine with a daily routine.		
Use cues/reminders.		
Remind myself of the benefit of my medication regimen to my vocational goal.		
Other:		
Other:		

Individual Experiences with Medication

Read the following experiences and consider if you have ever gone through a similar situation.

- *"I used to go off and on my medication. I guess I kept thinking that, this time, I wouldn't need it. I didn't want to have a psychiatric illness, and my medication was a daily reminder that I had one. I also hated the side effects. But when I went off my medication, it would wreak havoc in my life. I would lose whatever job I had, whatever girlfriend was in my life, lose my money, and put everything I cared about, at risk. I finally met a doctor who offered to help me find the right medication with least amount of side effects that actually helps me get what I want out of life; a good job, a meaningful relationship and some dignity."*

- *"I have had some bad experiences with medication over the years. I have gained a lot of weight over the years as well, from the drugs, which hasn't helped. My doctor has been great about listening and working with me. If I start to have symptoms, due to stress at work, he will prescribe some short-term medications to get me through the rough times. I also use a lot of health strategies, like diet and exercise with his support."*

- *"I was prescribed a medication that helped with my voices, but really interfered with my intimacy with my wife. So I would go off the medicine. But once I went off the medicine, I would start having problems at work and with my wife. It was a vicious cycle. I finally told my doctor I needed to find a medication that helped me in all my areas of life: work, my marriage, and my symptoms. It has made all the difference."*

Summary - The Role of Medications in Vocational Recovery

- Medications are powerful tools for reducing symptoms and preventing relapses.

- Medications can help you function well at work.

- You have a right to make an informed decision with your practitioner about the role of medications in your recovery. You are an expert in your experience of your illness.

- Regular medication use can reduce the risk of relapses, and medications can dramatically decrease distressing symptoms during an acute episode.

- There are four major categories of medications that help improve the different types of symptoms of mental health conditions.

- Weighing the pros and cons of your medications, and prioritizing the key benefits and least tolerable side effects, can help you make an informed decision in partnership with your health care provider.

- Medications prescribed for mental health conditions can cause side effects that interfere with vocational functioning.

- If you decide to use medications as a recovery tool, it is helpful to take them at the same time each day and develop strategies to fit them into your daily routine.

- Remember that medication is a *strategy* to support you in your vocational recovery. It is not the goal. Combining other wellness habits with medications has proven to be an effective strategy to support people to work and live well with mental health conditions.

Summary Worksheet – Medications and Working

1. What are the pros (advantages) of taking medications when you are working?

2. What are the least tolerable side effects of your medications that could interfere with working successfully?

3. What are the top strategies you use, or would like to use, to help fit your medications into your daily work routine?

Drugs, Alcohol and the Workplace

Introduction

Using alcohol, such as drinking beer, a glass of wine, or a mixed drink, is commonplace in modern western society. Using certain types of street drugs also is common. Using these types of substances is part of social life for many and may make people feel good temporarily. However, use of substances also can present problems for people living with a mental health condition, making it more difficult to manage their condition and potentially interfering with their success at work.

Reflective Question

- How have use of substances affected your life?

Things to Know about Substances

It is helpful to understand what people commonly experience when they use alcohol and drugs. The following table lists both the described positive and negative effects of alcohol and drugs.

Commonly used Substances and their Effects

Substance Type	Examples	Positive Effects	Negative Effects
Alcohol	Beer, wine, gin, vodka, tequila, cough medicine	• Relaxation • Lighter mood	• Slower reaction time, drowsiness • Socially embarrassing behavior
Cannabis	Marijuana, hash, THC	• Relaxation • 'High' feeling	• Slower reaction time and poor coordination • Apathy and fatigue • Paranoia • Anxiety or panic feelings
Stimulants	Cocaine (powder or crack), amphetamines (crystal meth., Dexedrine)	• Alert feeling • Euphoria, good feelings	• Anxiety • Paranoia and psychosis • Sleeplessness
Hallucinogens	LSD, ecstasy, peyote, mescaline	• Heightened sensory awareness • Feeling of well-being	• Bad 'trips' • Psychotic symptoms
Opiates	Heroin, opium, Vicodin, Demerol, Oxycontin	• Feeling of well-being • Relaxation • Reduced pain sensitivity	• Drowsiness • Highly addictive • Risk of overdose
Formaldehyde	Cigarettes dipped in it	• hypotonic	• Throat irritation • Skin irritation
Inhalants	Glue, aerosols, paint	• 'High' feeling	• Severe disorientation • Toxic/brain damage
Caffeine	Coffee, some teas, some sodas	• Alert feeling	• Feeling jittery • Can interfere with sleep
Nicotine	Smoking, chewing tobacco	• Feeling alert • Feels good	• Causes many health problems
Benzodiazepines (anti-anxiety medication)	Valium, Xanax, Klonopin Ativan	• Reduced anxiety • Relaxation	• Rebound anxiety when medication wears off • Loss of inhibition and coordination • Dulled senses

Reasons for Using Alcohol and Drugs

People have used mind-altering substances, such as alcohol, since the beginning of civilization. People use alcohol and drugs for a number of different reasons.

- **To Socialize**
  Sometimes people use substances in social situations, just for fun. Alcohol and other substances sometimes are used to celebrate holidays or a special occasion. Some people drink or use drugs to be accepted by others, to have friends, and avoid loneliness. Some work groups use alcohol to socialize after-hours or to celebrate a recent accomplishment.

- **To improve Mood**
  Some people use alcohol or drugs to feel good, at least temporarily. Some substances make people feel more alert and energetic. Other substances make people feel tranquil and satisfied, or alter one's perceptions of the world around them.

- **To cope with Symptoms**
  People use alcohol and drugs to cope with negative feelings or troubling symptoms. Substances may be used to deal with feelings of depression or anxiety. People may use substances to escape from hearing voices or other hallucinations. For some people, using substances may help them get to sleep when they have trouble sleeping. Other people may use substances because it helps them focus their attention.

- **To distract themselves from Problems**
  People also may use substances as a way of distracting themselves from problem situations or unpleasant parts of their lives. For example, some people use alcohol or drugs to distract themselves when they are having conflict with a co-worker, when they are under high levels of stress, when they are dissatisfied with parts of their lives, or when they are unhappy with themselves. For these individuals, substance use provides a temporary escape from life problems.

- **It becomes part of their Daily Routine**
  People use substances as a part of their daily routine, as it gives them something to look forward to. Everybody needs to have things they care about and look forward to doing; and for some people, this includes using alcohol or drugs. For these individuals, using alcohol or drugs is more than just a habit; it is part of their lifestyle and an important part of how they live each day. Many working people look forward to using alcohol or drugs when the workday ends.

Self-Assessment - Reasons for Using Substances

Directions: People use substances for a number of different reasons. Use the following checklist to list the substances you use and to check off the reasons that you use them.

Reason for Using:	Substance #1	Substance #2	Substance #3
Feeling less depressed			
Feeling 'high'			
Feeling more alert			
Feeling good			
Reducing pain			
Reducing anxiety			
Coping w/hallucinations			
Altering my senses			
Sleeping better			
Distracting myself			
Coping with symptoms			
Feeling sociable			
Something to do w/ friends			
Something to do			
Celebrating			
Avoiding boredom			
Peer pressure			
Other:			

Substance Use and the Stress-Vulnerability Model

Using alcohol and drugs in our society is commonplace. These substances, however, can interfere with a person's ability to manage their mental health condition. The stress-vulnerability model of mental health conditions explains how using substances can make the symptoms of mental health conditions worse.

The symptoms of mental health conditions are caused by biological factors or vulnerabilities. These biological factors can be made worse by:

- Alcohol and drugs
- Stress

These biological factors can be made better by:

- Medications
- Effective coping
- Social support
- Meaningful activities
- Meaningful life roles, such as working

Alcohol and drug use can make symptoms worse and can cause relapses. Using these substances also can interfere with medications, making them less effective at reducing symptoms and preventing relapses. Relapses interfere with work and school success. Because even small amounts of alcohol or drug use can cause problems, people with mental health conditions who use substances may be putting themselves at risk of setting off symptoms.

Problems related to Alcohol and Drug Use

The positive effects of using substances are well known, such as the way they can make people temporarily feel good and provide a temporary escape from unhappiness. However, using substances also can have negative effects and can interfere with having a good quality of life.

Understanding both the positive and negative effects of using substances can help in deciding whether to change the habit. Some of the common problems related to drug and alcohol use are described below.

- **Increased symptoms/relapses**
  Using substances can bring on symptoms, or make symptoms worse. Common symptoms that can be worsened from using substances include depression, anxiety, hallucinations, delusions, and thinking difficulties. Sometimes increases in symptoms can lead to relapses and re-hospitalizations, which then lead to interruptions in work and school.

- **Interference with Work or School**
  Using drugs and alcohol sometimes gets in the way of work or going to school. People may have difficulty focusing at work and doing their job well. Or they may be late or have absences from work due to using substances the night before. Using substances can also make it hard to focus on schoolwork and can contribute to dropping out of school.

- **Social Problems**
  Substance use can cause conflicts with other people. People may have disagreements about someone's use of substances, or be worried that the person uses too much. Substance use also can make people less predictable and harder to get along with, which is a big problem in the workplace. For example, someone may be very irritable because he has a craving to use substances. Or someone may be late coming to work because she was using substances. Using substances can result in other social problems as well.

  Sometimes people are not able to meet others' expectations because they are using substances, such as being a good parent, keeping clean, or keeping a job. Using substances also can cause problems related to hanging out with the wrong types of people. For example, using substances with others may increase the chances of being arrested due to their illegal behavior, being evicted from housing, or being taken advantage of either sexually or financially. People may act like they are your friends, but only because you have something they want, such as your money or the use of your apartment.

- **Daily Living Problems**
  Sometimes when people use substances they have a harder time taking care of themselves. They may not shower, brush their teeth, or keep up their appearance like they ordinarily would. People sometimes do not eat well when they are using substances. Working requires good self-care and a good appearance; and when alcohol or drugs interfere with self-care, people find themselves having problems at work.

- **Legal Problems**
  Using substances can cause legal problems. Driving under the influence of alcohol or drugs is against the law and can result in severe penalties. People also can be arrested for possessing illegal drugs. Drug and alcohol use can cause other legal problems. Sometimes parents with substance use problems have their children taken away from them, or may face restrictions on their ability to see or parent their children. Using disability money, such as SSI or SSDI, on drugs or alcohol can lead to restrictions on access to that money, and the need to have a representative payee (or some other legal representative) manage one's money. Some jobs have zero tolerance for legal problems, and a single arrest can lead to termination from a job.

- **Health Problems**
Using substances can lead to a variety of health problems. Long-term alcohol use can produce many problems, including liver problems, such as cirrhosis. The use of some substances, such as cocaine, heroin, and amphetamines, is linked to infectious diseases, such as hepatitis C and the HIV virus. There are blood-borne diseases that can be spread through the exposure to an infected person's blood, such as by sharing needles (injecting) or straws (snorting) for using these drugs. When people have substance use problems, they often neglect to take care of chronic health conditions, such as diabetes and heart disease. Because of the physical effects of using substances and the neglect of one's health, substance use can shorten one's lifespan.

  Most jobs require some physical stamina and well-being. Using substances can interfere with feeling well. People seldom perform their jobs well when they are coping with the after-effects of alcohol and drugs.

- **Safety Problems**
Sometimes people use substances in situations that are not safe. For example, driving under the influence of alcohol or drugs is very dangerous. Similarly, operating heavy machinery when under the influence of substances is dangerous. People's reaction times are slower when they are under the influence or dealing with the after-effects of alcohol (hangover). Finally, people sometimes put themselves in risky situations in order to obtain substances, such as going to bad neighborhoods and associating with people who may take advantage of them or harm them.

- **Psychological Dependence**
Using alcohol or drugs can play an important part in people's lives. Psychological dependence refers to when someone spends a great deal of time using substances, gives up important activities in order to use, often uses more than intended, or has repeatedly tried to stop unsuccessfully in the past.

- **Physical Dependence**
When people use substances often, they may need to take larger or more frequent amounts to get the same effect, because they develop a *tolerance* to the substance. They also may experience withdrawal symptoms if they don't use the substance, such as feeling shaky or nauseous. These are symptoms of physical dependence.

Self-Assessment - Negative Results from Using Alcohol and Drugs

Directions: Using substances can interfere with having a good quality of life. Use the following checklist to list the substances you commonly use and to check off the negative effects that you have experienced from using these substances.

Negative results from Drug or Alcohol use:	Substance #1	Substance #2	Substance #3
Relapsed.			
Hospitalized.			
My symptoms got worse.			
I had conflicts with others.			
People complained about my use.			
I got more irritated at others.			
People couldn't count on me.			
I lost friends.			
I hung out with a bad crowd.			
People took advantage of me.			
I didn't take good care of myself.			
I spent too much money.			
I had legal problems.			
I had health problems.			
I lost a job.			
I did unsafe things.			
I had problems with my job.			
Alcohol and drugs took over my life.			
My relationships suffered.			
It interfered with my work or school.			
I couldn't concentrate on school or work.			
I lost my housing.			
Other:			

Weighing the Pros and Cons of Using Substances

Deciding to stop using alcohol and drugs can be a difficult decision to make. There are some positive aspects to using substances, such as socializing and feeling good, but there are negative aspects as well. One way to help you make a decision about using alcohol and drugs is to come up with a list of all the 'pros' (advantages) of using substances and all the 'cons' (disadvantages) of using substances.

Self-Assessment - Pros and Cons of Using Substances

Directions: Complete the worksheet, listing what you believe are the 'pros' and 'cons' of using substances.

'PROS' of Using Substances List all the advantages of continuing to use drugs and alcohol. (Consider advantages such as: socializing, feeling good, escaping, coping with symptoms, something to look forward to, habit, and any others that might be important.)	'CONS' of Using Substances List all the disadvantages you can think of for using substances. (Consider disadvantages such as: trouble with work or school, worse symptoms or relapse of mental health conditions, conflict with family or friends, parenting difficulties, problems with health, legal system, housing, or money.)

Considering all the pros and cons of using substances, would you like to cut down/stop?

_____ NO   I do not want to cut down or stop.

_____ MAYBE   I think I might want to cut down or stop but I'm not sure.

_____ YES   I would like to cut down or stop.

Self-Assessment - Pros and Cons of Sobriety

Directions: Complete the worksheet to consider the pros and cons of becoming sober.

'PROS' of becoming sober List all the advantages to developing a sober lifestyle. (Consider how sobriety may help you achieve personal recovery goals, such as your ability to work and go to school, better control of your mental health condition, better relationships, more independence, better health, better parenting, fewer legal, housing, money, or health problems.)	'CONS' of becoming sober List what you think you might have to give up if you stop using substances. (Consider the 'costs' of sobriety, such as having to say 'no' to friends, nothing fun to do, troubling symptoms, no escape, and feeling bad.)

Considering all the pros and cons of sobriety you listed above and the pros and cons of using substances, would you like to cut down/stop?

_____ NO   I do not want to cut down or stop.

_____ MAYBE   I think I might want to cut down or stop, but I'm not sure.

_____ YES   I would like to cut down or stop.

Reflective Questions

- What are the advantages of developing a sober lifestyle?

- Is developing a sober lifestyle important to your goal of working or returning to school?

- What would you have to give up in order to develop a sober lifestyle?

Developing a Sober Lifestyle

When people decide to develop a sober lifestyle, it takes planning and practice. Sometimes there can be setbacks along the way, such as urges to use substances or relapses in substance use. Developing your own personal plan for a sober lifestyle is an important part of managing your mental health conditions and achieving your personal recovery goal of working. There are three important steps to achieving sobriety:

1. Remember your reasons for not using substances.

2. Develop a plan to prevent going back to using substances in 'high risk' situations.

3. Identify new ways of getting your needs met.

Tips & Strategies – Developing a Sober Life Style

- **Identifying Personal Reasons for Not Using Substances**
  Whenever someone decides to cut down or stop using substances, it is important for them to identify their personal reasons for wanting a sober lifestyle, and to regularly remind themselves of these reasons. In what ways could sobriety help you achieve your personal recovery goals? Consider possible reasons such as:

  o   Improved ability to work or go to school
  o   Better ability to manage mental health conditions (fewer relapses)
  o   Improved social relationships
  o   Having your own apartment
  o   Being a better parent
  o   Fewer legal problems
  o   More money to spend on other things
  o   Other_____
  o   Other_____
  o   Other_____

- **Dealing with 'High Risk' Situations**
  In order to be successful in stopping substance use, it is helpful to make plans about how to deal with situations in which you have used substances in the past. These situations, sometimes called 'high risk' situations, often involve other people, but not always.
  o   Being offered to use substances by co-workers or friends
  o   Being pressured to use substances by friends or acquaintances
  o   Running into a former drug connection

o   Holidays
o   Going to a party
o   Having money in your pocket from your paycheck
o   Feeling bad (such as feeling depressed, anxious or frustrated).
o   Having nothing to do
o   Spending too much time alone
o   Remembering good times related to substance use

Avoiding these situations can reduce the risk of relapse. However, complete avoidance is not always possible. Effective strategies for dealing with 'high risk' situations are critical to developing a successful sobriety plan. Specific high-risk situations are described below, along with some possible strategies to manage those situations.

1. **Social situations involving offers or pressure to use substances:**
    - Avoid situations where alcohol and drugs may be present.
    - Schedule sober activities.
    - Decline in a firm voice tone, "No, I have to get going now."
    - Don't make excuses for 'no'.
    - Repeat the refusal, if needed.
    - Offer an alternative activity, if it is a friend.
    - Level with friends/relatives about the importance of your sobriety and ask them to respect it.
    - Leave the situation.

2. **Having cravings to use substances:**
    - Distract yourself by doing something that focuses your attention elsewhere.
    - Cheerlead with self-talk, "I can cope." etc.
    - Use relaxation techniques until cravings pass.
    - Use prayer.
    - Contact a friend or other support person.
    - Find a support person at work or school. There is a good chance that in the workplace is another person who also has a commitment to sobriety.
    - Attend a self-help group such as AA, NA, Dual Recovery Anonymous that meets close to work or school.

3. **Having money in your pocket, such as from your paycheck:**
    - Consider having your paycheck deposited directly in your checking/savings account.
    - Avoid carrying an ATM card. Better yet, give your ATM card to someone you trust to hold for you.
    - Plan ways to keep most of your money in a safe place at a distance from you.
    - Problem-solve ways to avoid direct access to money.
    - Create a detailed budget and stick to it.

4. When things aren't going well, such as experiencing depression, anxiety, hallucinations or sleep problems
(*Also See Module 5: Coping with Symptoms and Problems*):

Depression
- Schedule pleasant activities.
- Challenge negative thinking.
- Exercise.
- Use positive self-statements.
- Practice self-care.

Anxiety
- Use relaxation techniques.
- Challenge thoughts that cause you to worry.
- Gradually expose yourself to feared but safe situations.

Hallucinations
- Distract yourself with other activities.
- Accept the voices or other hallucinations, without giving them undue attention or control over your life.
- Use relaxation to tolerate distress.

Sleep problems
- Avoid caffeine use in the afternoon and evening.
- Avoid naps.
- Go to bed at the same time each night.
- Develop a pleasant nighttime routine (e.g., reading, watching TV)
- Avoid stimulating activities (some TV programs, computer games, etc.) in the evening.

Finding New Ways of Getting Your Needs Met

In order to develop a sober lifestyle, it is important to develop new ways of getting your needs met that do not involve using substances. Common reasons for using substances include:

- Socializing with others
- Feeling accepted by other people
- Feeling good
- Escaping boredom
- Dealing with bad feelings
- Help with sleeping
- Having something to do and look forward to

Developing new ways of getting your needs met is hard work. The Vocational Illness Management and Recovery program is aimed at helping you develop new strategies for meeting your needs, including social needs, and coping with symptoms so you can work successfully. Developing new ways of getting your needs met can take time and effort. However, the rewards of a sober lifestyle and the ability to achieve personal recovery goals make the effort worthwhile.

Choosing or Creating a 'Sober' Workplace

When people decide to develop a sober lifestyle, they usually realize that some environments 'trigger' the desire to use alcohol or drugs. Some work environments are more triggering than others, either because the environment has alcohol and drugs in it, or because the people there use alcohol and drugs during or after work.

Consider the following when choosing a 'sober' workplace:

- Know your triggers. Learn all you can about which people, environments, and situations are likely to create cravings.

- Avoid work environments that serve alcohol. Restaurants, bars, and clubs are difficult places to work for people who are trying to abstain from alcohol. Building trades and hospitals are also work environments where there are high rates of substance abuse. Many food service jobs have liberal attitudes about alcohol and drug use.

- Learn about the 'culture' of the workplace when you get a job by listening to how co-workers talk about their social lives. Is there talk of going out of after work to have drinks? Are people talking at the workplace about their drinking or drugging?

- Avoid working in neighborhoods where you bought or used alcohol or drugs in the past.

- Consider disclosing your commitment to sobriety to your supervisor or a workmate to get support for your commitment.

- Other

Examples of people who are coping with substance use problems while pursuing their goal of working:

When people begin to adopt a sober lifestyle it can be encouraging to hear about others who have made this decision, and are now working successfully. Reading the following examples may be helpful.

- *"I found it almost impossible to stop drinking when I worked as a dishwasher at a restaurant. There was alcohol everywhere, and everyone would drink after work. I really wanted to stop drinking. It was causing me all kinds of problems. My vocational counselor helped me find another job in the dish room at the university, where alcohol is not served and people don't hang out after work. It was a lot easier to stay away from alcohol after I changed jobs."*
  Jason, 23 years old, bipolar disorder and alcoholism, 2 years sober

- *"When I was partying a lot, it seemed to me that everyone I worked with went out for drinks after work. I got in a lot of trouble when I drank, usually I would end up smoking crack, which caused me all kinds of problems with home and work. I went to a program to get sober. When I returned to work, I talked to my boss about how much I wanted to stay sober. Since then, I've met a lot of people at work who don't go out drinking. I've even met a guy who is trying to stay sober like I am. My boss is very encouraging. He likes me and wants me to succeed. I've even bought a mountain bike with all the money I've saved.*
  Sylvia, 30 years old, depression, PTSD, 9 months sober

- *"I used to think alcohol was my best friend, but now I know better. It was always there when I needed it, and I organized my life around drinking, either alone or with other people. But drinking cost me a lot – it made my symptoms worse and caused hospitalizations. I couldn't hold down a job. Now that I'm actively working to stay sober, I'm back in control of my life. I've stayed out of the hospital, and I am able to work successfully.*
  Glorissa, 38 years old with bipolar disorder, sober for 8 years

- *"I thought that drinking a few beers and smoking a joint once in a while after work was causing no harm. I am surprised by how much better I feel and much better my work*

performance is now that I am not drinking or getting high. I have more energy and I am able to focus much better at work.
Stephen, 29 years old with schizo-affective disorder, sober 6 months

Reflective Question

- Whom do you know who has returned to work or school, received a promotion at work or completed a training program by developing a sober lifestyle?

Abstinence or Cutting Down

Deciding to take control over one's life by addressing problems related to drug or alcohol use is an important decision that involves changing one's lifestyle. This decision involves deciding whether to stop using substances altogether (abstinence) or to cut down, but not stop using entirely.

People with substance use problems often find it difficult to cut down on using substances, because using even a small amount makes them want to have more. In addition, because of the biological nature of psychiatric disorders, people with a mental health conditions can be very sensitive to the effects of even small amounts of alcohol and drugs. This means that those small amounts of substances can have drastic effects. For this reason, many people with drug and alcohol problems are more successful developing an abstinent lifestyle rather than cutting down how much they use. Some people want to work on their substance use problems, but are not ready to stop using completely. For these people, reducing the amount of alcohol or drugs that they use can be a good first step towards sobriety.

"I used to drink every day and occasionally smoke crack with my friends. Now that I am working, I can't be hanging out drinking every day. I still drink a few times a week, but I don't smoke crack anymore. Now that I am not hanging out with the same guys, I seldom even think about smoking crack."
Peter, 45 years old, diagnosed with bipolar disorder

Reflective Question

- Have you or someone you know tried to cut down or stop using substances in the past? What happened?

Making a Personal Sobriety Plan

In order to achieve your sobriety goals, it is helpful to develop a specific plan. This plan should include the three steps described below:

1. Identifying your reasons for wanting to stop using substances,
2. Choosing strategies for dealing with situations in which you have previously used substances, and
3. Developing other ways of getting your needs met that do not involve using substances.

The following worksheet can be used to help you develop your personal sobriety plan.

Personal Sobriety Plan

CONGRATULATIONS! You have chosen to abstain from alcohol and drugs as one of your recovery strategies. This will support your goal of working.

Directions: Complete this plan by following the steps outlined below. You can change or modify your plan based on how well it is working for you. Share your plan with people who are close to you so they can support you in achieving your vocational goals by abstaining from substances.

Step 1. List one to three reasons how your life will be better by stopping using substances. Consider how sobriety may help you achieve your personal recovery goals.

_____

_____

Step 2. Identify one to three 'high risk' situations that can lead to unwanted use of alcohol or drugs. Consider situations in which you have used substances in the past, such as people offering you substances, being pressured to use, feeling bad, having nothing to do, and cravings. Write these on the next page.

Step 3. Make a plan for how to deal with those 'high risk' substance use situations. For each 'high risk' situation, identify one or two ways of dealing with it. Write these on the next page.

Situation 1:

_____

_____

_____

Plan for dealing with it:

_____

_____

_____

Situation 2:

_____

_____

_____

Plan for dealing with it:

_____

_____

_____

Situation 3:

_____

_____

_____

Plan for dealing with it:

_____

_____

_____

Step 4. Find new ways of getting your needs met. Consider the ways substances have met your needs in the past, such as hanging out with friends, feeling relaxed or 'high', dealing with symptoms, or having something to do. What needs did they meet? For each need you identify, think of at least one new strategy for getting that need met.

Need 1:

_____

_____

Strategy for meeting this need:

_____

_____

Need 2:

_____

_____

Strategy for meeting this need:

_____

_____

Need 3:

_____

_____

Strategy for meeting this need:

_____

_____

Summary – Substance Use, Abstinence, and Vocational Recovery

- Taking control over your life and tackling your substance use problems can be hard work, and there may be setbacks along the way.

- Sobriety will positively impact your goal of working.

- You have every right to be hopeful that recovery is possible, and that you can work successfully.

- People with mental health conditions and substance use challenges successfully work in all levels of work through living a sober lifestyle.

Module 5

Coping with Challenges and Symptoms at Work

"I was really struggling to remember any series of tasks that I was assigned at work. My co-worker suggested I keep a small notebook so I could write down all the tasks I am asked to do. It has been a huge help to me at work."

- CA

Table of Contents

Introduction

Work sometimes can shine a light on certain challenges that may not pose difficulties when you are not employed. For example, a person who has difficulty falling asleep at night may not care so much if he doesn't have to get out of bed in the morning to go to work. Learning about a variety of coping strategies for challenges can be helpful in supporting your success at work.

Module 5 – Coping with Challenges and Symptoms at Work is intended to help you to:

- Identify potential challenges at work that may interfere with your ability to be successful and happy.

- Identify strategies for coping with symptoms so you can work successfully.

- Develop a plan to help you successfully use coping strategies.

Things to Know about Coping with Challenges

Challenges are a natural part of life. Everyone encounters difficulties along the way, no matter how well we are doing. Some challenges are overcome easily and create little stress. Other challenges are more problematic and can result in significant stress. When stress builds up, it can cause symptoms to worsen. The table below shows some of the benefits of coping with challenges and the consequences of not coping with challenges.

Benefits of Coping with Challenges	Costs of Avoiding Challenges
• Coping with challenges makes life experiences more manageable. • Coping with challenges helps us to feel more in control. • We feel more confident when we use strategies to cope with our challenges. • Coping strategies work best when they are practiced often.	• Challenges can get bigger if they are not dealt with. • Challenges can increase stress, which can lead to a worsening of symptoms. • Challenges at work can lead to problems if not dealt with.

Examining Past Challenges at Work

It sometimes is useful to look back at the difficulties we have had at work in the past. Sometimes, we are able to identify themes in our problems and these themes might suggest some steps we can take. Here are some examples of challenges people dealt with at work.

> *"I had a hard time knowing what my boss wanted me to do. Every day he came to me and told me what he needed from me, but I had a hard time remembering. It wasn't a problem with my memory, but with my listening. I would get so anxious when he came into the room that my brain would race, and I really didn't hear what he was saying. He was annoyed with me and, of course, that made me more anxious. I finally told him, and he was very understanding. He began to write a list of tasks he needed me to do, and now I don't feel anxious when he tells me what he needs me to do."*

> *"I really had to get a handle on my sleep problems when my hours at work changed. I used to come in at noon, which worked for me because I am not a morning person. I love the job, so I agreed to start at 9:00 am. I was late a couple of times. It took me weeks to establish a bedtime routine that helped me get to sleep early enough. I also learned that I can't drink coffee after noon."*

Reflective Question

- What challenges or difficulties have you had in past work experiences?

Causes of Challenges at Work

Many different things can challenge you at work. Sometimes challenges are caused by an internal reason, something to do with ourselves. Other times our challenges are caused by an external reason, something outside of us. Often a combination of things contributes to our challenges. It can be helpful to understand the underlying causes of our difficulties because it can help us understand what we can do to cope with them. Below is a table listing some causes of common difficulties people may experience at work.

Internal	Description	External	Description
Lack of Knowledge	Lack of important information leads to difficulty.	People	Another person creates difficulty for us through their attitudes, behaviors, or actions.
Lack of Skill	Inability to do something causes difficulty.	Place	The physical work environment creates difficulty.
Emotional Barriers	Experiencing strong feelings creates difficulty.	Things	Lack of an item at work causes difficulty.
Physical Barriers	Lacking the physical strength or stamina to do something causes difficulty.	Activity	A work task causes difficulty.

Dealing with Challenges at Work - Problem-Solving Strategies

There are three types of strategies (Cohen, M., Nemec, P., Farkas, M., & Forbess, R., 1998, 2010) that can help address work challenges:

1. **Eliminate the Problem**
   This strategy results in the challenges being gone. For example, if you do not know how to do something and then you learn how to do it, your difficulty is eliminated.

2. **Lessen the Problem**
   This strategy results in the challenge continuing to exist, but you experience less distress related to the challenge. For example, if you use relaxation techniques to manage situations that make you anxious, the challenging situation is lessened.

3. **Accept the Problem**
   This strategy results in the challenge continuing to exist, but you decide to accept it. For example, you may feel angry because you did not get an expected raise, but after talking with family and friends, you accept not receiving the desired increase in pay at this time.

Tips and Strategies for Addressing Work Challenges

Step-by-Step Problem Solving Process
When facing a challenge or striving to achieve a goal, it is important to take an active, solution-focused approach. The following step-by-step problem solving process can be used for addressing challenges at work.

1. Describe the challenge as clearly as possible.

2. List the underlying reason for challenge.

3. Circle the preferred strategy to use.
   a. Eliminate the Problem
   b. Lessen the Problem
   c. Accept the Problem

4. List some possible ways of meeting the challenge.

5. Choose the best way to address the challenge.

6. Plan the steps for carrying out the solution.
   a. Who will be involved?
   b. What will each person do?
   c. What is the timeframe?

Self-Assessment - Problem Solving at Work

Directions: Apply the six problem-solving steps to a past work challenge that you experienced.

1. Describe the challenge.

2. List the underlying reason for challenge.

3. Choose the preferred strategy (eliminate, lessen, accept).

4. List some possible ways of addressing the challenge.

5. Choose the best way to address the challenge.

6. Plan some steps to carry out the solution.

    a. Who could have been involved?
    b. What could have each person done?
    c. What could have been the timeframe?

Challenges Related to Symptoms

It can be challenging to experience symptoms that are frequent and occur every day. Many people have symptoms that they live with every day. Common symptoms include anxiety, depression, and having suspicious thoughts about others. These symptoms can be distressing and, at times, get in the way of success at work and enjoyment of life.

Although these types of symptoms do not usually mean there is an approaching crisis, occasionally a persistent symptom can increase and may be an early warning sign of relapse. Warning signs are symptoms that tend to come before a relapse, such as disturbed sleep or a significant worsening of usual symptoms.

It is not always easy to tell the difference between symptoms you have every day and an early warning sign of relapse. Learning to recognize the difference between your daily symptoms and early warning signs can be very helpful in your overall health and wellness recovery.

Self-Assessment - Checklist of Common Symptoms

Directions: Identify common symptoms you have experienced at work. You can use the following checklist to help in the process.

Category of Symptoms	Specific Problem	I Experience this Problem
Thinking	Paying attention	
	Concentrating	
	Memory	
Mood	Anxiety	
	Depression	
	Anger	
Negative Symptoms	Lack of interest	
	Lack of pleasure	
	Lack of expressiveness	
	Social withdrawal	
Psychosis	Hallucinations	
	Delusions	
Interpersonal	Too forceful	
	Too reserved	
Self-Care	Sleep problems	
	Nutritional problems	
	Hygiene/grooming problems	
Drug and Alcohol Use	Alcohol	
	Drugs	
	Other substances	
Other:		

Reflective Questions

- Which of the common symptoms do you experience or have you experienced at work?

- Which symptoms cause you the most distress?

Strategies for Coping with Specific Common Symptoms at Work

Thinking

- **Concentration/Attention**

  Sometimes people have problems concentrating on conversations or activities. Problems with concentration can cause difficulties in the work place when they interfere with listening to others or completing tasks. These strategies may be helpful:

  o Minimize distractions, so that there is only one thing to concentrate on. For example, when trying to concentrate on a conversation make sure the radio is off and other people are not talking nearby.

  o Ask the person with whom you are speaking to slow down or repeat things that you're unsure of.

  o Check to make sure you understand by summarizing what you heard. For example, you can say something like, "Let me see if I understand your main point; you are saying_____?"

  o Break down large tasks into smaller parts, and do the task one piece at a time.

  o Practice to strengthen your concentration and attention outside of work, by using game apps on your smart phone, reading, or puzzles.

- **Memory**

  o Use a small notebook or the notes section on your smartphone so that you can write down details about tasks or procedures important to your job.

  o Make a list of the tasks that you need to accomplish during each shift. Put the list in a place where you will see it.

  o Review your work to make certain that you have remembered all the pieces of the task.

- **Taking Charge of Our Thinking at Work**

During times of stress, people often think negative thoughts, which makes the experience even more difficult. These patterns of thinking sometimes are called cognitive distortions or some people say 'stinkin thinkin'. Though these thoughts seem and feel very real at the time, they do not reflect the facts of the situation. These thoughts can be very powerful.

Read the following story:

"I was running a little late yesterday morning and feeling worried that I was going to miss the 8:10 bus that gets me to work on time. It was bad enough to have to rush, but the situation was made worse because my mind kept thinking things like: 'I'm such a loser. I can't do anything right. I can't believe I overslept again. I'll never be able to hold a job. My boss is going to be so angry and disappointed with me. He'll regret he ever hired me.'."

I just wanted to crawl back into bed and give up on this job. Instead, I took several deep long breaths, and I focused on the tasks that I needed to go do to get out the door. I decided to pay no attention to my negative thoughts and focus instead on my new affirmation, 'I am confident and capable.'."

Reflective Questions

- What do you know about cognitive distortions or negative thinking?

- What do you do when you're thinking gets negative or distorted?

Things to Know About Common Cognitive Distortions

- **All or Nothing Thinking**
  All or Nothing Thinking is also known as 'black-and-white thinking'. There are no 'grays' or no middle ground with this type of thinking. Everything is either all good or all bad. This kind of thinking impacts how a person judge themselves and others.

  Examples
  o *"I ate potato chips at lunch, so I failed at my diet."*
  o *"My job is the worst job on the planet!"*

- **Should Statements**
  These types of people hold high expectations for themselves and/or others. The person disapproves of themselves or others with 'shoulds', 'musts', or 'should nots', 'must nots'. They have a list of ironclad rules about how they or other people should act. This leads to harshness and judgement of others.

  Examples
  o *"I should know how to act in a job interview."*
  o *"I shouldn't feel nervous in social situations."*
  o *"John should exercise. He shouldn't be so lazy."*

- **Jumping to Conclusions**
  The person assumes the worst based on little or no information.

  Examples
  o *"They stopped talking when I came into the room. They must have been talking about me."*
  o *"Sara did not speak to me this morning. She must be mad at me."*

- **Thinking the Worst**
  The person blows things out of proportion. This sometimes is called catastrophizing. They think the absolute worst thing possible will happen or is happening. They hear about a problem and use 'what if questions'.

  Examples
  o *"I've had a headache all day. What if I have a brain tumor?"*
  o *"My boss is going to fire me if I am late for work today."*

- **Labeling**
  The person views a single negative event as a lifelong pattern they often label themselves with mean and negative names. This is extreme generalizing.

Examples
- o *"I said the wrong thing at the meeting. I am so stupid."*
- o *"I'm such a loser. I overslept again!"*
- o *"The guy cut me off, he's a real jerk!"*

- **Mind Reading**
  The person believes they know what people are thinking or feeling and know why they act the way that they do. Often they assume what is going on in people's minds is about how they feel about them.

  Examples
  - o *"He thinks I'm stupid. That's why he talks so slowly to me."*
  - o *"I know they don't like me."*

- **Over Generalization**
  The person makes general conclusions based on a single event. If something bad happens only once, they expect to happen over and over again.

  Examples
  - o *"My old boss yelled at me for being late. I know the new boss will too."*
  - o *"I missed the bus today. Now I know it will happen again tomorrow."*

- **Personalization**
  The person believes that everything others do or say is some kind of direct, personal reaction to them. They compare themselves to others, trying to determine who is smarter or better looking, etc.

  Examples
  - o *"I was late to the dinner party and caused the hostess to overcook the meal."*
  - o *"My boss was very quiet today, I think she's still mad at me from our misunderstanding last week."*

- **Blaming**
  The person holds other people responsible for their pain, or they blame themselves for every problem they experience.

  Examples
  - o *"Stop making me feel guilty about ignoring you!"*
  - o *The customer was making me nervous at the register, no wonder I gave him the wrong change."*

Self-Assessment – Cognitive Distortions

Directions: Review the list of common distortion. For each distortion, consider if it is not a problem for you, sometimes a problem for you, often a problem for you.

Common Cognitive Distortions	This is not a problem for me	This is sometimes a problem for me	This is often a problem for me
All-or-nothing thinking			
Should statements			
Jumping to conclusions			
Thinking the worst			
Labeling			
Mind Reading			
Over Generalization			
Personalization			
Blaming			

Tips and Strategies - Challenging Cognitive Distortions

Everyone has negative thoughts at times, especially when experiencing stress. These negative thoughts cause us to feel anxious or angry. Staying stuck in negative thinking can lead to bad moods, losing motivation, and get in the way of your work goals or tasks. That's why it's helpful to have strategies to move you towards a more balanced way of thinking at work.

Here are some possible steps that you can take to address cognitive distortions:

1. **Recognize negative or distorted thinking**
   Negative thinking can be a habit. Sometimes we are so used to the negative 'noise' in our heads that we don't even realize that the thoughts we're thinking are causing us harm.

   What are the negative thoughts that you're going to be on the lookout for?

2. **STOP**
   Once you recognize that your thoughts are distorted or negative, stop focusing on the thought. Think about something positive about yourself or the world. Focus on the task you're doing. Do anything other than focusing on the distorted thought.

   What are some things you can do, or you can think, to take the focus off the distorted or negative thoughts?

Sometimes these first two steps are all you'll need to challenge cognitive distortions. Sometimes you may have to work harder to challenge the negative thought.

3. **Think of evidence that either supports or challenges your thought**
   Try to think of just the facts. Don't jump to conclusions. Ask yourself, do the facts support your thoughts?

4. **Think in shades of gray**
   Things are seldom perfect or horrible. Most of life is somewhere in between. "I may not be the most popular person here at work, but I have made friends and eat lunch with them every day." Find the middle ground.

5. **Ask someone you trust if your thoughts are realistic**
   Everyone has distorted thinking at some time in life, especially when under stress. Ask someone at work what they think.

Self-Assessment – Challenging Cognitive Distortions

Directions: Consider the following strategies for addressing cognitive distortions. Which strategies do you do well? Which strategies would you like to do?

Strategy	I do this well	I would like to do this
1. Recognize negative or distorted thinking.		
2. Stop the thoughts.		
3. Think of evidence that either supports or challenges the thought.		
4. Think of shades of gray and find the middle ground.		
5. Ask someone at work for their perspective.		

Reflective Questions

- Which of the strategies would you like to try?

- How could you put one or more of the strategies into practice?

Moods at Work

Sometimes the experience of intense emotions can affect our experiences or interfere with our performance at work.

Anxiety

When people are anxious, they usually feel worried, nervous, or afraid. There often are physical signs of anxiety, such as muscle tension, rapid heartbeat, or headaches. Anxiety can interfere with learning and our ability to communicate, so it is important that we have strategies to manage anxiety at work.

Some strategies for coping with anxiety are listed below:

Self-Assessment – Managing Anxiety at Work

Directions: Check off any strategies you would like to try.

_____   Talk with your supervisor or coworker to let him or her know how you are feeling.

_____   Use relaxation techniques, such as deep breathing or progressive muscle relaxation, to stay calm.

_____   Identify work situations that tend to make you anxious and make a plan to do something about them. For example, if you feel anxious about an upcoming performance review at work, ask your boss to see a blank review form so that you know what you are being evaluated on.

_____   Work with your provider, peer support counselor, or job coach on a plan for gradually exposing yourself to situations that make you feel anxious. For example, if you are anxious about using the bus, you might begin by sitting at the bus stop and watching people get on and off the bus. Once you are is comfortable doing that, the next step might be to board the bus and ride it for one stop.

Depression

When people are feeling depressed, they may experience one or more of the following: feeling bad about themselves, not finding anything to be fun anymore, sleeping too much or too little, having low energy, poor appetite, having trouble concentrating or making decisions. Depression can make it difficult to get to work and to get work tasks done well and on time.

The following coping strategies may be helpful in improving your mood at work.

Self-Assessment – Managing Depression at Work

Directions: Please check off any strategies you would like to try.

_____ Set goals for daily activities at work, starting with one or two activities and gradually building up into a full schedule.

_____ Identify things that you enjoy and build those around your work schedule.

_____ Schedule something pleasant to do each day, even if it's a small thing. This will give you something to look forward to during the work day.

_____ Talk to a peer, friend, co-worker, or counselor to let them know how you're feeling. It can feel so helpful to have others listen.

_____ Ask people to do something with you. It is easier to get through the day if you can take a coffee or lunch break with someone.

_____ Put inspirational quotes on your desk or screen saver, such as 'recovery works!' Remind yourself of the small steps you have accomplished or 'one moment at a time'. These can be very helpful in building your ability to persist at work.

Anger

Some people find that they feel angry or irritable much of the time or get outraged by situations that seem relatively minor to others. All workers need to manage their anger in the workplace, but for people who experience intense anger or irritability, this can be a challenge.

Self-Assessment – Managing Anger at Work

Directions: Please check off any strategies you would like to try.

_____ Recognize the early signs that you are starting to feel anger so that you can keep things from getting out of control, for example, jaw clenching, heart pounding, perspiring.

_____ Identify who or what commonly makes you feel angry and consider different responses you can make so that you handle these situations and people more effectively.

_____ Use a calming mantra (a phrase that you repeat over and over in your head) to use when you begin to feel anger.

_____ Develop several strategies for staying calm when you are angry, such as counting to ten before responding, distracting yourself, temporarily leaving the situation, or politely changing the subject.

_____ Try to express angry feelings briefly and constructively. The following steps are helpful:
- Use 'I' statements, saying "I feel _____ because _____."
- Tell the person what he or she did to upset you.
- Suggest how the situation could be avoided in the future.

_____ Talk to someone who is supportive of you about your feelings. This sometimes can reduce the intensity of how you are feeling.

Plan for Coping with Mood Challenges at Work

Directions: Fill out the chart to proactively plan for a potential mood challenge at work.

Strategy I would like to try	When I would like to try it	Steps I will try

Negative Symptoms at Work

Negative symptoms are thoughts, feelings, or behaviors normally present that are absent or diminished in a person with a mental health condition. Sometimes the experience of negative symptoms can cause difficulties at work.

Lack of Interest and Pleasure

It is very difficult to work when your tasks don't seem interesting to you or when you don't enjoy doing things you used to enjoy at work. These feelings can impact your happiness and your success at work. The following are strategies you can try, to gradually increase your interest and enjoyment of your work responsibilities.

Self-Assessment – Addressing Lack of Interest and Pleasure at Work

Directions: Please check off any strategies you would like to try to ease your experience of lack of interest and pleasure.

_____ Be patient with yourself. Tell yourself change takes time.

_____ Start each day with a work task that you used to enjoy the most. Break the tasks into small work activities.

_____ As you gain more confidence in accomplishing small work activities, gradually try tackling larger or more complex tasks.

_____ Ask people at work to go to lunch or take a break with you. It can be more enjoyable to have someone with whom to talk and chat about work.

_____ Try to schedule enjoyable activities during the work day. For example, you could set up a schedule of walking every evening after work or walking on your lunch hour.

_____ Investigate and try new interests during your free time. Examples include:

▪ Smartphones, Computers (games, email, Facebook) ▪ Doing artwork or crafts (beading, sketching, knit) ▪ Games ▪ Cooking ▪ Exercising	▪ Gardening ▪ Reading ▪ Walking ▪ Listening to music ▪ Playing an instrument ▪ Writing	▪ Playing sports ▪ Watching sports ▪ Yoga ▪ Singing ▪ Owning and caring for a pet ▪ Other

Lack of Expressiveness

If your co-workers or supervisor tell you that they cannot read your facial expressions, or that it is hard to tell what you are thinking or feeling by your expression or tone of voice, it may indicate that you are not demonstrating your emotions. This can create misunderstandings at work. For example, when you are at a meeting, other people may think that you are bored or not paying attention. There are strategies that may help you address a lack of expressiveness at work.

Self-Assessment – Addressing a Lack of Expressiveness at Work

Directions: Please check off any strategies you would like to try to address your lack of expressiveness at work.

_____ Verbally express what you are feeling or thinking at meetings and with co-workers and supervisors.

_____ Contribute frequent comments about your reactions to conversations or work tasks so people know you are engaged at work.

_____ Make 'I' statements that clearly express your point of view or your feelings such as:

- *"I'm enjoying working with you."*
- *"I was a little nervous about meeting with you today because I did not know what to expect. I appreciate your feedback on my job performance."*
- *"I liked your presentation because I learned a lot."*
- *"I am feeling a little discouraged today because I made some mistakes that have slowed me down a bit."*

Social Withdrawal

Everyone needs time alone, even at work. But if you find that you are withdrawing from people and avoiding contact with others, it may create problems at your work. Most jobs require at least a little social contact with others. There are strategies that may be helpful in coping with social withdrawal or your urge to withdraw socially.

Self-Assessment – Addressing Social Withdrawal at Work

Directions: Please check off any strategies you would like to try to address your social withdrawal at work.

_____ Join a peer support group (a face-to-face group or an online group).

_____ Explore opportunities at work that require you to spend more time with people.
For example, eat your lunch in the break room instead of your cubby.

_____ Schedule contact with someone at work every day, even if it's for a short period of time.

_____ Practice relaxation techniques before and after your contact with co-workers.

_____ Call co-workers on the phone or e-mail them daily.

Plan – Coping with Negative Symptoms

Directions: Review the various strategies for addressing negative symptoms. Use the following chart to complete a plan for coping with your negative symptoms.

Strategy I would like to try	When I would like to try it	Steps I will try

Psychosis

Psychosis is a mental health condition in which thoughts and emotions are so impaired that contact is lost with external reality.

- **Delusions**
  Sometimes people develop beliefs that they hold on to firmly in spite of contradictory evidence that those beliefs are true. For example, they might start believing that the FBI is monitoring their work, even though there is no evidence of the FBI monitoring their work. Or they might start to believe that workers are talking about them or staring at them. For some people, having this kind of belief, which is called a 'delusion', is an early sign that they are starting to experience a relapse of their mental health condition.

  For some people, however, these kinds of beliefs do not entirely go away. If this is your situation, such beliefs can be distressing or distracting at work, which can make it difficult for you to be happy and successful on the job. There are coping strategies that can help.

- **Paranoia**
  Sometimes people worry what other people are thinking about them and doing to them. Paranoia can cause a lot of distress. Good self-care practices, like adequate sleep, good nutrition, and activity can help you feel more resilient when paranoia is activated. Talking to someone you trust about your worries can help you feel more supported even if the other person does not see reasons for your paranoia. Therapy, a specific type, called cognitive-behavioral therapy, has been proven to be helpful.

  Delusions and paranoia can be very challenging at work, but supportive co-workers and supervisors can be very helpful in assisting you to check out your thoughts and feelings. Sometimes paranoia and delusions can be so distressing, that people begin to change how they behave at work. A key strategy is letting a supervisor, peer supporter, or a job coach know you are under distress and need time off.

- **Hallucinations**
  Sometimes people hear voices or see things that are not there in the work environment. They may even feel, taste, or smell something that is not there. These experiences are called 'false perceptions' or 'hallucinations'.

  For some people, these hallucinations or false perceptions are part of their daily life. If this is your situation, you may find it distressing or distracting to feeling happy and achieving success at work. There are coping strategies that can help.

Self-Assessment – Strategies for Addressing Psychotic Symptoms at Work

Directions: Review the following list of strategies. Check off any strategies you would like to try.

_____ Distract yourself from a disturbing belief by doing something that takes your attention, such as focusing on one of your work tasks or talking with a co-worker.

_____ Check out your beliefs by talking to someone you trust (co-worker, peer supporter, friend, job counselor, or practitioner).

_____ Engage in positive self-talk by telling yourself that it is unlikely that there are forces working against you or your workplace.

_____ Distract yourself with a physical activity, like going for a walk on your lunch hour or break.

_____ Use positive self-talk. Helpful statement include: "I am not going to listen to these voices.", or "I'm not going to let these voices get to me.", or "I'm in charge of these voices, and I am not going to pay attention to them.".

_____ Put the hallucinations 'in the background'. Some people acknowledge what they are hearing (or seeing or smelling), but don't pay any further attention to it. For example, they might tell themselves, "There's that critical voice again. I'm just going to let it happen and ignore it. I'm not going to let it bother me or affect me at work.".

_____ Use relaxation techniques. Some people find that the hallucinations get worse when they are under stress at work. Using deep breathing or a muscle relaxation technique at work can reduce the stress and reduce the intensity of the hallucination.

Plan – Coping with Psychotic Symptoms at Work

Directions: Review the varying strategies for addressing psychotic symptoms at work. Use the following chart to record your answers.

Strategy I would like to try	When I would like to try it	Steps I will try

Interpersonal Difficulties

Every job requires workers to get along with one another in such a way that the work gets done on time and done well. Interpersonal challenges are very common in the workplace. Many people have to work with people they may not like.

Some people are challenged in relationships because it is hard for them to listen to others without interrupting and giving advice. Sometimes people insist that their opinion is the right opinion, which can cause their co-workers to be upset and feel uncomfortable. Sometimes people ask questions that are too personal, making co-workers feel uncomfortable or even angry. Sometimes people discuss topics at work that can be emotional, such as politics, sexuality, and religion. It is important to remember that people at work are diverse, have diverse opinions and lifestyles that likely will be different than our opinions and lifestyles.

Work requires that we interact in a polite and respectful manner with co-workers. There are strategies for improving interpersonal relationships at work.

Self-Assessment – Interpersonal Strategies at Work

Directions: Review the following strategies. Check off any strategies you would like to try.

_____ Listen to what a co-worker is saying without judging or commenting. Listening is the most important interpersonal skill. Other people appreciate being listened to.

_____ Turn your face and body to the person who is speaking. Focus on the words that the person is saying. This will improve your ability to listen without distractions.

_____ Allow your co-worker to finish what he or she is saying before you share your opinion.

_____ Paraphrase what the other person has stated to demonstrate that you understand what he or she has said. For example, you might say, "Sounds like you're saying _____."

_____ Practice listening without speaking. It is ok to be silent while another person speaks.

_____ Practice a relaxation technique before and during conversations with a co-worker. This can help you listen well, and respond without giving advice or criticizing.

_____ Set small goals for conversations. For example, a person might set a goal: "Today at my lunch break, I will ask one question to one co-worker to get the conversation going."

_____ Use positive self-talk. Give yourself the message, "I have something to offer to others."

Plan – Coping with Interpersonal Problems at Work

Directions: Review the list of strategies for coping with interpersonal problems at work. Use the following chart to record your answers.

Strategy I would like to try	When I would like to try it	Steps I will try

Self-Care for Work

Self-care practices are what we do to take care of ourselves. These are daily tasks or activities that help us look and feel well. Work requires that we take care of ourselves so that we have enough emotional and physical stamina to do our jobs well. Many people neglect their self-care when their lives become busy. If a person neglects their self-care, he or she may not feel well enough to go to work or may get negative feedback about his or her appearance, relationships, or job performance. This can lead to job loss. There are strategies for practicing healthy self-care for work.

Sleep for Work

Sleeping too much or too little can be very disruptive. It's hard to function well at work when we don't get enough sleep. Sleeping too much can prevent us from getting to work on time and feeling too groggy to do our jobs well.

Self-Assessment – Self-Care Strategies - Sleep for Work

Directions: Review the following list of self-care strategies for Sleep for Work. Please check off any strategies you would like to try.

____   Go to sleep and get up at the same time every day.

____   Know your sensitivity to caffeine in coffee, tea, and soda. Some people are very sensitive to caffeine, and it can keep people awake at night.

____   Exercise or participate in moderate physical activity for a 1/2 hour each day. Research shows that moderate exercise helps people sleep restfully.

____   Participate in a nightly relaxation ritual before bed (reading, taking a warm shower, drinking herbal tea, or listening to music).

____   Sleep in a darkened room.

____   Avoid screen time (phone, TV, computer) right before going to bed.

____   Use power naps of 20-30 minutes to fight sleepiness and recharge your energy and boost your memory and attention.

Nutrition for Work

Healthy nutrition is an important lifestyle that supports people's ability to function well at work. There are foods that help you perform well and have enough energy and resist infections and viruses. Eat breakfast each day as it improves your memory and attention. Try to eat a lean protein (egg, fish chicken, meats, and tofu) grains, and lots of colorful foods (spinach, kale, tomatoes, vegetables, and fruits). Snack on nuts. Eating too much or too little can interfere with your focus, so try to eat a well-balanced diet with a wide variety of foods. There are strategies for healthy eating that can support your goal of working successfully.

Self-Assessment – Self-Care Strategies - Nutrition for Work

Directions: Review the following list of self-care strategies for Nutrition for Work. Please check off any strategies you would like to try.

_____ Eat your colors. Aim to eat five different colors of fruits and vegetables a day (red, green, yellow, orange, purple).

_____ Bring a meal and snacks to work. Choose high protein, low-fat options, such as turkey, low-fat plain or nonfat yogurt, grilled chicken/fish, low-fat cheese, nuts, and a fruit or vegetable. Choose whole grain bread or pasta. Design a plate that is half fruit and vegetables, ¼ protein, and ¼ grains/pasta.

_____ Limit your sugar. Choose water or sugar-free beverages at work. Use the vending machines at work only as an occasional treat.

_____ Eat breakfast every day. Research has linked a healthy breakfast to improved work performance. It will help you with energy and help with clear thinking.

_____ Limit eating out at fast-food restaurants on lunch breaks to an occasional treat. This will not only help you eat well, but will help you save money.

_____ Plan healthy snacks at staff meetings. Encourage co-workers to enjoy healthy snacks and meals together at work.

_____ Learn more about your individual nutritional needs and wellness to support your health as a resource for successful job performance. Ask your healthcare provider for a referral to a nutritionist.

_____ Get support. Let your co-workers know that you are trying to eat better so that you will feel your best and work your best.

Hygiene and Grooming for Work

Different people have different standards of hygiene and grooming, but there are some commonly agreed upon standards for most workplaces. It differs from workplace to workplace. Hygiene and grooming standards for an automobile garage will be different from the hygiene and grooming standards for an office environment.

If people neglect their hygiene and grooming when working, it can result in negative feedback from co-workers and supervisors. It can be uncomfortable for co-workers and supervisors to give this feedback, so it's helpful to remember that work environments expect good hygiene at the very least.

Practicing healthy hygiene and grooming according to the standards of the work environment is an essential requirement for most jobs. There are strategies for healthy hygiene and grooming.

Self-Assessment - Hygiene and Grooming for Work

Directions: Review the following list of strategies for Hygiene and Grooming at Work. Please check off any strategies you would like to try.

_____ Schedule time each day to organize your work clothes for the next day. Choose clean and pressed clothes. Choose a different outfit each day if possible.

_____ Schedule time to wash your work clothes each week.

_____ Practice daily grooming tasks: Schedule enough time before work to prepare.
- Shower
- Shave (if needed)
- Comb
- Brush your teeth at least twice daily
- Floss teeth
- Use mouthwash to keep breath fresh
- Use deodorant or antiperspirant to manage body odor
- Wash and clip fingernails

_____ Look at how your co-workers and supervisors dress and appear at work. Model your choices to be similar to people in your work environment.

Plan – Strategies for Hygiene and Grooming at Work

Directions: Review the list of strategies for addressing Hygiene and Grooming at Work. Use the following chart to record your answers.

Strategy I would like to try	When I would like to try it	Steps I will try

Examples of People Using Coping Strategies at Work

Read the following examples of how people have used a variety of coping strategies for symptoms of their mental health condition and challenges in the workplace to support their job success.

Example 1

"When I feel depressed, I tend to dwell on all my failures. It helps me to call my sister, who always reminds me of what I've accomplished. Talking to her makes me feel better, and I am able to get up and go to work."

Example 2

"I never paid much attention to how I looked. I didn't care if my clothes were clean or if they matched. Now with a job, I have to dress neatly and be clean. It helped to use a checklist to go through all the steps I needed to do to get myself ready for work."

Example 3

"Even though I take medications, I sometimes hear voices. Sometimes the voices are loud and say disturbing things. This is tough if I am at work, so I have a couple of strategies I use for this. I can listen to music on my I-Pod and that helps to drown out the voices. I also walk around the building for a few minutes. These seem to help a lot."

Example 4

"People who worked with me didn't seem to like me very much. I talked to my supervisor. She told me that maybe people are reacting to the way I interact with them. I know that I talk too much, and sometimes I interrupt others when they're speaking. I made it my goal to become a better a listener. I worked with my job coach to practice. I think it's helping. I have made a couple of friendships at work."

Plan for Coping with Challenges and Symptoms at Work

The Module 5 Coping with Challenges and Symptoms at Work includes several checklists and planning sheets to help you identify coping strategies for specific symptoms and challenges to maximize your ability to work well.

Directions: Use your preceding worksheets, consolidate and complete the chart.

Challenges or Symptoms	Strategy I Plan to Use/Try

Summary of Coping with Challenges and Symptoms at Work

- Developing strategies for coping with challenges and symptoms can help increase your success and happiness at work.

- Using a step-by-step method for solving problems can help you take an active role in meeting your challenges.

- People often experience challenges at work in the following categories:
  - Thinking
  - Mood
  - Negative Symptoms
  - Psychotic Symptoms
  - Interpersonal Relationships
  - Self-Care

- It is important to learn ways of coping with symptoms as a strategy for being successful at work.

- There are a variety of strategies for coping with challenges and symptoms. It is important to choose the ones that you think will help you the most and develop a plan for putting coping strategies into action.

Coping with Prejudice, Discrimination, and Internalized Stigma at Work

People with mental health conditions may have to deal with prejudice and discrimination. Prejudice and discrimination are negative attitudes, behaviors, and actions directed at people with mental health conditions. Prejudice and discrimination can create difficulties when people are returning to work and at work.

There are laws to protect people with mental health conditions from prejudice and discrimination in the workplace. The government recognizes that the practice of acting on negative beliefs about mental health conditions is illegal. Even with laws to project them, people with mental health conditions may experience subtle forms of discrimination. Here are some examples of people's experiences with discrimination in the workplace:

"One of my co-workers used to talk behind my back. She often made jokes about mental health conditions, even when I was present. (I chose to be open about my condition.) She obviously knew very little about mental health conditions, in general, or about me. I chose to talk to her about it. I was tired of her behavior. I gave her a pamphlet about bipolar disorder and asked her to read it. I said, "It seems to me that you're very interested in this. You talk about mental health conditions a lot, so I thought you might like to read more about it." *I also told her,* "There are a lot of other interesting things about me. Maybe you'd like to get to know me more before you talk to other people about me." *I wasn't hostile or sarcastic. I've decided to confront prejudice where I see it, one-person-at-a-time."*

"I thought that my boss treated me differently from the other cashiers. He knows about my mental health condition because I had help in getting this job from a program that works with people with mental health conditions. He seemed to watch me more than the others. I talked to my job coach about this. She (my job coach) said that could be true because some people think people with mental health conditions need a lot more support, or that he might be watching me because I am new and may need more help. I don't feel like I want to talk to my boss about it. It felt good just to say it out loud."

Self-Assessment – Strategies for Coping with Prejudice, Discrimination, and Internalized Stigma

Directions: Review the following list of strategies for Coping with Prejudice, Discrimination, and Internalize Stigma. Check off the strategies you would like to try.

_____ Practice Self-Care to help increase your resilience in the face of prejudice and discrimination.

_____ Educate Yourself and Others: Learn as much about your conditions as you can. Become knowledgeable about your health and wellness.

_____ Teach your friends and family about your diagnosis, dispel common myths, and share your experience of living with a mental health condition.

_____ Learn the laws that protect people with disabilities in the workplace.

_____ Surround yourself with supportive people at work.

_____ Be explicit about how someone can support you. It's hard to guess what another person needs, so let co-workers and supervisors know what is helpful.

_____ If you believe that you have been discriminated against, contact your local disability law center and ask for information on how you should proceed.

_____ Refuse to Equate Yourself with Your Diagnosis: You are much more than your diagnosis. Your condition does not define you as a person or worker. Resist this stigma.

_____ Learn about yourself: your likes, dislikes, strengths, and limitations. Embrace and appreciate your humanness.

_____ Share Your Own Experiences: Speaking about your own experiences and recovery to individuals and groups of people can help you take stock of what you have accomplished.

_____ Join an Advocacy or Support Group: There are several local and national groups that are organized to advocate for the rights of people diagnosed with a mental health condition and to address prejudice and discrimination. Find a group that is right for you.

Module 6

Coping with Stress at Work

*"Taking a break at work and going for a walk at lunch helps me reduce my anxiety.
I always feel more relaxed and less overwhelmed, ready to face the rest of my shift
when I return. I try to walk fast, deep breathe,
and I listen to my iPOD with my favorite music, as I walk."*
-Larry

Table of Contents

Introduction

The intention of *Module 6: Coping with Stress at Work* is to:

- Understand how you experience stress.

- Describe ways of coping effectively with stress at work.

- Build effective strategies for your successful management of stress at work.

Coping effectively with stress at work will help you build your own 'stress hardiness', so you feel more confident in dealing with everyday hassles that come with work.

Reflective Questions

- Were the ways that you coped with stress in the past effective?

- How or how not?

Things to Know About Stress

Stress is a term people use to describe a feeling of pressure, strain, or tension. People often say that they are 'under stress' or 'feel stressed out' when they are dealing with challenging situations or events.

Stress can make people feel threatened or incapable of completing the tasks that are required of them.

Stress is a part of everyone's life. There is no such thing as a stress-free existence. Learning how to deal with the stress of life and the stress of work is important to a person's wellness and to success and happiness at work.

Sometimes stress comes when thinking about past negative events, such as the loss of a job, marital problems, or having an accident. Sometimes stress comes from positive events, such as getting a new job, new apartment, or becoming a parent. Stress also can come from events that have not happened yet, such as a doctor's appointment, a job interview, or an exam.

Reflective Question

- What causes you stress?

- What happens when you experience stress?

Coping with Stress and Mental Health Conditions

Understanding stress and how it impacts you is important to achieving wellness.

Learning how to cope with stress in healthy ways can support well-being and prevent and decrease symptoms.

Preventive coping is an approach to preparing for possible stressful events. The goal of preventative coping is to build your general resistance to stress so that it will result in less strain and have a less negative impact on your life.

In order to pursue our life goals, including the goal of work, we need to be willing to take on new challenges. Making changes in our lives, even positive ones, can be stressful. Preventative coping is a way of seeing personal challenges, and the risks and demands related to them, as opportunities for personal growth.

Tips and Strategies – Coping with Stress

Coping with stress effectively is a key to living a successful and rewarding life. Learning how to respond to stress, rather than just react to stress, will help you manage the ups and downs of life with strength, hope, and health.

Coping with stress effectively is especially important at work. Responding to stress with a personal strategy will allow you to work without the disruptions, and in turn, support you in achieving your work goals.

Strategies for Addressing Stress

There are many choices for dealing with your stress. Strategies for stress are very individualized. Some of your strategies may work better at home, some might work better at work, and some strategies may work well in any environment. What is most important is that you practice the strategy you choose. When you practice your strategy on a regular basis, you will get better at it, and the more effectively it will work when you need it.

Here are some examples of strategies for addressing stress:

- **Talk to Someone**
  Consider talking to a peer, co-worker, or job coach. Looking for work and starting work can be stressful. Talking about it can help.

- **Use Relaxation Techniques**
  Relaxation techniques reduce stress in our minds and bodies. Consider taking a class or asking a provider to help you practice. Practice it at work and home each day.

- **Use Positive Self-Talk**
  Use 'I can' statements. Give yourself positive feedback. Make an intention to take a 'the glass is half full' approach to your life.

- **Maintain your Sense of Humor**
  Remember to see the humor in things. Laugh, watch a YouTube clip, and spend time with people at work who make you laugh and feel good.

- **Practice your Spirituality or Religion**
  Make time in your week to be involved in your chosen faith communities or in your spiritual practices. Often a sense of connectedness to one's spirituality and faith brings peace to people, which strengthens their stress hardiness.

- **Exercise**
  Try to be physically active at a moderate pace for at least 30 minutes a day. Exercise is a known stress buster and can help promote stress hardiness. Take a walk each morning before you go to work, use the stairs at work instead of the elevators, and consider joining a YMCA/gym.

- **Write in a Journal**
  Writing your thoughts and feelings in a journal can help you express yourself. Choose a time every day. Keep the time sacred for journaling. Getting your thoughts and feelings down on paper can help you relax.

- **Make Music or Listen to Music**
  Playing music is a great way relax and cope with daily stress. Listening to music on the way to work or on the way home can help you relax**.**

- **Practicing Art or a Hobby**
  Make time to practice your art or hobby.

- **Playing Games on your Computer/Smartphone**
  Choose a time of the day, such as lunchtime or after work for playing a game on your computer or smartphone. These games can be great for attention, memory and recall, as well as helping you relax.

- **Watching TV or Movies**
  Spend time watching television or movies that you enjoy.

- **Practice Mindfulness/Meditate**
  Learn and practice meditation techniques and mindfulness. The techniques require daily practice, but can bring wellness to your life and at work.

Self-Assessment – Strategies for Coping with Stress Checklist

Directions: Review the list of coping strategies below. Check those that you currently use and those that you would like to try. For 'Other', include strategies you currently use or are aware of that are not listed.

Strategy	I use this	I would like to try this
Talk to someone		
Use relaxation techniques		
Use positive self-talk		
Maintain sense of humor		
Practice spirituality/religion		
Exercise		
Writing in a journal		
Making or listening to music		
Doing artwork or a hobby		
Playing games on a computer/smartphone		
Watching TV or Movies		
Practice Mindfulness/Meditate		
Other:		
Other:		
Other:		

Examples – Coping with Stress

People develop different strategies for coping effectively with stress, depending on what works for them.

"For me, it is very stressful getting to work on time as I have to take public transportation. It is very unreliable. I start worrying about being on time the night before, and it can cause me to stay awake, get migraines, and feel so anxious that I actually have to call in sick! So I have learned to write out a 'to-do' list the night before, which helps me feel like I will remember to do everything in the morning. Then, I get up early enough to get ready and deal with any slow subways. Once I am on the subway to work with time to spare, I can relax."

"Recently, I have been under a lot of stress at work. A lot of people were laid off last summer, and everyone has more work to do in the same amount of time. About a month ago, I started getting hives for no reason. They start on my legs and then work their way all over my body. The itching is so bad, and I feel panicky. I also have been feeling really angry over small things. My therapist has been teaching me some deep breathing techniques to help me when the hives start and I feel panicked, and my boss has suggested that when I start to feel overwhelmed and angry to take a break and go for walk around the block. I also am bringing Benadryl to work for the hives. These strategies seem to be helping me cope more effectively."

Causes of Stress

People find different things stressful. What may be stressful to one person, may not be stressful to another. Some people find the hustle and bustle of a city to be stressful, while other people find it exciting. Some people find going staff meetings to be stressful, while other people enjoy the banter and discussions with coworkers. Knowing what you personally find stressful will help you develop effective coping strategies at work.

Stress tends to fall into two categories: Life events and daily work hassles.

Life events

Life events refer to experiences, such as moving, getting married, the death of a loved one, having a baby. Some life events are more stressful than others; for example, getting a divorce is usually more stressful than changing jobs. The more life events you experience in a short period of time, the more stressed you may feel. The stress related to these life events can impact your success and happiness at work.

Daily Work Hassles

Work, like our everyday lives, has daily hassles. Timelines, projects, noise, and different personalities can be the daily hassles of a job. The more the daily hassles related to your work role and setting affect you, the more stressed you may feel. The stress related to daily work hassles also can impact your success and happiness at work.

Self-Assessment – Life Events Checklist

Directions: Put a check mark next to each life event that you have experienced in the past year.

_____ Moving
_____ Getting Married
_____ New Baby
_____ Divorce and Separation
_____ Injury
_____ Illness
_____ New Job
_____ Loss of Job
_____ Inheriting or winning money
_____ Financial Problems
_____ Injury or Illness of a loved one
_____ Death of a loved one
_____ Victim of a crime
_____ Legal problems
_____ New Boyfriend or Girlfriend
_____ Broke up with Boyfriend or Girlfriend
_____ Stopped Smoking
_____ Went on a diet
_____ New responsibilities at home
_____ New responsibilities at work
_____ No place to live
_____ Hospitalization
_____ Drinking or using street drugs that caused problems
_____ Other_____
_____ Other_____
_____ Other_____

_____ Total number of life events checked off.

Moderate Stress: 1 event
High Stress: 2-3 events
Very High Stress: More than 3 events

Self-Assessment - Work Hassles Checklist

Directions: Place a check mark next to work activities and events that you have experienced as stressful in past jobs.

_____ Conflict with boss/supervisor
_____ Conflict with co-workers
_____ Conflict with customers
_____ Meeting deadlines
_____ Increased responsibilities at work
_____ Resolving a crisis at work
_____ Handling new tasks
_____ Making mistakes on the job
_____ Feeling frustrated by mistakes
_____ Feeling incompetent at work
_____ Feeling sensitive to criticism and feedback
_____ Difficulty concentrating
_____ Experiencing symptoms at work
_____ Experiencing side effects from medications at work
_____ Unexpected changes in the work environment
_____ Anticipating difficulties
_____ Losing patience or not being able to control anger
_____ Having suggestions rejected
_____ Lack of collaboration with co-workers
_____ Speaking in front of other people
_____ Not knowing when or how to interrupt people at work
_____ Other_____
_____ Other_____
_____ Other_____

_____ Total number of work activities and events checked off.

Moderate Stress: 1 event
High Stress: 2-3 events
Very High Stress: More than 3 events

Signs of Stress

Stress affects people physically, emotionally, and cognitively. It affects behavior, mood, and thinking. Some people only experience physical signs of stress, such as muscle tension, headaches, or sleep problems. Other people have trouble concentrating. Some people become irritable or weepy. Others may pace or bite their nails. Each person's response to stress is individualized.

Being aware of your own personal signs of stress can be very helpful. When you are looking for a job or working, it is really important to recognize your signs of stress, so you can start to do something about them before they interfere with your success at work.

Reflective Questions

- How do you experience stress?

- What are your physical, emotional or cognitive signs that you are under stress?

Self-Assessment – Signs of Stress Checklist

Directions: Circle the signs you notice when you feel stressed.

Physical Signs	Emotional Signs	Cognitive Signs
Headaches	Tearful	Problems Concentrating
Sweating	Angry	Forgetful
Back pain	Tense	Indecisive
Change in appetite	Hopeless	Difficulty Remembering
Difficulty falling asleep	Lonely	Easily Distracted
Increased need for sleep	Nervousness	Prone to Accidents
Trembling or shaking	Feeling Restless	Difficulty Focusing
Digestion problems	Irritable	Black and White Thinking
Stomach aches		
Dry mouth		

Other _____   Other _____   Other _____

Other _____   Other _____   Other _____

Preventing Stress

Taking action to prevent stress is an opportunity for you to make progress towards your goals. If you are getting ready to go back to work or already working, you can take action to prevent stress from interfering with your work. This is a positive way you can be successful and happy as a worker.

Key Steps:

1. Recognize your signs of stress when they are happening.

2. Choose a strategy based on the type of symptom to reduce your experience of stress.

3. Use the strategy on a regular basis to proactively prevent stress from impacting you.

Preventing stress is an important aspect of your lifestyle. The strategies you find to be most helpful are powerful ways of taking good care of yourself. Taking care of yourself in this way can free you up to do the things you want in life, such as work, study, or be in a relationship.

Strategies that help prevent you from feeling stressed, are buffers. They build your resiliency to stress, so over time, you are stronger in the face of stress.

Your strategies will be most effective if you build them into your daily life. This way you can prevent both positive and negative stress from taking a toll on you and your goals.

Developing a Prevention Plan for Coping with Stress at Work

Developing a prevention plan for coping with stress can be an important wellness tool at your job. A prevention plan is helpful as it prepares you to respond to stress instead of react to stress. The prevention plan is your individual map of how you will be proactive in responding to stress that happens in your life and at your work.

Steps to Developing a Prevention Plan for Coping with Stress for Work:

1. List the stressful situations to be aware of.
2. List the signs that you are under stress.
3. Choose a variety of strategies for preventing stress at work.
4. List your strategies for coping with stress at work.

Example: Prevention Plan for Coping with Stress at Work

1. Stressful situations to be aware of:
   - *Making mistakes on the job*
   - *Handling new tasks*
   - *Experiencing symptoms at work*

2. Signs that I am under stress:
   - *Physical: Sweating - Change in appetite*
   - *Emotional: Hopeless - Feeling restless*
   - *Cognitive: Indecisive - Easily distracted*

3. My strategies for preventing stress at work:
   - *Check in with my supporters*
   - *Identify three positive events that happen each day to me*
   - * Eat balanced meals*

4. My strategies for coping with stress at work:
   - *Talk to my sponsor whenever I feel stress at work.*
   - *Use relaxation techniques. I will try to go for a walk and practice breathing exercises at least once during my break time.*
   - *Use positive self-talk: 'I know I can do this and with patience everything will go right.'*

My Plan for Coping with Stress at Work Worksheet

1. Stressful situations to be aware of:

   -

   -

   -

2. Signs that I am under stress:

   - Physical:

   - Emotional:

   - Cognitive:

3. My strategies for preventing stress at work:

   -

   -

   -

4. My strategies for coping with stress at work:

   -

   -

   -

Summary - Coping with Stress Effectively

- Stress is the feeling of pressure, strain, or tension that comes with challenging situations. Stress is a normal part of life and work.

- Coping effectively with stress can help you reduce symptoms and be successful at work.

- Life events, daily hassles, and work hassles are sources of stress. There is both positive and negative stress, but we often experience both types of stress in similar ways.

- You can prevent stress from impacting you at home and at work, by using a variety of strategies that buffer you from stress, such as daily exercise, talking with peers, and getting enough sleep each night.

- Choosing wellness strategies and practicing them on a regular basis can help you manage and cope with stress in effective ways at work.

- You can develop an individual prevention plan for coping with stress at work that will prepare you to deal effectively with stress when it happens on the job.

Module 7

Building Social Relationships for Work

"I still need supports, but I have learned to use them well.
My work life gave me the courage to take on other challenges in my life.
I have a girlfriend now, and I have a very busy social life. I also am mentoring people,
like myself, who are trying to rebuild their lives
after experiencing a challenging mental health condition."
-DW, Teacher

Table of Contents

Introduction

The intention of *Module 7: Building Social Relationships for Work* is to:

- Describe ways of using relationships and social support to improve your success and happiness at work.

- Identify relationships in your life that are supportive and relationships that might be less supportive.

- Provide tips and strategies for strengthening your relationships at work.

- Create a plan for getting the support you need to be successful and happy at work.

Things to Know about Relationships and Work

- Most jobs require working with people.

- Supportive relationships are ones that offer you encouragement and/or assistance.

- Most people like having positive relationships both inside and outside of work.

- Research shows that positive relationships can help reduce stress.

- Research also shows that positive relationships can help to reduce health relapses.

- Developing good interpersonal skills can help you get and keep positive relationships with other people.

- When you have positive relationships at work, you feel resilient and less vulnerable.

- Positive relationships at work can make you feel good about yourself and more optimistic about the future.

- Relationships can help you learn important tips, customs, unspoken rules or facts about the workplace that can help you succeed in keeping a job.

Positive Work Relationships at Work

Example:

"I have been working in the kitchen at the hospital for a year now. It has taken me awhile to get used to working again, and it hasn't always been easy as I am not comfortable with my English. But my co-workers have been so nice to me, they always tell me my English is just fine, and it has been really helpful to me when I felt like I couldn't do the job. They seem interested in my culture and family. I like listening to their stories about what they do on the weekends. We talk a lot while we make the food, and I have started sharing a bit more about myself."

Supportive Relationships

Social Supports are:

- A network of family, friends, co-workers, and professionals who provide encouragement and care about you.

- People who give you emotional support.

- People in your life who believe you can recover and live with wellness.

- People who accept you for who you are and support you in the changes that you are trying to make.

- People who are willing to lend you a hand when you need help.

Almost any person in your life can be in your support network, if they are willing and able to offer you the assistance or encouragement you want. No one person can offer us all the support we need, which is why it is ideal to have a network of people who can support you in different ways.

Potential supports:

- spouse or partner
- co-workers
- family members
- peer
- neighbors
- friends
- social contacts like store clerk, people at your gym, etc.
- members of your church, synagogue, or temple
- classmates
- professionals, like a work counselor, psychiatrist, nurse, case manager, etc.

Reflective Questions

- Who is currently in your support network?

- In what ways are they supportive?

Types of Support

Different people are willing and able to offer different types of support. Some people are great at listening and giving encouragement, but can't help you do things. Other people may be willing to help you do things, but are not willing or able to help you with an emotional problem. It is better to have more than one person in your life who you feel is supportive.

Here are some different types of support that people can offer:

- **Emotional support** that fosters a feeling of comfort. For example, someone who listens to you and offers encouragement and understanding.

- **Material support** is goods or services that address practical problems. For example, a friend gives you a ride home from the grocery store, or your brother lends you $20 until payday.

- **Informational support** is knowledge or advice that helps you make sense of a situation in your life. For example, your boss explains how to fill out a W-2 form for work, or your best friend gives you feedback on which shirt looks best on you.

- **Instructional support** is help learning how to do something that you don't know how to do. For example, your co-worker teaches you how to use an Excel spreadsheet.

Different people may be willing or able to offer you different types of support. For example, bosses often will give informational or instructional support, but they don't always give emotional support.

Self-Assessment – Supportive Relationships

Directions: Next are a series of questions that will help you determine how satisfied you are with the amount and quality of supportive relationships in your life today.

1. How satisfied are you with your current relationships?

1	2	3	4	5
Very Dissatisfied				Very Satisfied

Comments:

2. How satisfied are you with the support your relationships provide to you?

1	2	3	4	5
Very Dissatisfied				Very Satisfied

Comments:

3. If working, how satisfied are you with the relationships you have at work?

1	2	3	4	5
Very Dissatisfied				Very Satisfied

Comments:

Tips and Strategies - Improving Relationships

Many people depend upon their work relationships. Relationships at work can help you be successful and happy. There are two general strategies for increasing your relationships that support you. Most people find it helpful to use both strategies:

1. Increase the <u>number</u> of people with whom you have contact.
2. Improve the <u>quality</u> of your relationships with people with whom you have regular contact.

Socializing with People at Work

Work is a natural place to connect with people.

Example:

> "*I got the part-time job and was all nervous about starting. On break the first day, I saw some people hanging around the vending machines. I saw a friendly-looking woman who waved at me. I went over and introduced myself. She didn't say a lot but just asked me how my first day was going and introduced me to everyone else. I was really happy because I felt like I really was going to like my new job*."

Many people socialize with people that they work with. In fact, work can be a great place to meet people and make friends. Here are some important things to remember about socializing at work:

- The first purpose of work is to be productive. It is important to focus on your job and use break time and meal time to connect with people in a social way.

- Places at work where conversations are likely to be sociable are: the lunchroom or break room, lounge area, and other areas outside of the building.

- Friendships at work start gradually. Usually people work together for a period of time before a friendship develops.

- It's helpful to be friendly and demonstrate an interest in your co-workers as a way to begin a work friendship.

Reflective Questions

- What experiences have you had with socializing with people at work?

- What are your hopes about having friendships at work?

Conversing with People at Work

Having conversations with people at work can be very enjoyable. It is helpful to know the culture of the work place and know when to converse and with whom. Here are some tips on conversing with co-workers:

- Choose someone who wants to talk. You have to read certain cues to know who is available for conversations. In general, a person who is open to conversation is:

  o Not busy doing work tasks or other activities
  o Makes eye contact with you

- Choose a 'safe' topic for conversation. Generally safe topics are impersonal topics that won't upset or offend anyone. Topics, such as politics or religion tend to be highly emotional for people, so until you know someone well, it can be helpful to choose something else to talk about. Topics people like to talk about at work often include:

  o The weather
  o Work tasks
  o Sporting events
  o Interests, like television, music, families

- It's nice to give compliments and make positive comments. People like to hear praise and appreciate hearing positive comments. Be very careful if you compliment a person of the opposite sex on his or her appearance; it could be misinterpreted as flirting, or worse, harassment.

- A great way to demonstrate interest in what the other person is saying is by making eye contact, nodding, and asking questions that reflect your interest in the other person.

- It is important to keep your socializing brief at work. One way to end a conversation you can say, *"I've got to get back to work now."* or *"Nice talking with you."*.

Sharing Personal Information at Work

One way to get closer to people is to tell others something about yourself. Sharing personal information usually is done once people get to know each other better over time. Here are some tips about sharing personal information at work.

- Sharing personal information at work can be tricky. Tell too much, the other person may feel overwhelmed by the information and you may feel exposed. Tell too little, people may view you as stand-offish.

- Disclosing information about your mental health condition or any health condition to the wrong person, or at the wrong time, may lead you to feeling vulnerable at work. Many people still feel prejudice about mental health conditions.

- Disclosing about illness is not something you have to do. When a relationship gets closer, you may decide to talk about your experiences with a mental health condition.

- In general, you can feel comfortable matching your level of sharing personal information with the level the other person has shared with you. For example, if the person you're talking with tells you about a disagreement she had with her daughter that morning, you probably can feel safe talking about your family relationships.

- As you get to know a person better, you can increase the amount of personal information you share.

Increasing Social Support

Social support is important for all people, and you may find that you desire more social support when you are in the process of getting a job, or when you are working at a job. Here are some important strategies for increasing the amount of support you get from the people in your life:

- Make a short list of people who are supportive of you and make an effort to get in touch with them.

- Stay in touch with people. Telephoning, texting, and e-mailing friends to let them know about your work efforts is a way of inviting support from them.

- Make social plans with others. Companionship is an important form of support.

- Often to have a friend, you must <u>be</u> a friend. It's important to offer your friendship to those people who support you.

- Join a self-help or support group. More and more people are meeting with each other for the purpose of offering and receiving support. Peer support is very powerful. Look around and find out about support groups in your community. There are many types of support groups.

Self-Assessment – Social Skills at Work

Directions: Read the following social skills and rate your confidence with using each one at work. Write an example of when you had an experience (positive or negative) with the skill in the comments section.

Skill	Very confident	Confident	Okay	Unconfident	Very unconfident	Dont know	Comments
Finding places to have conversations							
Choosing people with whom to have conversations							
Starting conversations with co-workers							
Finding topics of conversation							
Demonstrating your interest in other people							
Sharing personal information							
Talking about my health conditions							
Asking for help							

Developing a Plan - Building Social Supports for Work

Developing a plan for building social supports for work can be an important tool in your vocational recovery. A plan is helpful as it prepares you to get the support you need to be successful and happy as a worker. Once you complete this plan, it may be helpful to keep a copy at home and at work as a reminder.

Plan for Building Social Supports for Work: Example

1. **Social skills I currently have:**

   - People see me as a very outgoing person. I usually connect with people pretty well.
   - I think I have a good sense of humor and enjoy when people are humorous.
   - I am good at demonstrating my interest in other people.

2. **People who are supportive of me as I prepare to choose, get, and keep work:**

   - My cousin
   - My peers at the program
   - My therapist

3. **Strategies I try using to improve my social support while working:**

   - I will continue making social plans with my friends. I will give them a call at least once a month.
   - I will continue attending my peer support group.
   - I will try to initiate conversations with my co-workers if we are on break, especially around lunch. I don't like to eat alone.

4. **Interpersonal skills I would like to learn and practice so I can feel more confident in social relationships:**

   - Asking for help
   - Identifying topics of conversations

Plan for Building Social Supports for Work

1. **Social skills I currently have:**

2. **People who are supportive of me as I prepare to choose, get, and keep work:**

3. **Strategies I try using to improve my social support while working:**

4. **Interpersonal skills I would like to learn and practice so I can feel more confident in choosing, getting, and keeping relationships:**

Summary of Building Social Relationships at Work

- Everyone needs and uses social relationships to support them.

- Relationships at work can help you feel more resilient and less vulnerable.

- Relationships at work will help you feel connected to your co-workers and increase your satisfaction, which will increase the likelihood of success at work.

- Work can be a good place to develop social relationships.

- Sharing personal information is a good way to get closer to another co-worker, but it is wise to be cautious about sharing too much personal information until you know the person well.

Module 8

Preventing Relapses

"My migraines seem to get more intense, and I find myself not sleeping before I relapse. Paranoid thoughts are another sign. I withdraw from my supports, and I spend too much time on the computer. I have learned to treat these signs seriously and use my coping strategies on my plan. It has helped me keep my job over the years."
-Computer Instructor

Table of Contents

Introduction

Module 8 Preventing Relapses discusses strategies for preventing symptom relapses or minimizing the severity of any relapses that might occur. This is a key strategy for success and happiness at work and for your overall health and wellness.

The intention of *Module 8: Preventing Relapses* is to:

- Identify the stressful situations in your past that contributed to relapses.

- Learning how to identify your own personal warning signs that a relapse may occur, as a way of taking charge of your health and wellness.

- Develop a relapse prevention plan that can be used at work. This plan is a living plan that will change as you learn what works for you and what doesn't. Writing and using a relapse prevention plan is a proactive health strategy.

Things to Know about Relapses

A relapse is when a person's mental health symptoms increase in severity to such a degree that the person is unable to function well in a job, at home, at school or in relationships. Sometimes people manage their relapses at home, but sometimes when a person has a relapse, they will go into respite programs or hospitals.

Relapses can cause a lot of disruption in a person's life. Relationships can be stressed, home life can be disrupted, school and work often are missed, and sometimes people may lose their job as a consequence of a severe relapse.

Mental health conditions affect people in very different ways. Some people have mild symptoms and rarely have relapses. Other people experience intense symptoms and may have several relapses that require respite or hospitalization. Some people have constant symptoms, but don't have severe relapses. Each person is unique in their symptoms, and the level of distress and interference they are able to tolerate and function with successfully.

Learning to prevent relapses is an important skill you can use to maintain your health and wellness, which then supports you at work. Relapses happen for many reasons. There is research that suggests that relapses are more likely to occur when:

- People are under more stress than usual.
- People stop taking their medications and stop self-care and wellness strategies.
- People use alcohol and drugs.

Preventing Relapses

Preventing relapses is finding and using strategies to lessen or eliminate your symptoms that may interfere with your wellness at home, school, or work. The benefit of learning how to prevent relapses is that it will help you be healthy so you can work.

The relapse process for most people is subtle. It usually involves a gradual increase in early warning signs and triggers. Sometimes people experience an increase in symptoms that gradually get worse over several weeks or months. Relapse often happens so slowly that people don't notice until their symptoms are severe and they are struggling at home or work.

It is very empowering to know what wellness means to you and what your early warning signs are so you can take charge of your health and prevent things from getting worse. If you know your own personal threshold of when your symptoms begin to impact your life, you can then choose strategies to prevent them from interfering with your functioning.

There are many ways to prevent and reduce a relapse of symptoms. You already have learned some important strategies in the earlier modules including:

- Educate yourself about your illness.
- Identify and know your own individual symptoms.
- Identify how stress impacts you and develop coping strategies.
- Choose and participate in health and wellness strategies to help you function well.
- Build social supports.
- If you take medications, use them effectively.

In this module, you will learn some additional strategies that may help you stay healthy so you work with wellness.

These strategies include:

- Recognize events or situations that contributed to past relapses.
- Recognize what people, places, things, and activities help you be healthy.
- Recognize past work situations that may have contributed to relapses.
- Develop your own relapse prevention plan for work to respond to early warning signs.
- Use the help of other people in your life: your family, friends, co-workers, peers, and professionals to support your health and wellness to avoid relapse.

Recognizing What Your Wellness Means

People use diverse wellness strategies that give them joy, comfort, and satisfaction. Some wellness strategies are simple things like enjoying a cup of coffee each morning, taking a warm bath, or listening to music. Other things might be going out for a walk with your dog, attending church each week, or cooking a meal with friends.

Reflective Questions

- When you are at your best, what are the wellness routines or tools you use?

- Who are the people you are hanging out with?

- What lets you know you are doing well?

It can helpful to list out your important wellness strategies and keep the list in a place you will see (i.e., your bulletin board at work) or on a 'note' on your smartphone. This way you can access this list at work when you need to.

Reflective Question

- What are your most important wellness strategies?

Symptom Triggers

Triggers are common events and situations that seem to contribute to the beginning of a relapse. Some people can identify specific circumstances that 'trigger' them and cause their symptoms to appear.

An example of a trigger might include a night or two without sleep, using alcohol, performance reviews at work, exams at school, or having a disagreement with someone.

Self-Assessment - Examples of Common Triggers

Directions: The following chart shows some examples of common triggers. Please check off in the space provided, any example that reflects an experience you have had.

Personal Descriptions of Triggers	Like My Experience
I noticed that when I stayed out late and didn't get enough sleep, I tended to have distressing symptoms.	
When I am under more stress at work, like having a strict deadline, I am likely to start having symptoms.	
When there is a change in my life, even a good change, like getting a new job, I tend to feel stressed out. Then my symptoms seem to come back.	
Every time my boss gives me feedback, I struggle. Often my symptoms get worse then.	
The biggest problem for me is when I stop taking my medicine and supplements. Before long, my symptoms start up again.	
Other:	
Other:	

Once you have identified a situation that appeared to trigger symptoms in the past, think about how you might handle that situation differently if it were to happen again. Think about how you might handle this situation at work.

If you identify that certain work situations are stressful, such as meeting deadlines or getting feedback from supervisors, use your wellness strategies you named as important, the next time you encounter another stressful situation.

Early Warning Signs

Early warning signs are early changes in a person's inner experience or behavior that indicates that a relapse is possible.

Even when people do their best to avoid it, their symptoms may come back and they may have a relapse. For some people, a relapses can occur over short periods of time, such as a few days, with very little or no warning. However, most people experience the decline of their wellness develop gradually over longer periods of time, such as over several weeks.

For some people, the changes may be so subtle at first that they may not seem worth noticing. For others, the changes are more pronounced and more distressing.

When people look back on a relapse experience, they often realize that these early changes, even the subtle ones, were signs that their wellness was declining.

Examining early warning signs you noticed at past jobs can be helpful in preventing future relapses. You might have noticed a change in your behavior at work, or perhaps your co-workers noticed changes.

Self-Assessment - Common Early Warning Signs

Some warning signs are quite common. Others are more individualized. The following chart lists some examples of the more common early warning signs.

Directions: Check off the examples that reflect an experience you have had.

Early Warning Sign	Example	Like My Experience
Feeling overly Tense or Nervous	Even getting coffee with my co-workers at work made me very nervous. I felt like something bad was going to happen, and I couldn't stop shaking.	
Eating too little or Eating too much	First I started skipping breakfast, then I was avoiding eating lunch with co-workers. I lost a lot weight, even though I wasn't trying.	
Sleeping too little	When I started to relapse, I didn't feel I needed to sleep. I would start working on my writing and stay up all night.	
Sleeping too much	I was so tired all the time and was going to bed really early, and I still couldn't get up out of bed and get to work on time in the mornings.	
Feeling Very Depressed	I started to feel my work wasn't good enough. And that I wasn't a good person. I couldn't take pleasure in anything. My mood was sliding down and down, and I was in a very dark place.	
Isolating	I only wanted to be alone. I would close the door to my office so I could be completely alone.	

Early Warning Sign	Example	Like My Experience
Feeling Irritable	Even the smallest things would irritate me. For instance, I would fly off the handle if the receptionist would let the phone ring more than twice before answering it.	
Stopping Medication	I stopped taking my medicine. I even threw away the bottles. I stopped going to my support group.	
Trouble Concentrating	I was unable to concentrate on my work at all. My mind was all over the place while I was working on the computer.	
Thinking People are against you	It seemed like people in the HR department were talking about me. They even seemed to be laughing at me. I couldn't understand why.	
Hearing Voices	The voices were not loud at first. Sometimes they just whispered my name, but over time they got demanding and angry with me.	
Drug or alcohol abuse	Usually I don't drink. But when I started to relapse, I found myself pouring myself several strong drinks.	
Increase Spending or Shopping	I used up my checking account and then charged two credit cards to the limit.	
Being over-confident about your abilities	I felt I was really doing a great job as a research assistant. I was dominating staff meetings, bragging about what I had done and what I thought about everyone else's work. My boss had to pull me aside and ask me to tone it down.	
Other:		

Common Early Warning Signs

- Feeling extremely tense or nervous

- Eating too little or eating too much

- Trouble sleeping too much or too little

- Feeling very depressed

- Wanting to be alone all the time

- Feeling irritable all the time

- Stopping treatment and self-care

- Trouble concentrating

- Thinking people are against you

- Drug or alcohol abuse

- Increased spending or shopping

- Being over-confident about your abilities

Reflective Questions

- Have you experienced any of these common early warning signs?

- Have you experienced any of these signs at work?

- What gets in the way of recognizing that you are having early warning signs?

Individual Warning Signs

People often have unique early warning signs. These are equally important to recognize.

Individual warning signs are highly personalized, internal and external behaviors, or experiences that indicate you are at risk for a relapse.

Recognizing what your individual warning signs of a relapse are is an important step in developing a prevention plan for work, so that a relapse of symptoms doesn't interfere with your ability to succeed at work.

Examples of Individual Warning Signs

- *"Before my last two episodes, I cut my own hair very, very short and very, very poorly."*

- *"My boss noticed I was talking extremely loud all the time."*

- *"I started borrowing money two or three times a week from co-workers."*

- *"I stopped taking good care of myself. I stopped shaving and wore the same khaki pants and blue oxford shirt to work for two straight weeks."*

- *"I became preoccupied with my nutrition. I would eat only dairy products at each meal."*

Reflective Question

- What individual warning signs have you had at work?

Self-Assessment - Identifying Your Warning Signs

Early Signs Questionnaire
(Adapted with permission, Herz & Melville, 2001)

Directions: Check off any of the early warning signs that you experienced in the week before your last relapse.

Early Warning Signs	I Experienced This Sign
My mood shifted back and forth.	
My energy level was high.	
My energy level was low.	
I lost interest in doing things.	
I lost interest in the way I looked or dressed.	
I felt discouraged about the future.	
I had trouble concentrating or thinking straight.	
I had trouble with my co-workers and job tasks.	
I was afraid I was going crazy.	
I was puzzled and confused about what was going on around me.	
My thoughts were so fast, I couldn't keep up with them.	
I felt distant from my family and friends.	
I had the feeling that I didn't fit in.	
Religion became more meaningful to me.	
I felt afraid that something bad was about to happen.	
I felt that other people had difficulty understanding what I was saying.	

Early Warning Signs	I Experienced This Sign
I felt lonely.	
I was bothered by thoughts I couldn't get rid of.	
I was overwhelmed by demands or felt too much was being asked of me.	
I felt bored.	
I had trouble sleeping.	
I felt bad for no reason.	
I was worried that I had physical problems.	
I felt tense and nervous.	
I got angry at little things.	
I had trouble sitting still. I had to keep moving or pace up and down	
I had trouble remembering things.	
I was eating less than usual.	
I heard voices or saw things that others didn't hear or see.	
I thought that people were staring at me or talking about me.	
I had a decreased need for sleep.	
I was more irritable.	
I was overconfident about my abilities.	
I increased my spending or shopping.	
Other:	
Other:	

Awareness of Early Warning Signs

People are not always aware when their behavior has changed and they are experiencing an early warning sign of a relapse. For example, someone might not realize they are feeling unusually irritable at work. Instead, it may seem to him or her that co-workers are being especially annoying.

Co-workers, supervisors, friends, families, and healthcare practitioners often notice when someone seems different or is acting out of character. They can be helpful allies in helping you recognize your early warning signs. Your co-workers, supervisors, family members, friends, and health care practitioners can be your 'extra set of eyes and ears' for noticing early warning signs, if you ask them to help you.

If you have disclosed your condition to your supervisor, it can be helpful to share with your supervisor some possible early warning signs to look for when you are working, and let them know that you would like them to inform you when he or she notices these warning signs.

You also can include your supervisor in your Relapse Prevention Plan for Work to help you take action to prevent your early warning signs from becoming relapses.

People I Can Ask To Help Me Recognize My Early Warning Signs

Directions: Circle the people you would like to ask to help you.

- Co-workers
- Supervisor
- Family Members
- Spouse/Significant Other
- Healthcare Provider

- Friends
- Peer Support
- VIMR Counselor
- Job Coach

Tips and Strategies - Avoiding Relapses

Avoiding Relapses means acting quickly in response to early warning signs to prevent a relapse.

The more quickly you take action to respond to your early warning signs, the less likely you will have a relapse that will interfere with your life and your work.

Avoiding relapses is an important health strategy for being successful at work. A relapse could cause you to be absent from work for a prolonged period of time. A relapse could put strain on your relationships at work with your co-workers and supervisors.

Reflective Questions

- What have you done in the past to avoid a relapse?

- What were the benefits for you of taking action to prevent a relapse?

Time for Action Questionnaire

The following checklist of questions can be a useful tool when you notice early warning signs.

Directions: If you answer any of the questions 'yes', then identify a personal action you can take to respond to the early warning sign.

Questions	Yes/No	Personal Action
Is my stress level high? What can I do about it?		
Am I taking part in the wellness strategies I chose?		
Am I using the different supports in my life?		
If I take medication, am I taking it as prescribed?		
Should I arrange a special appointment to see my doctor?		
Should I contact someone for extra support?		

Asking yourself these questions when you notice early warning signs is an important strategy you can use to take control of your overall health and wellness.

Taking personal action to respond to your warning signs is a key step for wellness at work.

Examples:

Here are examples of what other people in recovery have done when they have recognized they were experiencing early warning signs at work.

"When I started feeling so irritable with everyone, even my best friend, I realized I was under a lot of stress with changes in my office. When I get really irritable all the time, I know that I could be heading towards a relapse. So I talked with my supervisor about it, and she made some suggestions for strategies for coping with the stress better, so it didn't affect me as much."

"Well, first my boss called me in one day to ask me why I was arriving late each day. Then one of my co-workers told me she was feeling really frustrated with me as I was falling behind on my tasks that she needed from me to get her job done. I realized I was in sort of a fog and was really distracted. When I have been like this in the past, it has usually happened before I relapsed. I can't afford to lose this job, so I called my doctor, who saw me right away, and we made some changes in my medication."

"I started drinking again at night. I would go out with the guys after work and have a few beers. I was going out 3-4 nights a week, which then was affecting my sleep and I was late to work a few times. I also was starting to feel depressed. My wife was getting worried and upset with me. She reminded me that the last time I did this, I ended up in the hospital. I decided it was time to talk to my therapist and get back to AA as I didn't want to lose my job or have my wife be upset with me."

Developing a Relapse Prevention Plan

A relapse prevention plan is your personal wellness tool that lists your wellness activities, your triggers, your early warning signs, and the strategies you want to use to prevent a relapse.

It is a written document that you can use to remember and remind yourself of positive ways you can take care of yourself to avoid a relapse and minimize the impact of symptoms.

A key work skill is practicing positive self-care, so you can attend and do your job well.

Reflective Questions

- Have you ever developed a relapse prevention plan or a wellness recovery action plan (WRAP)?

- Have you done one for work?

- Was it helpful?

Example – Relapse Prevention Plan

Here is an example of a worker, Larry, who designed his own relapse prevention plan for work. Larry developed his plan as a tool to help him keep his job. He had lost numerous jobs in the past because he had frequent relapses that interfered with his ability to work.

He worked with his job coach to develop the plan and also talked to his wife for some ideas on strategies he could use. Notice the different sections of Larry's plan and the actions he will try to use when he notices his early warning signs.

Larry keeps a copy of his plan in his top drawer at work. He glances at it every time he goes into the drawer for a paperclip. He also gave a copy to his job coach and his wife.

Relapse Prevention Plan
Larry's Plan for Work

My wellness strategies at work are:

- Swimming at noon
- Talking a coffee break at 10:30 with my favorite coworker
- Closing my door when I feel overwhelmed

My past triggers at work:

- Poor job evaluation
- Very little time between when work tasks are due

My early warning signs:

- Felt irritable all the time
- Difficulty concentrating at home and at work
- Drinking beer

Actions I can take to help:

- Talk to my supervisor about timelines and my stress.
- Talk to my job counselor about increasing his support for me on the job.
- Return to AA for support around my drinking.
- Talk to my doctor about my difficulties concentrating.
- Plan in time to exercise after work with my wife to help reduce my stress.

Who I would like to help me:

- Bill, my supervisor, can help me plan my work better.
- Kim, my job coach, can meet with me once a week.
- Dr. George can help me decide if I need a new or more medication.
- Peggy, my wife, can exercise with me after work.

Who I would like to be contacted in case of an emergency?

- Bill, my boss at ###-####
- Peggy, my wife, at ###-####
- Dr. George at ###-####

The 6 steps to developing your own relapse prevention plan for work include:

1. List wellness strategies you have used or can do at work.

2. List your past triggers at work.

3. List your early warning signs.

4. List the people, places, things, and activities that help you take action to reduce your symptoms.

5. List your people supports.

6. List your emergency contacts.

Consult with family, friends, co-workers, and practitioners if you need help remembering past details, or if you want ideas about helpful strategies.

On the next page is a blank worksheet to help you develop your own Relapse Prevention Plan for Work.

Relapse Prevention Plan
My Plan for Work

My wellness strategies for work are:

My past triggers at work:

My early warning signs:

Actions I can take to help:

Who I would like to help me:

Who I would like to be contacted in case of an emergency:

Success Stories - Preventing relapses from interfering with work.

"My strongest early warning signs are having intense migraine headaches and not being able to sleep. When that happens, I know I need to start doing things like taking daily walks with my dog and taking my migraine medicine BEFORE I go to bed. I also let my supervisor know I am having migraines and could use some extra support of having her check in with me each day. Avoiding caffeine helps, and I try not to eat late at night because that makes it hard for me to fall asleep and can trigger a migraine. These things might not work for everyone, but they have kept me well and have helped me stay successful at my job."

"I've noticed that I start to feel down about myself and what I haven't accomplished in my life compared to other people my age. I can't think of anything good about myself and get stuck dwelling on the past when I was in college. I don't really know why this happens, but it happens every time when I am about to relapse. I have learned the hard way that it helps me to talk to someone, like my peers and my job coach about what I am feeling, instead of keeping it to myself. If I hold in my feelings, I start to get really angry. I know it has gotten serious, if I start losing my temper for no real reason. It also helps me to go to the gym in the mornings, so I don't stay at home alone thinking these negative thoughts, while waiting to go to my job in the afternoons. Working out, sleeping well, and talking about my feelings are my three key actions to keep me well so I can work. I have been able to avoid a relapse for two years."

Summary - Reducing Relapses

- Mental health conditions can be episodic, with symptoms varying in intensity over time.

- Different wellness strategies can be used to prevent or reduce relapses.

- Preventing relapses is an important strategy to help you succeed at work and school.

- Using your tried and true wellness strategies is helpful.

- Identifying situations or events that trigger relapses in past work situations can help you reduce the risk of future relapses.

- Early warning signs are the subtle changes in a person's inner experience and behavior that signal a relapse may be starting.

- Identifying your common and unique warning signs will help you prevent relapses, so you can then take action to reduce them. This will help you maintain your health and wellness after work.

- Developing a relapse prevention plan is a tool for success at work as it can empower you to prevent having your symptoms interfere with your job success.

Module 9

Performing Your Best at Work

"When I was finally hired, I realized I needed to find a way to still do the activities that I enjoy and make sure that I take good care of my health. These are strategies I know help me live well with my mental health condition, and they are important in helping me be the best worker I can be."

Table of Contents

Introduction

The intention of *Module 9: Performing Your Best at Work* is to provide an overview of additional information you may find helpful for work. This module focuses on:

- Creating your optimal conditions at work

- Creating a work/life balance

Information and tips are provided on what it takes to succeed at work so you can continue to learn, perform, and grow in your role as an employee, while successfully managing your life and your health.

The essence of work is performing tasks or services to a certain standard that is set by your employer. Work and the workplace come with specific expectations for performance that you must meet to be successful.

Communicating with your supervisors and your co-workers to be able to create the best conditions at work for you to perform your job to the best of your ability is important. A supportive work environment can make all the difference for people.

The challenge of work involves meeting and exceeding expectations, over the course of many years. Meeting and exceeding expectations over a whole career also means taking good care of your health and your life outside of work.

Things to Know About Creating Optimal Conditions at Work

Creating your optimal conditions at work means figuring out what you need in the work environment in order to do your best work and then being able to get it. Creating optimal conditions at work includes: Listing your Optimal Conditions and Developing your Optimal Conditions.

Listing Your Optimal Conditions

Example

Tyrell and his provider talked about the last job Tyrell had about two years ago. He was proud to say that he had been identified as the 'worker of the month' in the February right before the restaurant unfortunately had to lay off many of its workers, including Tyrell. The provider asked him what had helped him do so well there. Tyrell thought that there were a lot of things that helped him manage his health and do great work. He never told anyone that he had a mental health condition, but the company was pretty relaxed, and it never became an issue.

First of all, his co-workers chatted a lot, but they didn't mind that he did not, so he didn't feel pressured to talk. They let him keep to himself a lot and were still friendly. His supervisor was very clear about what he wanted Tyrell to do and didn't keep changing his instructions. His supervisor was calm and gave him the instructions a few steps at a time, instead of telling him all at once. He always told Tyrell when he was doing something right, and he told him what behaviors he needed to change. Tyrell felt calm around him and confident. He had talked to the supervisor and told him that for him to do his very best; he might need to step out of the kitchen sometimes to just collect himself when there was too much chaos around him. There was a stockroom where Tyrell was able to go for a few minutes to just relax, when things got just too crazy in the kitchen. His supervisor was fine about him using his time this way.

Tyrell knew exactly how many sick days he had; and he saved them up as much as he could so that if his symptoms became distressing, he could take some sick time, without it being a big deal. Tyrell thought these factors had really made it possible for him to do the best work he had ever done and would probably be good for him to have in a new job.

Listing your optimal conditions is figuring out what has to be in place at your work place for you to do the best job you can do. Listing your optimal conditions involves two steps:

1. Identifying work challenges that interfere with your best performance.

2. Identifying personally important work conditions that help you do a good job.

1. Identifying Work Challenges

All workers have work challenges. Some people do their best work in the afternoon and are groggy in the morning. Other people like working in a quiet space and struggle if it's too noisy. Work challenges can disrupt your work performance.

Self-Assessment - Work Challenges

Directions: Here are some work challenges that are common. Check the ones that you have experienced in your own work history:

Type	Yes experience	No experience
Difficulty concentrating		
Lack of stamina (physical, mental, emotional)		
Difficulty handling time pressures		
Difficulty interacting with others		
Difficulty responding to feedback		
Difficulty responding to change		
Other:		
Other:		

Example – Personally Important Work Conditions

Read about how one person identified her personally important work conditions.

Joanie figured out that the challenges that most get in her way at work were her inability to concentrate and her difficulty handling the pressures of time. Joanie does take medications, but they do not entirely control her voices. In addition, they make her anxious, which then makes it harder to concentrate, especially when there is a lot of noise around. In addition, she found it hard to meet a lot of deadlines at once and knows she needs extra time to get things done. In choosing her job, she had looked for a job that had flexible hours, slower pace, and a supervisor who seemed to be very organized, warm, and a decent human being. Joanie and her job coach worked together to identify activities and conditions that would help her do her job well:

1. *Watch for her triggers for the voices and try to schedule her tasks to avoid those times.*

2. *Do yoga in the morning before work to increase her calm and centeredness, which would help her reduce her anxiety and concentrate better.*

3. *Listen to music she liked on headphones to drown out the voices.*

4. *Ask her supervisor to break the complicated tasks down into smaller pieces with small deadlines with lots of time to do the work.*

2. Identifying Personally Important Work Conditions

The second step of Listing Optimal Conditions is to identify those conditions that are personally important and contribute to a person's best performance on the job.

Factors that are typically important in supporting your success at work are related to:

- **People** in the environment (e.g., co-workers, boss, supervisors)

- **Physical Space** (e.g., layout, space, lighting, temperature, smells, sounds)

- **Resources** (e.g., equipment, devices to assist in completing tasks)

- **Policies** or **Culture** that affects what you can or cannot do in the workplace.

Typical workplace conditions that increase people's success and happiness at work include factors such as:

People

- **Co-Workers**
  - o Typical level of chatting/conversation
  - o Boundaries (e.g., keep to their own desk, take other people's supplies)
  - o Amounts of conflict/harmony in the group
  - o Extent to which you keep to yourself is tolerated
  - o Supportiveness

- **Supervisors**
  - o State clear expectations
  - o Give clear, concrete instructions
  - o Assign a balanced, fair workload to each employee
  - o Understand how to break tasks down
  - o Give clear, helpful feedback in a timely way
  - o Plan ahead and give extra time to complete tasks, if needed
  - o Encourage workers and give praise

Physical Space

- Fragrance policy
- Closed/open offices
- Quiet spaces available
- Flexibility about where to sit and do work
- Separate eating area
- Ventilation
- Fluorescent/incandescent lighting

Resources

- Calendars, weekly planners
- Recording devices
- Computer alarm/buzzer devices
- Highlighters/rulers useful for tracking sentences
- Headphones

Work Policies/Culture

- Clear policy about vacation time, sick leave
- Clear policy about promotions, career paths
- Clear policy about grievances
- Flexible polices about eating snacks during the day or break times
- Allows getting up and walking around, playing music on headphones
- Flexible hours
- Willingness to accommodate requests

Health/Wellness

- A standing desk
- Arm pad to help with carpel tunnel syndrome
- No use of fragrances in restrooms
- Orthopedic chair
- LED lights instead of fluorescent lights
- Quiet break room

Self-Assessment – Identifying Personally Important Work Conditions

1. List the work challenges you have had in the past:

People:

Places:

Things:

Activities:

Health/Wellness:

2. Describe the factors/conditions that contributed to past work challenges.

3. Summarize your personally important work conditions that will help you succeed at work:

People: I do my best when:

| |
| |
| |

Physical Space: I do best when:

| |
| |
| |

Resources: I do best when:

| |
| |
| |

Policies/Culture: I do best when:

| |
| |
| |

Health/Welllness: I do best when:

| |
| |
| |

Developing Optimal Conditions at Work

The easiest method of developing optimal conditions at work is to include the factors that relate to your optimal conditions in your personal criteria for choosing the job in the first place. For example, if you know that your medications make you groggy or slow early in the morning, look for jobs that start later in the day or have flexible start times. If you know you need quiet to concentrate, include the extent of noise as criteria in comparing different job possibilities. Having as many of these factors included in your criteria for choosing a job ensures that you will have much of what you need to perform your best at work. Once you are on the job, it is helpful to figure out conditions you need and what strategies you are going to use to create a supportive work environment.

Developing the optimal conditions at work involves:

1. Developing a Plan
2. Communicating your Needs

1. Developing a Plan

Developing a plan for creating your optimal conditions at work, includes strategies that will support and enhance your ability to be successful at work.

Every job gives you an amount of influence over your environment. Obviously the more influence you have, the more you are able to develop the conditions you need and desire to do your best at work. The less influence you have, the more likely it is that you will have to reach out and ask your co-workers or supervisor to do something to help you get the conditions that will be beneficial for you.

When developing a plan for putting conditions into place, it is helpful to start with the conditions that work well for you, and that are within your control, such as opening a window in your private work area to let fresh air in. Next, if you need certain accommodations, such as a quiet office when you are assigned a cubical in a noisy area, you will need to involve your supervisor.

Disclosure

The Americans with Disabilities Act (ADA) guarantees entitlement to accommodations in the workplace. Accommodations at work are intended to ease your performance of work tasks. Using the ADA requires that you disclose mental health conditions or any other health conditions, when you are requesting an accommodation from your employer. However, the

ADA also protects you if the workplace does not want to accommodate your optimal conditions, if those conditions are covered by the Act.

Sometimes, workers have found that disclosing their mental health conditions in the workplace reduces their anxiety and increases their comfort level at work, which then may help them do their best on the job.

The decision to disclose or not to disclose is a very personal choice that should be made after some reflection and discussion. Choose someone you trust, such as a peer or your employment specialist to help you think through your options with respect to this strategy. If you intend to disclose a health condition to your employer, choosing the best time to disclose is important in helping you develop optimal conditions at work. Many people find that their disclosure is better received in the workplace after a period of time in which they have had the opportunity to develop good working relationships and demonstrate that they are a good worker.

Example

> *After being on the job for three months and developing some friendships, Larry disclosed to his co-worker that he has been in recovery for three years and attends AA meetings.*

2. Communicating your Needs

Communicating your needs is conveying the optimal conditions that will support you in doing your best at work. There are two strategies that help you communicate your needs:

- Requesting Optimal Condition
- Negotiating for Optimal Condition

Requesting Optimal Conditions

Requesting Optimal Conditions is asking for what you want implemented on the job.

It is helpful to consider the best way of framing the reason for your request. Sometimes giving limited information about your health condition is a way of introducing a question about getting a certain condition in place.

Example*: "I have a health condition and take medication for it. Perfume is really hard on my health. I am wondering if there is any possibility of using a different bathroom spray that won't irritate my condition."*

It also can be helpful to frame your question as one of your strengths.

Example: Instead of saying, *"It takes me a long time to do things."* You might say *"I am very thorough, and I want to do my best, so I am wondering if you might be willing to discuss extra time on certain tasks that I am assigned?"*

It is very important to make your request specific. Vague requests, such as *"I need help."*, make it difficult for your employer to know what you need or how to best respond. Asking for the particular changes in a clear and concrete way allows them to better understand and respond to your request.

Example*: "I am having trouble concentrating in the open office space area. Will you support me in moving to a quiet space, so I can finish the project on time?"*

Once you have made your request, it is very helpful to let the person know that you heard what they said and you understand their response. This is reflecting back what a person says to you.

Example: Joanie's supervisor says "*I really don't think you should get special treatment because you don't like perfume.*" Joanie can say: *"It sounds like you are irritated with me because I asked that the bathroom spray be changed."*

 If Joanie's supervisor agrees, Joanie will then be able to explain why she has made this request. For example, she could now answer him by saying: *"It's not that I don't like the scent but the fact is my medical condition and the medication I take for it, makes it hard for me to be around these kinds of smells."*

Negotiating Optimal Conditions

Negotiating is a tool that is useful if your request is difficult for the supervisor or co-worker to agree to. Supervisors often have to balance requests from one worker against the needs of many other workers.

Example: You may request to get up to walk around to help with your concentration and anxiety, but workers might find this behavior distracting and a problem for their ability to concentrate. Another challenge for supervisors might be if your request involves policies or the culture of the workplace.

Example: The vacation policy might be two weeks, and it may be best for you to take your two weeks' vacation at once, but the most anyone takes is one week at a time because there is an unspoken rule about what a 'good worker' should do.

Negotiating is a way to come up with a solution to a problem that is a compromise between both people's point of view, your supervisor' and yours. Negotiating is the skill of coming up with a solution that both people think will work.

The five steps in negotiating include:

1. Demonstrate that you understand the other person's perspective about your request.

2. Explain what is important to you about the request you are making.

3. Find points of similarity between your two perspectives.

4. Name what you disagree on.

5. Come up with a mutually acceptable solution.

Self-Assessment - Developing a Plan for Creating Optimal Conditions at Work

Directions: List your Support Needs – the desirable work conditions (people, place, activity, thing, health support) that are beyond your influence to put into place. Identify the best strategy for obtaining your request. Name who you need to approach. Frame the best way to convey your request. Determine the best time to approach.

Support Needs	Strategy	Who to Approach	How to Present Request	When to Approach

Creating a Work/Life Balance - Things to Know

Work provides us with a purpose. It challenges us every day to be organized, accomplish tasks, communicate effectively, respond positively to change, cooperate with co-workers, and advocate for ourselves. Work also requires that we manage our outside life well. Creating a work/life balance that supports our success at work is critical. A work/life balance is having satisfying time for both success and happiness at work and in your personal life.

There are benefits in creating a work/life balance. Creating a work/life balance increases your personal commitment and accountability to your employer and to your own self. People often find when they have a work/life balance that suits them, they perform better at work, and they are more satisfied with their jobs. They also experience more enjoyment in their personal lives. They experience less everyday stress. They are happier overall.

People with mental health conditions, who create a work/life balance, also experience increased self-confidence and an improved ability to self-regulate their health conditions and wellness.

There is no perfect, one-size-fits-all balance to strive for in creating your work/life balance. Instead, it involves figuring out what is most important for you to achieve each day and to enjoy each day. This balance may need to be adjusted as your life and your responsibilities at work and at home change over time.

It is important to know that work/life balance doesn't mean equal balance. Finding work life balance usually requires that we compromise and practice our activities that we are responsible for and that we enjoy, around our work and home schedules.

Self-Assessment - Checklist for Top Enjoyable Priorities

Directions: Review the following list of daily activities. Consider whether each activity is a priority – something that is important to you because it is enjoyable, and/or something that you are responsible for on a daily basis.

Daily Activity	Priority	Not a Priority
Spending time with family		
Taking care of my family/children		
Having time for household responsibilities: Cooking, cleaning, laundry, recycling, etc.		
Spending time with friends		
Attending social groups		
Exercising		
Playing or making music		
Doing my art or hobbies		
Spending time with my pets		
Practicing my spirituality or religion		
Getting enough sleep		
Having enough time for my self-care routines		
Watching TV or spending time on the computer		
Reading the daily newspaper or reading a book for pleasure		
Other:		
Other:		

Tips and Strategies for Creating a Balance at Work

To be successful at work often requires that we fit our daily life responsibilities and enjoyable activities in and around our work schedule. This often means we have to prioritize our activities. For example, when people are not working, they often spend a lot of time watching TV or on the computer. When people return to work, they often realize that they want spend less time doing that, so they have time each day to do the activities that are more important and more enjoyable, such as spending time with family and having time for exercise.

Here are two examples of people creating a work/life balance:

> *"I found a part-time job that I really like. I work three days a week from 9 to 5. On these days, I need to get up very early to get ready and have enough time to get to work on time. I no longer have time to go for a walk in the morning with my dog, which had become a really important time for me to meditate and take care of myself. So I now have to go to bed earlier on the nights before a workday, so I can get up early. I also realized I would have to plan these walks at the end of the day when I got home from work. It was hard at first because I am tired after a long day at work and would rather just hang out on the couch, but the walk is one of my strategies for managing my stress and health, so it is a compromise I have made in my day so I can be successful at work and maintain my wellness."*

> *"I am looking for a security job in a hospital. A lot of the shifts that are available are 11 pm to 7 am. My sleep and my time with my girlfriend is really important to me, so I am trying to figure out how I can take one of these jobs and do well at it, as well as get the sleep I need and have time with my girlfriend. I usually go to the gym in the mornings, but I think I will have to find another time to do that as I will need to sleep in the mornings when I get home. Then I can go the gym in the afternoon and spend a little time with my girlfriend before I head out to work. I won't have as much time to spend on the computer, but having a job is worth giving that up."*

Many people have health routines such as getting enough sleep, exercising, connecting with support, that are important strategies for staying well. These strategies support job success, so it is essential to build them into a healthy work/life balance.

It also is important to plan an enjoyable or health routine into your daily work life. These activities support your ability to be successful at work. Creating a balance at work helps people develop a routine that increases their well-being, which in turn, supports their job success.

For example, many people make a point to take a scheduled break from their work responsibilities to have a meal or snack with co-workers. This is an opportunity to take a break from work, connect with your co-workers, enjoy non-work conversation, and eat a meal. Other people prefer to spend time alone reading the paper or playing solitaire on the computer.

These activities are ways for people to recharge for the remainder of the day.
People then return to work nourished physically and emotionally. They are able to finish their work with more stamina and productivity.

Self-Assessment – Creating a Balance at Work

Directions: Use the following checklist to identify activities you might find supportive or enjoyable to your wellbeing and job success while at work.

Activities	I'll Do	I'll Try	Not for me
Talking with co-workers about non-work topics			
Exercising on a break			
Using a relaxation strategy on a work break			
Checking my e-mail and surfing the internet on a break			
Playing computer/phone games on a break			
Eating lunch			
Calling friends, family, or job coach on breaks			
Attending peer support groups at lunch, such as AA, NA, etc.			
Listening to music, reading on breaks			
Other:			
Other:			

Tips for Creating a Work/Life Balance

1. Identify what matters most to you in terms of your personal responsibilities and activities that you enjoy.

2. Drop those activities that are not as important to you to do or enjoy each day.

3. Write out a schedule of your work day and then add in your life responsibilities, health needs, and enjoyable activities that are priorities for you each day around your work schedule.

4. Add in an activity to your work day that creates balance during the day and allows you to practice self-care, such as a midday walk at lunch, eating lunch with co-workers, or doing the crossword during a break.

5. Ask someone, a family member, co-worker, or supervisor, if you need help in brainstorming ways to fit in activities that are important to you to help create a work/life balance.

6. Plan self-care, fun and enjoyable activities into your daily schedule. This will help you be more successful at work.

Summary

- Creating your optimal conditions at work means figuring out what you need to do your best at work and then making a plan to get it.

- The Americans with Disabilities Act of 1990 is legislation that protects the rightful access to work for persons with disabilities. This law prohibits an employer from discriminating against a qualified individual in any employment issue because of their disability.

- Disclosure is a strategy to support your job success. It is a very personal decision.

- Negotiating for work conditions can help you be successful.

- Creating a work/life balance involves finding achievement and enjoyment at both work and in your personal life.

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Vocational Illness Management and Recovery: Wellness For Work

Implementation Guide

Adapted by:

Marianne Farkas, Dori Hutchinson,
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Table of Contents

Introduction to the Implementation Guide

What is the Implementation Guide?

The Implementation Guide is designed as a supplement to:

1. *Vocational Illness Management and Recovery (VIMR): Wellness for Work Participant Workbook*

2. *VIMR Provider's Guide*

Who is the Implementation Guide for?

Administrators, program managers, and supervisors may find the content of this Implementation Guide useful in their work to support the vocational aspirations of people in recovery.

Why use the Implementation Guide?

The Implementation Guide includes information and tools designed to support the use of Vocational Illness Management and Recovery (VIMR) within organizations. The Implementation Guide does not supplant VIMR training, rather it supplements the efforts of administrators, program managers, and supervisors as they consider implementing ways to support individuals with vocational aspirations through the use of VIMR.

When should the Implementation Guide be used?

- **Before VIMR training:** The Implementation Guide may help organizations assess their readiness for training in VIMR. The Guide provides examples of desirable program characteristics that enhance the effectiveness of VIMR training.

- **During VIMR training:** The Implementation Guide may help guide supervisors, program managers, and administrators in how to best support their training participants as they engage in the process of developing expertise in VIMR.

- **After VIMR training:** The Implementation Guide may help administrators, program managers, and supervisors incorporate VIMR into their overall array of services.

Vocational Illness Management & Recovery (VIMR):
Wellness for Work: Concepts

Recovery

Historically, mental health professionals did not believe that recovery from a major mental illness was possible. Schizophrenia, for example, was believed to have an inevitable downward course over time, based on the work of Emil Kraepelin (1917). The 'medical model', a term attributed to the psychiatrist R. D. Laing, became the guiding framework underlying mental health treatment systems, particularly for those with major mental illnesses. As such, the primary elements of good care within the 'medical model's' frame of reference included: impairment driven assessments leading to problem solving by experts; identification of specific treatments for the identified issue; an implicit assumption that the client role is limited to that of a good reporter, providing correct information in order that the correct treatment be delivered, as well as compliance with the experts' instructions (Brown, Brown, & Sharma, 2005). While many individuals with mental illnesses had protested their treatment in the past and demanded to be dealt with in more humane ways (e.g., *Petition of the Poor and Distracted People in the Bedlam Asylum*, 1620), the advocacy movement of individuals with personal experience of mental illnesses or behavioral health conditions[1] arose during the 1970's and 80's, in part in reaction to the assumptions and practices of the medical model (e.g., Chamberlin, 1978).

Recovery emerged as a vision for mental health services based on first-person accounts of individuals recovering and the results of longitudinal studies; at first mostly for those with a diagnosis of schizophrenia, but later replicated for individuals with other diagnoses (e.g., Harding & Zahniser, 1994; Harrison, Hopper, Craig, et al., 2001; Huber, Gross, & Schüttler, 1979; Ogawa, Miya, Watarai, et al., 1987). Current meta analyses and summaries of recently conducted studies continue to document that individuals with the most serious forms of mental illnesses can and do recover from the effects of their illness (Warner, 2010); and indeed, most have the potential to achieve long-term remission and functional recovery (Zipursky, Reilly, & Murray, 2012).

Recovery has been defined in many ways, but the most often cited definition was developed by William A. Anthony, of the Center for Psychiatric Rehabilitation at Boston University: "Recovery involves the development of new meaning and purpose as one grows beyond the catastrophic effects of mental illness." (Anthony, 1993). The Substance Abuse and Mental Health Services Administration (SAMHSA) went on to create a consensus statement to define recovery: "A process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential." (SAMHSA, 2012). As these

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[1] VIMR uses 'person-first' language, in referring to individuals being served, rather than language focusing on the illness or diagnosis. We use the term 'individuals with mental health conditions' or 'people in recovery', to include individuals with serious mental illnesses or having both substance use disorders and serious mental illnesses.

definitions point out, recovery involves not only the reduction of symptoms, but also the development of meaning and purpose in life. In fact, some have suggested that the essence of the definition of recovery is 'claiming or reclaiming a meaningful life' (Farkas, 2007; Slade, 2009). In many industrialized societies, an essential avenue for the development of a meaningful life is through work.

Vocational Recovery and Wellness

Vocational recovery can be viewed as an extension of mental health recovery with an emphasis on work as a 'vocation' that increases health and job satisfaction (Hall & Chandler, 2005; Svanberg, et al., 2010), as well as social connection and a sense of contributing to the overall economic and social climate (Blustein, 2008). This description of vocational recovery is more consistent with the idea of 'rebuilding a life', 'rebuilding self and hope for a better future', which are main themes in service users' definitions of recovery (Pitt, et al., 2007). Vocational recovery is the personal process of finding purpose, meaning, and enjoyment in work. Work is an important part of the recovery experience as it provides people with a valued role and resources to live their lives as they choose. People who live with mental health conditions want to work and can work successfully in careers of their choice (Rogers & MacDonald-Wilson, 2011).

VIMR is sub-titled 'Wellness for Work', because it includes a strong emphasis in its approach to support the hope and rights of people with mental health conditions to thrive with wellness in meaningful work. Wellness is critical for all people to achieve their life goals and encompasses more than the state of 'not being ill'. 'Wellness at work' is especially important because it supports people to thrive and succeed at work. Wellness also is a very personal and self-defined state of being that encompasses eight dimensions: physical, mental, social, emotional, financial, spiritual, community, and environmental (Hutchinson, & Swarbrick, 2014).

The Core Values of Vocational Illness Management and Recovery

The core values of VIMR are those upon which recovery-oriented services are ideally based (Farkas, 2007; Farkas, Gagne, Anthony, et al., 2005).

- **Hope:** First and foremost, the process of leading a person through VIMR involves inspiring hope that work and wellness is not only a possibility, but that they can be everyday realities for people with mental health conditions. This message is critical for empowering people to direct and determine their own lives. It is vital that providers using this curriculum, teach and support people by having confidence that they will work, and that they will work with wellness. Providers are most successful when they also feel hopeful that the person will achieve their goals, even if the person is pessimistic or lacking in hope.

- **Person Orientation:** VIMR is based on respect for individuals in recovery, including the notion that, like all people, people in recovery have strengths, talents, and interests—not just limitations and illness-related characteristics. Recovery-oriented providers are interested in people's strengths, looking for ways to engage them in their interests, and use their talents for recovery. It is important for individuals with mental health conditions to know that they have strengths, interests, and talents, as they often have been the recipients of mental health services that are predominantly focused on their deficits. Empowering individuals in vocational recovery involves reinforcing and using their strengths to help them choose, get, and keep meaningful work. Assuming that individuals with mental health conditions have the capacity to learn new information, involving them in determining their work interests, soliciting their ideas about the strategies they are interested in learning and using, and helping people to reflect on things they did well in their previous experience are some ways in which the VIMR curriculum focuses on a person orientation.

- **Self-Determination:** It is essential for providers to support the self-determination of the person they are assisting, to achieve wellness at work. Providers recognize that persons with mental health conditions have a right to choose what goals in work and wellness are important to them and how they want to proceed in achieving these goals. Providers assist and support people in VIMR to make informed choices about the content that is relevant to their goals and to their experiences. A constant theme in VIMR is providing information, options, and strategies to expand people's awareness of options they can choose to use to achieve wellness at work.

- **Partnership:** The spirit of the relationship underlying delivery of VIMR is that of partnership. The provider and the person work side-by-side in an equal relationship that reflects respect for one another. The provider's role is to facilitate and support the person's use of the information and strategies in his or her life and at work. The person feels respected by the provider for his or her expertise, experiences, and perspectives, as well as feeling supported in his or her decision-making. The provider also is respectful and aware of cultural values, practices, and attitudes that the person lives by and is inclusive of the person's cultural worldview.

The VIMR Intervention and Provider Training

What is the purpose of VIMR?

The focus of the VIMR curriculum is providing people with inspiration, information, and the strategies that they want, to support their goal of successful employment.

Broadly, the goals of VIMR are to inspire hope that meaningful work is possible; to work in partnership with a person to achieve wellness for work; and to provide people with information and teach them strategies that they can choose to use to support their wellness for work, whether they are considering work or are in the process of choosing, getting, or keeping work.

While final results are not yet known, preliminary analysis of the perceived benefits of VIMR from the clients' perspective include: developing a positive outlook and motivation to work; developing self-awareness and identifying areas for personal growth; improving anger and impulsivity management; learning stress management and managing personal interactions at work, as well as the perception of an improved capacity to keep a job (Gidugu, Russinova, Hutchinson, & Farkas, 2015).

The importance of empowering people to work towards their personal goals of work and wellness is the heart of VIMR. Each module guides the provider to support personal goal setting that is specific, measurable, and achievable. This constant provider encouragement helps the person to move forward with success towards wellness at work.

Who is VIMR for?

The IMR program upon which VIMR is based, was developed from a review of empirically-validated approaches to teaching illness management to people with schizophrenia, schizoaffective disorder, bipolar disorder, and major depression (Gingrich & Mueser, 2010; Mueser, et al., 2002). Since the original studies, IMR has been tested with a broader group of participants, inpatients, outpatients, and those living independently in the community, including individuals of all races and a wide range of cultures (Gingrich & Mueser, 2010). VIMR was developed for and tested with a wide range of participants working with employment specialists, including individuals with mood disorders, psychotic disorders, post-traumatic stress disorder (PTSD), and others.

Participants in VIMR can be anyone with a mental health condition who may be interested in working. Participants do not have to accept their diagnoses to be able to use VIMR. VIMR providers use whatever language is used by the participant himself or herself to describe the experience. As is true for IMR, participants do not need to be clean and sober as a prerequisite for their participation in the VIMR program. Participants may or may not be currently in a vocational rehabilitation program, such as supported employment. Simply being interested in working is sufficient for engagement in VIMR. Those who also are working with an employment specialist may be better able to use what they learn from VIMR to pursue their goals.

People who have experienced mental health conditions often have been told to discard their dreams because the illness will prevent them from accomplishing what they hope for in their

lives. Determining one's own meaningful goals, and then accomplishing them, is an essential part of recovery.

VIMR also can involve significant others in the intervention, when permitted to do so by the individual in recovery. A support group can be developed for family, friends, and the person in recovery to share concerns and review progress towards recovery goals. Family members, friends, partners/spouses, case managers, employment specialists, religious organization members, or anyone else whom the individual in recovery identifies as significant to his or her recovery can be included as a 'significant other'. Involvement in VIMR may be helpful in improving communication between significant others and the individual as both learn more about the illness, its management, and as the person develops specific recovery goals.

The Curriculum

Vocational Illness Management and Recovery is an educational curriculum. The value of an educational approach when helping people achieve their recovery goals is that the process immediately provides a valued role for the person. An educational approach invites the person to be a student rather than a 'patient', 'consumer', or 'client'. This approach values the fact that learning is a lifelong process that helps people achieve their goals. Learning reflects the hope and expectation that people will work with wellness.

The curriculum is divided into nine modules. The order of the modules is flexible and is presented according to what is most relevant for the individual being served. It is recommended that each person start with Module 1, as it provides an overview of recovery in general as well as vocational recovery, and that it sets the stage for the other modules.

VIMR can be delivered individually or in a group format. A VIMR group involves no more than four to six participants at a time. Although presenting VIMR in a group format allows for the intervention to be delivered more economically, it loses some of its intended flexibility with respect to being able to match the modules presented with the individual's interests and needs.

Each module follows the same format beginning with 'Things to Know' that introduces the topic, Examples of experiences of individuals with mental health conditions with the topic, Tips and Strategies, Self-Assessments, and a Summary Worksheet. Some modules include a Personal Plan.

The Modules include:

Module 1: Recovery and Vocational Recovery: Facilitates the person setting goals towards recovery and work and identifying personal wellness strategies.

Module 2: Practical Facts about Mental Health Conditions and Work: Teaches information about mental health conditions, symptoms, and wellness strategies that individuals can use personally to succeed at work.

Module 3: The Stress Vulnerability Model and Vocational Recovery: Teaches about the stress vulnerability model and how stress impacts their health and success at work.

Module 4: Using Medication Effectively and Avoiding Drugs and Alcohol for Vocational Success: Teaches information about medications and how they may impact work performance, and includes exercises to help people to identify strategies to minimize substance use or choose a sober lifestyle.

Module 5: Coping With Challenges and Symptoms at Work: Facilitates the identification of potential problems at work that may interfere with success and happiness as well as develop a plan for coping with persistent symptoms.

Module 6: Coping with Stress at Work: Helps to build effective strategies for dealing with stress at work, including stress hardiness as a wellness tool for success at work.

Module 7: Building Social Relationships at Work: Helps to identify supportive relationships and how to strengthen relationships at work to be successful and satisfied, including creating a support plan for work.

Module 8: Preventing Relapses: Facilitates individuals to identify personal situations that may prompt illness and relapse, including personal warning signs and wellness strategies in a relapse prevention plan for work.

Module 9: Performing Your Best at Work: Teaches information and strategies for creating optimal conditions at work to achieve wellness and employment success.

Structure of the Intervention

Frequency and Length

The amount of time needed to complete the nine modules varies based on the frequency of sessions, the learning pace of the participants, and whether the intervention is delivered in a group or individual format. The number of sessions also may vary when the intervention is tailored to an individual, depending on factors, such as the participant's level of need for/and interest in a particular content. For example, a person who already has worked frequently in the recent past, may know a lot about typical job accommodations and issues of disclosure. This individual will need fewer sessions to move through Module 9 than someone who has not had that experience. Sessions tend to last between 30-60 minutes at a time. Typically, VIMR takes approximately three to five sessions to complete each module.

Group sessions may take 60-90 minutes each, depending on how many participants are in the group. In settings, such as day treatment programs, clubhouses, or specific employment programs, participants tend to meet two or three times per week. Frequent group sessions help participants to consolidate their learning.

Participant Follow-Up Practice

Each session includes education within the session as well as follow up practices or tasks to consolidate or process what was learned. There are two types of home practice in the VIMR program: review or practice of material taught in the module and steps towards personal goals. If the participant is willing, significant others can help support participants in their attempts to follow through on home practice. Additionally, significant others can be helpful in implementing or supporting a step in the participant's plan to achieve his or her goal.

For Administrators

Introduction

Do we have the staff we need to deliver VIMR?

As an administrator interested in introducing VIMR into an agency, you can begin best by having or hiring the best staff to deliver the intervention. People who are the good candidates for providing VIMR are those who have some training in or understanding of the experience of mental health conditions; hold a similar set of values about the importance of work as a pathway to recovery, as well an understanding of it being part of many individuals' personal vision for a meaningful life. The best VIMR practitioners hold values congruent with VIMR: the importance of dealing with people as individuals who have strengths, talents, and interests as well as deficits; the critical quality of partnership in the recovery journey; the importance of supporting people's right to make choices about their own life; and the fundamental value of holding hope for people being served, even if they themselves have lost their hope (Farkas, et al., 2005; Farkas, 2007).

What is involved in training staff in VIMR?

Structure of the Training

Training in VIMR usually consists of two to three days of in-person training for a group of up to 10-12 providers per trainer. In-person training focuses on familiarization with the modules and an initial understanding of the overall teaching principles (i.e., motivational strategies, educational methods, and cognitive behavioral techniques), which are critical to the success of the intervention.

In-person training is followed by supervised practice. Supervised practice involves the trainee using the Modules with individuals they serve and then collaborating with the person in recovery to create and follow up on practice exercises. Trainees bring their experience using the Modules with their clients to the supervision and get feedback on their efforts from the trainer/consultant or a trained VIMR supervisor. Supervised practice can take anywhere from 6-12 months to achieve provider expertise in VIMR teaching principles, as well as the content, depending on the frequency of the supervisory sessions. Typical frequency of feedback sessions is once every two weeks for six months and once a month for the following six months.

After some experience and supervision in applying the VIMR approach, some providers may benefit from engaging in additional training to further enhance their level of competency. Specialized training can include refining those strategies with which staff feel less confident, i.e., motivational enhancement, cognitive behavioral therapy, or educational strategies. Additional training also may be helpful to expand the cadre of VIMR practitioners or to provide

support in helping the VIMR practitioner team to create a VIMR alumni group to reinforce the gains participants have made through the use of VIMR.

Training Participants

Administrators selecting trainees to engage in VIMR training need to consider staff roles, staff interests, and agency priorities. VIMR can be delivered by mental health workers, rehabilitation providers, occupational therapists, social workers, peer providers, case managers, or employment specialists. Each agency using VIMR finds a different balance to the benefits and costs of asking providers in a particular role to become experts in VIMR. For example, Assertive Community Treatment Case Managers typically have a vocational provider on the team. That provider can be trained to deliver VIMR along with other forms of supported employment, such as the Individual Placement and Support Model (Becker & Drake, 2003), depending on the demands of caseload size. General case managers, on the one hand, may have the advantage of being in frequent contact with those they serve, so that they are able to respond to any interest shown by their clients in work or vocational issues. On the other hand, providers, such as those case managers whose main function is to respond to urgent or practical issues, may find the dual role difficult to manage.

Clinical personnel working with people who are in an employment program, and who are interested in supporting their clients' employment goals, may be good candidates for VIMR training. While Employment Specialists have the necessary background in vocational issues and may find VIMR helpful to the work they already do in helping people in recovery choose, get, and keep jobs; they also may find that they do not have sufficient time to perform both supported employment and facilitate vocational illness self-management and recovery.

Individuals with personal experience of mental health conditions, who are clinicians or peer providers interested in employment and vocational recovery, and who have had training beyond that of the basic practice of peer support, contribute added knowledge and expertise that enriches VIMR delivery. Peer Support workers, who have not had such additional training beyond their grounding in peer support, may require further instruction in order to learn to incorporate the requirements of VIMR to educate, coach, and provide cognitive restructuring within their practice.

Organizational Self-Assessment:
Are we ready to provide a training program in VIMR?

Readiness for training in VIMR depends on a limited number of factors: the best trainees, congruent fundamental agency beliefs, and logistical support for training. These factors increase or decrease the likelihood that the training will be feasible and/or successful. The following assessment will help you as an agency decide whether or not you are currently ready to begin a training program in VIMR.

Table 1 (on the next page) presents an assessment that provides you an opportunity to reflect on your organization at this time and to decide whether a specific ingredient is present, partially present, or absent. This assessment is meant to provide you with some guidelines in making a decision about beginning VIMR training or not. A key to each item and the meaning of each available score (i.e., 1, 0, or -1) follows the assessment chart.

Table 1: Organizational Self-Assessment of Training Readiness

FACTORS	ITEMS	Item Exists (Score = 1)	Item Partially Exists (Score = 0)	Item Does Not Exist (Score = -1)
Best Trainees	1. Providers interested in the employment domain.			
	2. Providers with some interest in learning to help people with their hopes, dreams/aspirations, as well as with their mental health conditions.			
Fundamental Beliefs	3. Organizational culture believes in vocational recovery as an appropriate mission or mandate.			
	4. Organizational culture provides a service delivery context based in recovery values.			
	5. Organizational culture acknowledges importance of psycho-education.			
Logistical Support for Training & Follow-Up Practice	6. Time to participate in training.			
	7. Structure to support practice, including an employment program.			
	8. Supervisors/Key personnel willing to learn or are knowledgeable about VIMR.			
	Column Totals	**Total +1's**		**Total -1's**
	(Total '+' scores and '−' scores)	**TOTAL SCORE:**		

Training Assessment Key

Item 1. Providers interested in the employment domain.

Staff with clinical skills (whether professionals with experience of being in recovery or without such experience), who are interested in employment as a pathway to recovery, form the nucleus of those who find VIMR training to be relevant and interesting.

While a training group of 10 is preferable, we recommend that there be a minimum of 4-6 providers, interested in issues related to helping clients manage their mental health condition for the purpose of choosing, getting, or keeping work, be available for training. A group of at least four to six people can participate in meaningful role plays during the training as well as provide important interactions that make training more engaging and easy to apply. Finally, they can form a support group after the training, increasing the probability that VIMR will be used.

Note that training in VIMR has been done in organizations when there was only one interested staff person to work with. In this case, however, training was delivered more in the form of personal supervision than actual training, and the agency in question was very small. A large organization with only one staff person interested in training becomes a challenge not only for the training itself, but for the implementation of VIMR afterwards. The following questions become critical to implementation: Who else is supportive of the VIMR practitioner? How many participants actually can be seen if there is only one person interested? What happens if that person is ill? Or leaves? While it is possible for one person in an agency to be supervised in and then deliver VIMR, it is not optimal.

Score as follows the extent to which you have a sufficient pool of the best candidates for VIMR training:

> **Score '1': Item exists.** Six or more skilled staff with an interest in wellness for work are in place.
> **Score '0': Item partially exists.** The organization has four or five staff interested in supporting people in choosing, getting, and keeping employment.
> **Score '-1': Item does not exist.** The organization has fewer than four available staff for training in VIMR.

Item 2. Providers with some interest in learning to help people articulate and achieve their hopes, dreams, or aspirations, as well as helping with their mental health conditions.

In order to train staff in VIMR, it is important that staff feel some dissatisfaction with the knowledge and skills they currently have. Providers who feel content with the services they deliver are less interested in learning new skills. Providers also must have some interest in learning to help the people they serve with their vocational hopes and dreams as well as their

mental health issues, in order for VIMR training to be meaningful and seen as desirable. If staff only have an interest in helping service recipients deal with their illness-related symptoms, rather than focusing on their wellness or the achievement of goals related to their vocational hopes and aspirations, then the basic values and intention of VIMR will not correspond to what staff believe their mandate to be.

Score as follows the extent to which there is interest in and enthusiasm among the staff being considered for training, in learning how to support people around their vocational aspirations, including helping them to manage their mental health conditions.

> **Score '1': Item exists.** A majority of the potential trainees indicate that they are interested and enthusiastic; no one is opposed to engaging in such training.

> **Score '0': Item partially exists.** Approximately half of the potential trainees indicate that they are interested and enthusiastic; no staff are opposed to engaging in training.

> **Score '-1': Item does not exist.** Less than half of the potential trainees indicate that they are interested and enthusiastic, and/or some staff are opposed to engaging in training.

Item 3. Organizational culture believes in vocational recovery as an appropriate mission or mandate.

A belief that employment is important to recovery is key to learning about and offering supports through VIMR. When negative messages about work (e.g., possibility of stress, induced relapse, potential loss of benefits, worries about the person's lack of resilience) are transmitted to the people served by the staff, particularly those in the program in which VIMR is to be delivered, people receiving services are less likely to consider employment as part of their recovery, and VIMR training becomes irrelevant to the staff. While it is very helpful for the organization as a whole to believe in vocational recovery and to support employment as a reasonable and important goal to pursue, it is critical for the program in which VIMR is to be implemented to follow through on their beliefs.

Score as follows the extent to which the organization communicates the possibility of vocational recovery for the individuals it serves.

> **Score '1': Item exists.** Program/service unit in which VIMR is to be implemented has leadership/senior management who indicates support of the belief in vocational recovery through written documents (e.g., policies, procedures) and/or verbal statements (e.g., team meetings, community meetings, supervision, etc.).

> **Score '0': Item partially exists.** Organizational leadership/senior management indicates the belief in vocational recovery through policy or procedures, written or verbal, even

though the specific program in which VIMR is to be implemented does not indicate the belief.

> **Score '-1': Item does not exist.** Organizational leadership/senior management either make no statements, or program or organizational leadership/senior management make negative statements about the possibilities of vocational recovery.

Item 4. Organizational culture provides a service delivery context based in recovery values.

VIMR's view of recovery is based on the importance of a belief in people having strengths, talents, and interests as well as areas of growth; the importance of involving individuals with mental health conditions as full partners in all processes; the importance of facilitating individuals with mental health conditions to make their own informed decisions or choices; and lastly, the importance of inspiring hope for the future in order for recovery to occur (Farkas, 2007).

An organization that expresses these core values in its general service delivery is more likely to be supportive of the goals and processes of VIMR than an organization that does not.

Score as follows the extent to which the organization communicates the importance of recovery values through its infrastructure.

> **Score '1': Item exists.** Organizational leadership/senior management indicates support for most, if not all, of the recovery values through written policies or procedures and/or verbal statements made in team meetings, case conferences, etc.

> **Score '0': Item partially exists.** Organizational leadership/senior management indicates support of some recovery values through written policy or procedures and/or verbal statements made in team meetings, case conferences, etc.

> **Score '-1': Item does not exist.** Organizational leadership/senior management either make no statements or make negative statements about the importance of recovery values in driving organizational practices.

Item 5. Organizational culture acknowledges importance of psycho-education as a critical modality for change.

VIMR is essentially a psycho-educational intervention for illness self-management and the achievement of personal recovery goals. If an organization includes psycho-education as an important intervention, or at a minimum, believes that teaching knowledge and skills is both possible and a critical tool for individuals with serious mental health conditions to improve, VIMR will be viewed as an effective intervention.

Organizations in which the prevailing culture accepts the notion that people can learn information, skills, and how to obtain the supports necessary to have meaningful employment, are organizations that are more likely to support VIMR. If psycho-education is not seen as an effective mechanism of personal change, VIMR will not be organizationally supported, making VIMR training an ineffective tool.

Score as follows the extent to which the organization values psycho-educational interventions as effective mechanisms of change.

> **Score '1': Item exists.** The organization demonstrates that it values psycho-education in that it already delivers other psycho-educational interventions among its service modalities for individuals with serious mental health conditions.

> **Score '0': Item partially exists.** Other psycho-educational interventions are not delivered for those with serious mental health conditions, but may be used as interventions for other client populations; and/or organizational leadership/senior management indicates the support of such a belief through verbal statements (e.g., team meetings, community meetings, supervision), if not in written policies.

> **Score '-1': Item does not exist.** Other psycho-educational interventions are not delivered in any unit of the organization; and organizational leadership/senior management either make no statements or make negative statements about the importance of education about illness and recovery as an important tool in its service delivery.

Item 6. Time to participate in training.

VIMR requires participants to remain in a classroom for two to three days, usually in one continuous period, but sometimes over the course of a few weeks. Within this time, participants engage in discussions, learn new skills, and practice new skills.

VIMR training is most effective when participants are released from regular duties during the classroom and skill support sessions, while they focus on the development of new skills, without having to attend to telephone calls or other meetings and agency business. Training sessions are designed in collaboration with the agency so that training intervals (i.e., in two to three day blocks or in half-day sessions) best fit the agency's schedule as much as possible.

Score as follows the organization's ability to release participants during training.

> **Score '1': Item exists.** The organization can release participants for all training time.

Score '0': Item partially exists. The organization expects participants to take calls or answer emails as needed during training time.

Score '-1': Item does not exist. Participant duties remain as usual throughout the training, and participants are expected to be in the classroom as much as possible, when not needed for agency business.

Item 7. Structure to support practice, including an employment program.

VIMR is a skills-development training program. Outside of the training room, participants are asked to practice new VIMR skills and utilize VIMR tools with the individuals to whom they deliver services. They also are asked to reflect on the work they have done in order to generalize what they learned in the classroom to their actual practice. In order to develop their expertise, participants engage in skill support sessions with trainer/consultants by telephone, webinar, or other methods of communication, to receive feedback and discuss their reflections. The consultation sessions are scheduled flexibly, however, they usually are held every two weeks and may last from six months to one year in duration.

Organizations, effective in getting expected staff skill and knowledge outcomes, plan ahead to support trainees in this work. The majority of the assignments are incorporated into daily practice. Therefore, organizations may need to consider how VIMR activities will be paid for within existing service components and billing requirements or create new categories for billing to occur, if billing is a consideration for the organization. While consultation time via telephone or other methods is limited and usually only occurs twice a month, the organization may need to plan to provide staff coverage for services during the consultation time. In addition, VIMR usually is conducted in conjunction with an employment program or with employment specialists. Part of trainee practice involves communication with such programs and incorporating and/or supporting the work of employment specialists with progress made in VIMR.

Support or practice includes figuring out what program the trainees will be working or collaborating with. Is there an on-site employment program? If not, is there an employment program most of the trainee's clients will be working with? Are there agreements between the organization and this program so that the trainee can practice in collaboration with the employment specialist? Is the trainee delivering employment services? If so, how will practice occur? Organizations that are used to providing in-service training for staff usually have the experience in creating realistic plans to support staff in training.

Score as follows the extent to which the organization has a plan in place to support trainee practice with individuals served by the organization:

Score '1': Item exists. The organization has a plan or has standard methods of supporting learning practice, with an identified employment program or role in place that can accommodate VIMR.

Score '0': Item partially exists. Organization is willing to develop a plan to support trainee practice.

Score '-1': Item does not exist. Organization expects participants to absorb extra time and effort on their own schedule and/or may expect participants to role play only with each other or with someone outside the service. There are no employment programs with whom the participants can collaborate.

Item 8: Supervisors/key personnel willing to learn or are knowledgeable about VIMR.

Experience has shown that agencies and organizations in which the key personnel are well versed in VIMR are more effective at supporting staff who are delivering VIMR. Key personnel may only need to understand the basic principles, concepts, and processes, without being skilled themselves in its delivery.

Organizations without knowledgeable key personnel, but who are willing to train not only their front line staff but also managers, trainers, and other key personnel, are more effective at delivering VIMR over time than those who do not. Trained administrators and managers can operationalize the VIMR initiative through procedural updates and organizational mandates.

Skilled in-house trainers/supervisors can support skill growth by adding to and updating new skills. Training organization supervisors in VIMR is helpful to consider as part of embedding VIMR as an organizational practice. Supervisory training in VIMR enhances the basic VIMR training because these supervisors will be able to provide appropriate ongoing feedback to strengthen practices assigned by VIMR trainers as well as help to support staff in putting their knowledge and skills into practice after the training is over.

Score as follows the extent to which the organization has VIMR supervision available.

Score '1': Item exists. The organization has identified key personnel/supervisors willing and able to participate in VIMR training/VIMR supervisor training.

Score '0': Item partially exists. The organization would like to involve key personnel/ supervisors in training, but there are insufficient numbers of key personnel/supervisors available and willing to do so.

Score '-1': Item does not exist. Organization does not have the capacity for this kind of involvement and has no plans to obtain VIMR supervision in the near future.

How do I understand the score we got?

Once you have totaled the '+1' column and the '-1' column, add the two scores. The remaining score is your agency's training readiness score. The Table below provides an interpretation of the final score.

Table 2: Understanding VIMR Training Readiness	
Scores: 5-10	Organization is ready to begin VIMR training.
Scores: 2-4	Organization may be ready to begin VIMR training, but may need to make some adjustment or may need assistance to be able to deliver the most effective training.
Scores: <1-1	Organization is not ready to begin VIMR training at this time.

The Scoring key in Table 2 is not prescriptive, but rather provides administrators with suggested ranges of scores and their possible interpretation.

Based on the self-assessment, you may decide to begin training in VIMR, take more time to prepare for training by addressing the factors that are not currently strong, or may decide that VIMR training is not something the organization is ready to invest in at this time.

If you decide that your organization is sufficiently interested in moving ahead, but needs more preparation time, you can engage in some of the preparation yourself and/or decide to obtain consultation to support the organization[2].

Developing Training Readiness

What if we don't have the right trainees to begin VIMR training?

If there are not four or more staff who are interested in vocational wellness as a pathway to recovery, it may be helpful to create a discussion around the ideas in VIMR. You may want to

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[2]Consultation on VIMR overall can be obtained through Boston University, Center for Psychiatric Rehabilitation website: cpr.bu.edu/develop

provide disinterested staff with some resources about the importance of these areas to peoples' recovery journey. Articles, video interviews of people in recovery and their perspectives on work, and other websites are available online at the Employment and Vocational Recovery Repository (cpr.bu.edu/resources). Connecting with a local peer-run organization or advocacy organization and inviting members to come and speak with staff about vocational recovery, and/or recommending resources also can be very helpful in engaging staff[3].

These suggestions may assist in shifting perspectives with staff who have been focused primarily on helping people overcome symptoms, rather than focused on supporting them in developing their personal recovery goals. Seeing is believing. Staff who are willing to read about recovery, recovery research, or listen to those who have recovered may find themselves more willing to support a person's aspirations. Staff who are not willing often are worried about how seemingly unrealistic employment aspirations may be and question whether supporting a person move towards their goals might be giving them 'false hope'.

Readings also may be helpful in shifting staff attitudes. Some readings, such as those of Albert Bandura (1997), indicate that expecting positive outcomes produces greater gains, even when individuals' skills are not sufficient to the tasks, in comparison to not expecting such outcomes. Other studies investigate goal achievement, such as one that researched goal setting among hospitalized individuals and found that they were not only able to set personal goal but, with interventions, able to achieve them (e.g., Swildens, 2011). The Employment and Vocational Recovery Repository (cpr.bu.edu/resources) has a section designed for providers and may be a source of suggested readings on employment issues.

What if our organization doesn't hold the fundamental beliefs needed to begin VIMR training?

As the administrator, if you believe that vocational recovery is possible and that the domain of work is critical to the recovery journey of the individuals served, but do not have much support for this vision within your organization, strategies suggested to strengthen staff interest are recommended. Providing resources (e.g., articles, videos, website links) are found in the Employment and Vocational Recovery Repository (http://cpr.bu.edu/resources/recovery-repository), or other websites can be useful in sparking interest in senior management staff. Other strategies, such as having organization-wide discussion groups about work and bringing in speakers in recovery who can speak to the impact that work has had on their own recovery, can be effective in increasing an organization's beliefs in the importance of work.

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[3] Organizations, such as the National Empowerment Center, www.power2u.org, or the Transformation Center, transformation-center.org, or iNaps at http://inaops.org, are organizations that may help you find such resources.

Changing some practices, such as including a section in the intake procedures that is focused on work aspirations and then discussing these procedures in team meetings and agency program evaluations, are other important strategies some organizations have used to improve the focus on work.

Organizations exist that have experience in providing consultation in improving the 'work orientation' of agencies serving individuals with serious mental health conditions[4]. Some of these organizations, like Boston University's Center for Psychiatric Rehabilitation, specifically provide online as well as in-person technical assistance to improve services for vocational recovery (cpr.bu.edu/develop).

What if we don't have logistical support for the follow up?

Practicing and using the new knowledge and skills being developed in the sessions are key to actually developing expertise in VIMR. Thinking through the practicalities of having staff practice something new with the people they support goes a long way to making the training effective. Including key personnel in a Training Work Group also can be helpful in solving organizational problems that may come up when thinking out such a plan.

Having key personnel knowledgeable about VIMR will ensure that their solutions actually do support the training. Holding a brief introductory seminar on VIMR, before deciding to go ahead with the training program, can help key personnel understand the training process and content sufficiently to contribute to working out a support plan.

Key personnel may wonder why they are being asked to participate in some form of training about VIMR. Senior staff, program managers, and in-house trainers are better able to help participating staff follow through on both their training practice and in their use of VIMR skills after the training, if they understand what VIMR is and is not, as well as understand the concepts, principles, and processes of the approach.

Billing issues are critical in many mental health organizations. Some may express hesitance about introducing a new intervention, such as VIMR, because they are worried about how the organization would bill for such services. IMR is a billable service in many states. VIMR services often can be paid for in the same way as general IMR.

Some organizations interested in VIMR do not have a supported employment program within their organization. Some do have such programs, but find that these are off in a virtual 'silo' from their clinical services, despite what good practices would dictate (i.e., close collaboration). VIMR is designed to be delivered in conjunction with employment services that help participants choose, get, and keep work. It takes time to develop collaborations between

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[4] For example, Center for Community Inclusion, website www.communityinclusion.org

clinical services and employment programs or collaborations outside the agency to link with an existing employment program, if one does not exist within the agency. Developing appropriate collaboration mechanisms is another area where technical assistance can help administrators do so in an efficient manner.

Incorporating VIMR into Organizations

Implementing VIMR requires the efforts of multiple people in multiple roles. The following section outlines some of the most important implementation roles[5].

VIMR Providers

As will have become evident from the discussion to this point, VIMR implementation involves more than a front-line practitioner or provider. Sometimes VIMR is delivered in teams of three or four practitioners so that if one is absent, VIMR can continue to be delivered to that practitioner's participants. It is important to encourage trained staff to begin providing VIMR to at least one service recipient as soon as is feasible immediately after the training, to further develop their skills and enhance their confidence. In the first year after training, the practitioner should either utilize VIMR with at least three or four individuals with mental health conditions, and/or run two or three VIMR groups. This ensures that the learning developed during training will be consolidated into the staff person's practice.

VIMR Providers:

- Provide VIMR as part of their job description.
- Designate a specific portion of their time to the delivery of VIMR.
- Complete VIMR progress notes for the sessions delivered as well as goal-tracking sheets.
- Schedule regular meetings with the employment specialists working with the individuals they serve to discuss and coordinate the person's progress in employment as well as his or her progress in VIMR. Whenever possible, the person being served is included in these meetings.
- Receive weekly supervision in VIMR, including consultation from a VIMR trainer/consultant when possible.

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[5] The roles are adapted from IMR practice (Gingrich & Mueser, 2010).

VIMR Supervisor

VIMR is implemented better when the supervisor receives formal training. Supervisors usually work with one or two individuals receiving services or co-lead one or two groups in order to maintain sufficient expertise to be able to help other staff. In addition, it is helpful for the trainer/consultant to participate in supervisory sessions for up to one year after training to support the supervisor in providing staff feedback.

VIMR Supervisors:

- Provide VIMR supervision as part of their job description.
- Designate a specific portion of time to provide VIMR supervision.
- Arrange and run weekly supervision meetings for the VIMR provider or the team of providers.
- Oversee the referral process for identifying and engaging participants in VIMR services.
- Meet regularly with the VIMR Leader.
- Meet regularly with the supervisor of the employment services used by the individuals served by VIMR to coordinate services, if they are not being delivered by the same unit or program.

VIMR Leader or Coordinator

In some agencies the VIMR supervisor is also the VIMR leader or coordinator. The leader or coordinator is the person who is a 'cheerleader' or 'champion' for VIMR within the service. He or she is the point person who 'markets' VIMR to staff as well as to employment specialist staff, in order to increase the number of referrals for VIMR. In addition, if this person is not already the VIMR supervisor, the leader will work with the supervisors to ensure that those referred for VIMR actually receive the intervention.

VIMR Leader:

- Coordinates VIMR as part of his or her job description (and may/may not also fulfill the role of a VIMR supervisor).
- Designates a specific portion of his or her time to coordinating VIMR.
- Meets regularly with the agency or clinical director involved in encouraging or supporting the implementation of VIMR.
- Leads agency discussions of participant eligibility and recruitment (e.g., How participants will be identified? Who will do it? Will there be an outreach to promote self-referrals? Will there be a priority population for VIMR? For example, all those working with employment specialists already as well as those who have dropped out of employment services? How will recruitment be monitored?
- Monitors referrals and engagement of participants in VIMR services.

- Troubleshoots obstacles to providing VIMR.
- Reviews the overall implementation of VIMR at least twice a year.
- Develops plans to maintain VIMR service delivery or expand it.
- Monitors the quality and quantity of VIMR services.
- Liaises with local peer-support agencies to encourage collaboration and the use by VIMR recipients of peer-support services (if the VIMR providers are not peers).

VIMR Advisory Board (AB) or Steering Committee (SC)

It is important to oversee the introduction and ongoing implementation of VIMR at an agency. The group, serving as an Advisory Board or Steering Committee, typically includes the agency director, the director of clinical services, the VIMR leader or coordinator, VIMR supervisor(s), and key stakeholders, such as agency quality assurance person, participants, family members, and other agency practitioners and leaders. In those agencies where VIMR is not being delivered by Employment Specialists, it is important to include a representative of the employment program to be part of the Advisory Board or Steering Committee in order to increase the likelihood that vocational efforts will be coordinated.

VIMR AB/SC:

- Meets regularly (e.g., monthly at the beginning of implementation).
- Reviews data on the implementation of VIMR services at the agency. This includes the number of participants receiving VIMR, the results of any evaluations, and the training needs of providers.
- Promotes VIMR to stakeholders, such as people in recovery, family members, peer support agencies, state Vocational Rehabilitation offices, supported employment programs (e.g., Individual Placement and Support (IPS)), clubhouses, as well as the community at large.

Some Common Questions about Implementation

What happens when trained staff leave the organization?

Building training into a supervisory structure makes it more likely that new staff can be trained. It is not always feasible to mount an entire training program whenever new staff arrive. Training supervisors how to teach VIMR, as well as how to supervise it, helps the organization overcome the issues that arise with turnover.

How do we make sure that everyone who is eligible and interested in work-related issues have the opportunity to receive VIMR services if they want them?

The biggest barrier to providing VIMR services to individuals with mental health conditions is that they often are not referred for such services and do not know about them in order to self-refer. Negative attitudes of providers, family members, and service recipients, about the capacity of individuals with serious mental health conditions to work, often create obstacles to referrals. In addition, the idea of providing an educational approach to overcoming mental health related concerns about work is still new to some providers as well as some potential participants.

The agency, through its VIMR leader, can market these services to improve referrals. Marketing might take the form of holding agency events or team discussions to promote referrals, as well as having the agency VIMR Leader to meet one-on-one with staff reviewing their caseloads with them, to identify appropriate referrals, and to help the staff person to clearly explain its benefits to prospective participants. This is especially important in agencies where the idea of individuals with serious mental health conditions entertaining or having work aspirations is not common nor often supported. Strategies, such as agency kick-off events, presentations at local conferences and meetings, including local chapters of consumer organizations and the National Alliance on Mental Illness (NAMI), have been used to increase referrals to VIMR. Offering a 'VIMR Introductory group' to service users who are waiting to meet their providers, during the agency's intake process, also can help to increase recruitment for VIMR.

Explaining VIMR to Employment Specialists, especially for those who are not part of the program where VIMR is being delivered, can be critical. At times, VIMR is delivered within a clinical service while, for example, supported employment services are delivered in another program. In these instances, it is vital that the VIMR Leader explain VIMR, its purpose, its curriculum, and how it differs from the work that is being done by the Employment Specialist, in order to encourage Employment Specialists to refer to VIMR and to explain to potential participants how it complements the work already in progress. Whereas employment programs usually are mandated to help people to come up with a job goal, get the job, and coach people in keeping their jobs; VIMR providers help people to manage their mental health condition so that they can consider work, and/or perform their best at work once they get it. In addition, VIMR providers help participants identify both smaller and larger goals towards their vocational aspirations that help them not only to achieve goals, but to develop a 'culture' of goal setting and achievement.

What is the most important organizational factor that makes a difference when implementing VIMR?

While research has not investigated this specific question, in general, elements (such as leadership at the organizational level as well as at the regional or systems level; organizational culture, staff, and supervision; the amount of training and consultation and evaluation mechanisms) are cited as the important components of implementation (e.g., Salyers et al., 2009; Anthony & Huckshorn, 2010). The *culture, commitment, and capacity* of an organization

to implement a recovery-oriented innovation are based on these elements (Farkas, Ashcraft, & Anthony, 2008).

If an organization has a culture that provides a recovery context and sees work as a pathway to it, has had previous experience implementing data driven practices, and understands the complexity of supporting staff in learning new skills, then that organization is more likely to be willing to implement VIMR. If the leadership across all levels is committed to implementing VIMR and to periodically evaluating its progress in implementing VIMR, while the staff also are committed or have a strong desire to learn new skills, then the organization is more likely to implement the practice. Lastly, if the agency's capacity is expanded by having skilled trainers teach VIMR as well as provide follow-up support, then VIMR is more likely to become embedded in the agency.

While culture, commitment, and capacity interact with each other, the most important factor is that of good leadership. Good leaders across the organization, as well as at the system level, can overcome many of the issues that arise within the other factors. A good leader inspires staff with a clear vision of what is to be implemented and why it is important to the agency and its service users. Good leaders can move systematically towards the goal while remaining flexible in their efforts to embed innovations. Lastly, good leaders organize their change efforts around 'exemplars', staff who are skilled in and committed to the intervention or innovation (Anthony & Huckshorn, 2010).

For Supervisors

Introduction to VIMR Supervision

Who Should Supervise VIMR-trained Staff?

It is important that supervisors have their own training and experience in vocationally-oriented programs, if not employment programs per se. Supervisors, who do not have prior experience helping individuals served gain employment, may have difficulty understanding the particular issues that the VIMR provider brings to the sessions.

In addition, it is essential that the supervisors of VIMR-trained staff have training in VIMR itself so that they are, at best, expert in the following and, at least, knowledgeable about:

- The approach and major concepts of VIMR
- Vocational Recovery
- The values of VIMR
- VIMR skills and strategies

What is VIMR Supervision?

Supervision of the VIMR-trained provider is an ongoing, collaborative process in which the supervisor helps the provider attain a high level of fidelity to the VIMR approach. Collaboration is the way by which the supervisor teaches, mentors, and facilitates constructive feedback to help the provider reach high levels of excellence.

As previously mentioned, VIMR supervisors:

- Provide VIMR supervision as part of their job description.
- Designate a specific portion of time to provide VIMR supervision.
- Arrange and run weekly supervision meetings for the VIMR provider or the team of providers.
- Oversee the referral process for identifying and engaging participants in VIMR services.
- Meet regularly with the VIMR Leader.
- Meet regularly with the supervisor of the employment services used by the individuals served by VIMR to coordinate services, if they are not being delivered by the same unit or program.
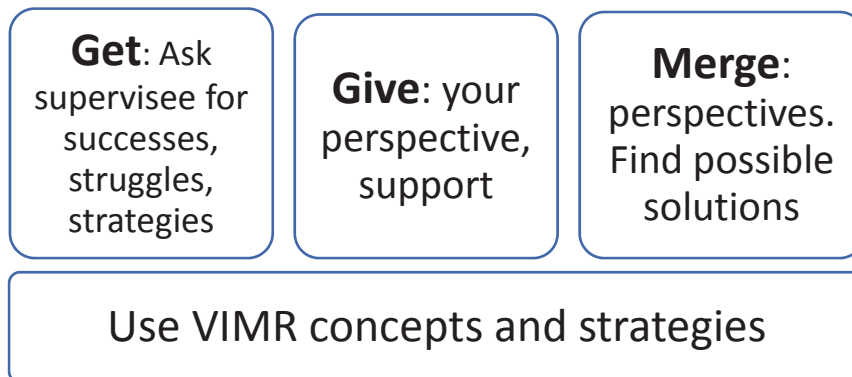
When should VIMR Supervision be offered?

VIMR supervision can be offered on a regular basis, or when there is a problem to solve, or an accomplishment to recognize with respect to delivering VIMR. Consider offering VIMR supervision:

- In regularly scheduled appointments.
- Before, during, and after observing a session.
- When requested to do so by the supervisee.
- When exemplary work is being done.

Operationalizing VIMR Supervision

To support the provider in the most concrete way, it is best to observe an interaction and facilitate feedback. Facilitating feedback is different from providing feedback, in that the supervisee is very much involved in the exchange during supervision.

An effective framework for providing supervision that facilitates feedback is 'Get-Give-Merge'.

Get: Ask supervisee for successes, struggles, strategies	**Give**: your perspective, support	**Merge**: perspectives. Find possible solutions

Use VIMR concepts and strategies

It is helpful to base 'Get-Give-Merge' interactions on the educational, motivational enhancement, and cognitive-behavioral strategies used with participants in VIMR. These strategies can be effective in helping to engage and change behaviors of individuals, whether providers or service recipients.

The Heart of the Matter: What you should know about Vocational Recovery

Supported employment services initiate a growing awareness of the possibility of a life with meaning and purpose that stands in stark contrast to a life as a mental health service recipient. This change in role, even though desired, is by its very nature, destabilizing. With such change, comes significant risk, fears, and anxieties.

Promoting honest, safe, and empathetic discussions by the provider, with the participant about their terror, their hopes, or worries, will help the participant develop a stronger sense of self and with that, a readiness to make small changes.

People are making a choice to be courageous and hopeful, and to change when they decide that they want to work again. It is often a very uncomfortable place to be for people; and the responsibility of the VIMR provider is to affirm them and their feelings, even if the provider doesn't agree or is concerned that the participants are not making the choices the provider wishes they would.

People with serious mental health conditions often are accustomed to focusing on what they didn't do well in a job, what they can't do at work, and how their health struggles are the problem in their lack of work. Working with people to see that their symptoms and lack of strategies are important as barriers to their goal of working is critical, rather than the primary problem in their life per se.

Assisting people to reframe their identity from one that is versed in illness, dysfunction, and disability, to one that springs from their wellness, their capacity to work, and all their strengths, is a key provider strategy that VIMR supervisors support. Helping people stay focused, on a daily basis, on a long-range view of themselves as becoming a successful and happy worker is essential as an underlying theme in the process of working through the VIMR curriculum.

Supervising providers so that they stay focused on vocational recovery as the 'heart of the matter', as well as on the concrete steps and strategies they use the VIMR curriculum to teach the participant, means helping them to remember that the shift in identity is fundamental to sustaining any changes the person makes.

What are you, as a Supervisor, specifically looking for?

In addition to keeping the 'heart of the matter' central to the provider's focus, it is important to support the provider in applying the VIMR training, by using the curriculum in an effective way. The following fidelity or 'Integrity Scale' is intended to help a supervisor identify specific items to watch for and ways to rate the provider's behaviors during the individual or group sessions.

Vocational Illness Management and Recovery Intervention Integrity Scale[6]

The Vocational Illness Management and Recovery Intervention Integrity Scale is designed to provide feedback on the degree of adherence to the principles of Vocational Illness Management and Recovery (VIMR). Ratings should be made by raters trained and experienced in VIMR based on one-to-one supervision with a VIMR provider or on audio or audiovisual recordings of VIMR sessions.

Raters should score whole sessions whenever possible; however, when this is not possible, several alternatives exist. Raters can identify didactic sections of recordings and, after establishing the level of use of strategies (item #13), skip this section of the recording. Alternatively, especially when using the scale for supervisory purposes, the provider being rated can identify sections of the tape recording where they believe are most exemplary of particular skills. For example, "During minutes 3 through 5 are when I use motivation-based strategies the most." These strategies likely will bias ratings and should be used only when absolutely necessary.

For each domain, we provide indicators to be observed in order to make ratings. Each of the items is rated on a scale from 1 to 5, using the scale below. Note that behavioral indicators are meant to be a guide to inform ratings, not a checklist to count presence or absence.

General guidelines for scale:

1. **Unsatisfactory**: Provider fails to use methods.
2. **Needs Improvement**: Provider applies either insufficient or inappropriate methods, and/or with limited skill and flexibility.
3. **Satisfactory**: Provider applies sufficient range of methods with skill and flexibility. Some difficulties evident.
4. **Very good**: Provider systematically applies an appropriate range of methods in a creative, resourceful, and effective manner.
5. **Excellent**: Provider uses an excellent range of application or successful application in the face of difficulties.

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[6] This scale is an adaptation of the Fidelity Scale for IMR:
Mueser, K. T., Gingerich, S., Salyers, M. P., et al. (2002). Illness Management and Recovery Fidelity Scale, in Illness Management and Recovery Implementation Resource Kit. Edited by Mueser K. T., & Gingerich, S. Rockville, MD: Substance Abuse and Mental Health Services Administration, Center for Mental Health Services; Mueser, K. T., Gingerich, S., Salyers, M. P., et al. (2004). The Illness Management and Recovery Scale (IMR). Concord, New Hampshire-Dartmouth Psychiatric Research Center.
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Elements to Observe and Rate:

1. Therapeutic Relationship				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Therapeutic Relationship: Providers develop rapport with participant(s) and are warm and empathic.

Indicators of Excellence: *Expressing warmth and empathy in response to participant(s)*

- Demonstrating that one remembers information that was previously discussed.
- Demonstrating interest by showing that one is listening (e.g., by nodding one's head and/or making a relevant, non-judgmental comment about what the speaker said).
- Using reflective or active listening in which the provider accurately paraphrases what was said or accurately identifies the speaker's feelings and reason for those feelings, without going to interpretation.
- Expressing understanding and compassion about unpleasant experiences.
- Conveying hope that things will improve in the future.
- Expressing pleasure in positive experiences.
- Asking open-ended questions.
- Adjusting one's pace to the pace of the participant or group.
- Using positive reinforcement (such as praising or giving positive feedback) following a skill or behavior in order to increase the participants' efforts to use the skill or behavior, or to encourage/increase on-task behavior, such as attending a session, doing a role play, giving feedback to others, paying attention during the session, completing a homework assignment, or completing an VIMR worksheet.

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2. Recovery Orientation				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Recovery Orientation: Providers consistently express recovery values in their relationship.

Indicators of Excellence: *Demonstrates values of person orientation, partnership, choice, and hope in interactions.*

- (*Person orientation*) Creates a non-stigmatizing atmosphere in which:

- o Group members are treated like 'normal' people.
- o Symptoms of mental health conditions are viewed as on the range of human experience, rather than categorically different than other people.
- o Providers and other staff use a non-patronizing tone.

- *(Partnership)*
  - o Demonstrates a collaborative attitude by treating the person as an expert in their own recovery; supports or enhances participant's self-efficacy for managing their mental health condition and/or achieving goals.
  - o Provides practical help and support in facilitating participant's progress towards goals or dealing with obstacles to goals, including improved management their mental health condition.

- *(Choice)* Helps participant(s) take an active role in shared decision-making in treatment of their mental health condition.

- *(Hope)* Conveys hope and optimism that participant(s) can change and make progress towards goals.

_____

3. Involvement of Significant Other				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Involvement of Significant Other: Provider elicits the direct involvement of significant others in VIMR and reinforces their involvement when it arises.

Indicators of Excellence: *Utilizing significant others or important people in the participant's life in order to facilitate the person's goals or illness management.*

- Provider reinforces involvement of significant others by explicit statements (e.g., 'good job'!) or implicit ways (e.g., using positive tone, expressing interest, spending lots of time talking about significant others).
- *Significant other is present for VIMR session.
- Provider asks the participant to identify who can help him or her to achieve a particular step toward his or her goal.
- Provider asks the participant who will be involved in her or his relapse-prevention plan and encourages participant to obtain that significant other's written agreement to participate.
- Provider assists the participant in developing a plan (including specifying time and place) to involve the significant other in reviewing VIMR material or in completing home assignments.

*Scoring Note: If the significant other is physically present during the session and agrees to some follow-up activity, a score of 5 is appropriate.

If the significant other is not physically present, there needs to be an explicit plan for their involvement in order to get a score of 5.

_____

4. Structure/Efficient Use of Time				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Structure/Efficient Use of Time: Providers follows a standard structure for each VIMR session, adequately covering all components of the VIMR sessions.

Indicators of Excellence: _Provider structures the session and uses time efficiently to accomplish the purpose of the VIMR Module._

- Follows recommended Agenda Items:
  - Brief socialization and identification of any major problems (1-3 minutes).
  - Review previous session (1-3 minutes).
  - Review home assignments (5-10 minutes).
  - Follow up on goals of two or three participants on rotating basis, preferably using VIMR Goal-Tracking Sheet (5-10 minutes).
  - Agenda set for current session (1-2 minutes).
  - New material taught from handout (usually a few pages) (25-40 minutes).
  - Home assignment developed in collaboration with participant(s) (5-10 minutes).
  - Session and progress made summarized (3-5 minutes).

- Makes effective use of time:
  - Clearly states the agenda for the session.
  - Avoids and/or redirects off-topic or tangential conversations.
  - Uses positive reinforcement for on-topic comments (e.g., paying more attention to and praising on-topic comments).
  - Keeps session pace slow enough to facilitate comprehension of material and more in-depth probing when appropriate.

  Examples of different levels of efficiency:
  - Efficient: Group leader sets agenda and reinforces on-topic conversation. When a group member starts on a tangent, leader responds with "That's interesting, Joe; but if it's ok, I'd like to talk they type of work you might like to do."

- ▪ <u>Mostly Efficient</u>: Group leader fails to have adequate time for a portion of the session (e.g., goal check-in) because a group member went on at length about his or her own experience.
- ▪ <u>Not Efficient</u>: There is no new material covered because group leader engages in a conversation about a tangent, e.g., the upcoming St. Patrick's Day party.

Scoring Note: If the session is substantially off-topic, a score of no greater than 2 is appropriate. Critical Agenda Items are consider so central to VIMR that their inclusion is necessary for a rating >3.

_____

5. Use of Structured VIMR Curriculum				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5
No use of structured curriculum	Limited use of structured curriculum	Structured use of the curriculum occurs at least 50% of the session(s) being observed. If examples or materials added, they are mostly or all directly relevant to topic.	Structured use of the curriculum occurs at least 75% of the session(s) being observed. If examples or materials added, they are mostly or all directly relevant to topic.	Structured, VIMR curriculum is the focus of session. If examples or materials added, they are all directly relevant to topic.

Use of Structured VIMR Curriculum: The content of the session is focused *on* the subject matter covered in the curriculum.

Indicators of Excellence: *Provider bases session on a structured curriculum that is related to one of the nine VIMR Module topics.*

- Provider presents, discusses, and uses examples directly related to one of the nine VIMR Module topics in the session (i.e., 1. Recovery and Vocational Recovery; 2. Practical Facts about Mental Health Conditions and Work; 3. The Stress-Vulnerability Model and Vocational Recovery; 4. Using Medication Effectively: Avoiding Drugs and Alcohol for Vocational Success; 5. Coping with Challenges and Symptoms at Work; 6. Coping with Stress at Work; 7. Building Social Relationships at Work; 8. Preventing Relapses; 9. Performing Your Best at Work).

- Provider is guided by structured material. Structured material includes written or audiovisual materials intended for educational and discussion purposes.

**Rating Note*:* Raters should categorize the session regarding its use of structured, educational materials. If the provider adds to the VIMR curriculum (e.g., brochure, YouTube clip), the materials added must be relevant to the topic being presented.

Scoring Note: If the provider uses the VIMR curriculum less than 50% of the time, they are rated as 'Needing Improvement', even if they bring in relevant added materials.

_____

6. Goals				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Goals: Participants are working towards a larger vocational or vocationally-oriented goal that is personally meaningful and individualized.

Indicators of Excellence: *The provider helps the person set vocationally-oriented goals, follows up on goals, and evaluates his or her goals.*

- Overall, vocational or vocationally-oriented goals discussed are :
  - Personally meaningful
  - Individualized
  - Stated in participant's own words

- If the focus is *goal setting,* the provider uses*:*
  - Evocative questions
  - Positive examples of goals being set or accomplished (e.g., other people in recovery)
  - Worksheets/exercises (i.e., Module 1)

- If the focus is *goal follow up*, the provider:
  - Checks on the status of the goal and its progress

- If the focus is *goal evaluation*, the provider:
  - Reviews the person's commitment to the goal
  - Reviews its fit with values and other goals
  - Discusses modification of goal or strategy, if needed

Rating Note: Goal setting, goal follow up, and goal evaluation rarely happen in the same session. The rating will refer to whichever of these is relevant to the Module being observed.

- *Goal setting* occurs when the goal is first established. Illness management goals are tied to larger vocational aspirations (e.g., "I want to reduce my symptoms so that I can be eligible for a high-paying job."). Other recovery goals also are tied to vocational aspirations (e.g., "I want to budget my money so that I can save up enough to buy a car to get to a good job." or "I want to work part-time as a hotel cook.").

- *Goal follow-up* involves checking on the status of the participant's progress toward reaching his or her goal.

- G*oal evaluation* involves engaging the participant in a discussion about his or her commitment to this goal, how the goal fits with their values and other goals, and if modifying the goal and/or strategy seems appropriate.

Raters should rate discussions of the overarching goal on this item, whereas more specific discussions of accomplishing week-to-week activities (e.g., homework, action steps) in service of the goal should be rated in items 9 and 10. For example, a general check-in on progress towards the goal should be rated here. Actually reviewing an action plan should be rated, by contrast under item 10.

Scoring Note: Scoring should be primarily based on indicators of excellence for the goals and goal follow-up. Goal setting or evaluation might provide justification for a 'Very Good' or an 'Excellent' rating (i.e., goal setting and goal evaluation are not required for a score of 4 or 5).

For VIMR in groups: To score a 3, 4, or 5 the indicators of excellence should be noted for at least two participants (i.e., it should be clear that at least two participants in the group have goals that are personally meaningful, individualized, and stated in their own words).

A Provider may score a 3 if they did an excellent job with only one participant (i.e., the indicators of excellence for goals, goal follow-up, and possibly goal setting or evaluation are met).

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7. Weekly Summary Sheet for Action Planning				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Weekly Summary for Action Planning: Providers regularly develop explicit and intentional assignments (action plans).

Indicators of Excellence: *Providers develop either weekly activities aimed at progressing towards objectives (i.e., action steps) or aimed at learning and applying Module information and skills (i.e., homework).*

Action Step: Relevant to the vocational or vocationally-oriented goals and objectives as identified in VIMR sessions.

Homework: Personalizes information/skills by applying the materials presented in the VIMR curriculum to the participant's own situation.

Relevant to both Homework and Action Steps:

- There is a detailed and precise goal for the weekly plan.
- The steps are specific.
- Progress toward step can be quantified.
- Achievement of step is likely to be within the participant's capabilities, should he or she choose to work toward the action step.
  - Action step considers current skill level, previous experience, and stage of change (i.e., should include acquisition of necessary skills/experience and be matched to the current stage of change).
- The target and the activities are matched to participant's preferences.
- The plan is actively agreed to by the participant.
  - For example, the participant expresses active agreement with homework assignment (i.e., the participant does more than just state 'ok').

Rating Note: Action steps and homework can, but do not necessarily, overlap.

If multiple assignments are given, then rate the best one, but consider it in the context of others. For instance, if too many assignments are given, an otherwise 'achievable' action step may not be given credit for this indicator because the participant will not be able to accomplish everything assigned.

Scoring Note: To earn a score of 5, the rater must have a clear sense for what the plan is (i.e., have enough information that they could do the assignment themselves).

_____

8. Action Plan Review				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Action Plan Review: Providers regularly review prior action plan.

Indicators of Excellence: *Provider specifically follows up on weekly action plans (i.e., action step towards a goal or homework based on the curriculum).*

- Asks about action plan completion.
- Reinforces efforts to complete action plan, including reviewing work completed.
- Identifies and problem solves obstacles to completing action plan.
- Obvious positive effect on recovery.
  - *Example:* Participant talks about completing assignment of reviewing Module 2 with her father. She reports she was able to talk with him about her illness without feeling guilty, like she has before.

Specific to Homework: Integrates material into the Participant's recovery and goals.

Specific to Action Steps: Action step is clearly linked to the participant's goal.

Rating Note:

- Participants may offer the information regarding an action plan in the context of goal follow-up, it doesn't have to be elicited (e.g., "I painted three times this week.").

- The participant must have completed the action plan for there to be evidence for the last two indicators: the action plan integrated material into their recovery and goals, and had an obvious positive effect on recovery.

Scoring Note: If an action step is reviewed, there must be a clear link between the action step and a goal, in order to score a 5.

_____

9. Motivational Enhancement Strategies				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Motivational Enhancement Strategies: Providers regularly use motivation-based strategies throughout the session.

Indicators of Excellence: *Provider uses the strategies to increase participants' inner motivation to pursue goals and learn strategies and skills to manage his or her illness, in accordance with the following principles:*

Principle	Example	Violation
Evocation: Provider elicits and expands the participant's internal motivation for change.	*"You said you wanted to take your medications more often. Tell me more about that."*	*"Haven't you considered that if you don't take your medications you'll never reach your goals?"*
Develop Discrepancy: Provider leads participant to explore difference between his or her goals and values and current behavior.	*"I know you've said your kids are 'everything' to you, but I noticed you often aren't sure where they are when you are high."*	*"Don't feel bad, I know you don't mean to."*
Collaboration: Provider conveys that provider and participants are equals, all of whom have useful knowledge regarding the topic.	*"How about if we go through this material together. I'd like to hear your thoughts about the mental health system."*	*"Look, this is how things work [proceeds to lecture on 'the way things work']."*
Autonomy/Support: Provider supports and actively fosters participant perception of choice as opposed to attempting to control the participant's behavior or choices.	*"It sounds like there are a lot of people who want you to try to find a job, but I'd really like to hear what you would prefer to do."*	*"Your parents and wife are right, getting a job is really important for you."*
Roll with Resistance: The provider avoids arguments and direct confrontation.	*"It sounds like it really bothers you when it seems like people are telling you what to do."*	*"You can have an attitude if you want, but you have to admit you have a problem."*
Direction: Provider maintains appropriate focus on a specific target behavior or concerns directly tied to it.	*"It sounds like you have a bunch of things you'd like to do. What about we choose just one or two to start with and see what happens."*	*"Alright, that's great! I think you can do it!"*
Empathy: The provider understands or makes effort to grasp the participant's perspective (including his or her ambivalence toward change) and feelings.	*"It sounds like you're really torn about being closer to people because getting close to people is scary, and on the other hand, you feel better afterwards when you do."*	*"It's going to be better for you in the long run to talk to people."*

Scoring Note: If Provider substantially violates Motivational Enhancement Strategies principles (in previous table) rate as ≤ 2.

Provider can be rated at ≤ 2 even if there is no substantial violation of principles.

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10. Educational Strategies				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Educational Strategies: Providers regularly apply educational techniques that are effective for adult learning.

Indicators of Excellence: *Providers tailor a variety of the following techniques to engage, sustain interest, and teach participants the module content:*

- Interactive teaching: Frequently pausing when presenting information to get the participant(s) reaction and perspective, talking about what the information means, clarifying any questions that may arise, and taking turns reading handouts (could include small group work).

- Adapted teaching methods: Modifying teaching to match the language, vocabulary level, and cognitive abilities of the participant(s), e.g., writing main points on flip charts, explaining new terms, giving examples, engaging participants in activities or demonstrations that illustrate points, providing highlighters for participants to mark main points on their handouts, providing note cards for participants to write down points to remember.

- Making the material come alive for the participant(s), e.g., helping participants to apply the material to their own situations, coming up with examples that participants can relate to, facilitating discussions about topics, varying the format of presentation.

- Reviewing information and checking for understanding: Asking participant(s) to summarize information in their own language rather than asking 'yes' or 'no' questions, such as, "Did you understand?"

- Breaking down information to ensure learning:
  - Providing information in small chunks.
  - Using 'Tell-Show-Do-Discuss' strategies for the small chunks of information, especially when teaching strategies and skills.

Rating Note: This item does not require that new material is covered in the session; in other words, the techniques can be used to review material from previous session.

Scoring Note: In order to score a 5 on Item 10, the rater should be certain that the participant understands the material and is likely to retain it.

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11. Cognitive Behavioral Techniques				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Cognitive-behavioral techniques: Providers use cognitive-behavioral techniques in sessions.

Indicators of Excellence: *Provider uses a variety of the following techniques for the specific purpose of increasing positive behaviors and progress towards goals:*

- Educating: Provider makes the person aware that a connection that exists between thoughts and feelings (e.g., labelling two items as connected, identifying a connection), without going further.
- Shaping: Provider reinforces *successive approximations* to a skill or a goal.
- Modeling: Provider demonstrates skills.
- Role playing: Provider designs a simulated interaction in which a person practices a behavior or skill.

- Cognitive restructuring: Provider helps the participant walk through:
  - describing the situation leading to the negative feeling
  - making a link between the negative emotions and the thoughts associated with those feelings
  - evaluating the accuracy of those thoughts
  - identifying an alternative more accurate way of looking at the situation, if the evaluated thought proves to be inaccurate

- Relaxation Training: Provider explains, demonstrates, and practices techniques to reduce tension, e.g., progressive muscle relaxation, breathing exercises, guided imagery, etc.

- Behavioral Experiment: Provider devises an exercise to 'test out' irrational beliefs, e.g., having a participant, who believes a certain nurse is trying to kill everyone, talk to some of the nurse's other patients.

Rating Note: Since some modules lend themselves to more application of Cognitive Behavioral Therapy (CBT), raters should penalize for missed opportunities to apply CBT. These modules include:

5. Coping with Challenges and Symptoms at Work
6. Coping with Stress at Work
7. Building Social Relationships at Work

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RATE ITEMS 12-15 ONLY WHEN USED

12. Communication with Employment Specialist Program				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Communication with Employment Specialist: Provider communicates regularly with the participant's Employment Specialist.

Indicators of Excellence: *Provider communicates about progress in VIMR and relevance to employment goals as well as obtaining information about progress in the employment program.*

- Provider develops a good working relationship with the Employment Specialist (provider is on the specialist's 'radar').

- Provider holds regularly scheduled meetings with the Employment Specialist.
  - Meetings are not 'on the fly' or spontaneous.

- Provider communicates information relevant to the participant's employment goals from the VIMR sessions to the Employment Specialist.

- Provider explores or obtains information from the Employment Specialist about the participant's progress towards his or her employment goals.

Rating Note: This item is only relevant if the VIMR is being delivered by someone other than the Employment Specialist.

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13. Relapse-Prevention Training				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Relapse-Prevention Training: Providers systematically provide relapse prevention training.

Indicators of Excellence: *Provider trains participant in: the identification of environmental triggers; identification of early warning signs; development of a plan to manage early warning signs; development of a plan for managing stress; and involving significant others in the plan.*

This is done through:

- Helping the participant troubleshoot his or her relapse prevention plan by trying out components of the plan to make sure they work.

- Making sure that the participant and everyone involved in the plan (e.g., staff members, family members, peers) has a copy and is aware of his or her part in the plan.

- Making sure that participants develop individual relapse prevention plans rather than adopting a 'generic' plan.

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14. Behavioral Tailoring for Medication Management				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Behavioral Tailoring for Medication Management: Providers teach participant(s) how to modify their environment in order to help them incorporate taking medication into their daily lives.

Indicators of Excellence:

- Evaluating the need for behavioral tailoring or other strategies by thoroughly discussing with the participant how he or she takes medication currently.

- Sometimes the use of pill boxes, alarms, post-it-notes, or calendars as reminders can help with the difficulties.

- When participants have further difficulties fitting the taking of medication into their daily routine, providers use the following steps:
  - Explore the participant's daily routine including activities, such as meals, daily hygiene, morning routine, bedtime routine.
  - Identify with the participant an activity that can be adapted to include taking medication.

- o Help the participant create a cue for taking medication at the time of the identified activity, such as attaching his toothbrush to the medication bottle with a rubber band or placing medications near the coffee pot.
- o Model the routine for the participant.
- o Engage the participant in a role play of the same routine.
- o Establish a home assignment to implement the plan.

- If the above strategies do not seem to be helpful, the provider helps the participant practice talking to their doctor about minimizing side effects, simplifying medication regimen, etc.

Rating Note: This topic is covered in conjunction with Module 5, coping with Challenges and Symptoms at Work.

_____

15. Coping Skills Training				
Unsatisfactory	Needs Improvement	Satisfactory	Very Good	Excellent
1	2	3	4	5

Coping Skills Training: Provider helps participant(s) identify and develop ways to reduce the frequency, intensity, and/or functional impact of their symptoms.

Indicators of Excellence:

- The provider conveys a sense of confidence that people can reduce stress, problems, and/or symptoms and improve their ability to cope with stress, problems, and/or symptoms effectively.

- The provider helps people identify the life events and daily hassles that can cause them to feel under stress, encounter problems, and/or symptoms.

- The provider helps people identify and practice strategies for preventing some sources of stress, problems, and/or symptoms.

- The provider helps people identify and practice coping strategies for reducing the effects of stress, problems, and/or symptoms.

- The provider encourages people to involve family members and other supportive people in their plans for coping with stress, problems, and/or symptoms.

Tips for Supervisors

➢ **Training in basic VIMR:** It may be useful for supervisors to participate in the basic VIMR training, if no specific supervisor training is available. This enables supervisors to be familiar with the conceptual pieces of VIMR and to have the opportunity to develop the skills that the supervisees will be using.

➢ **Recognizing when to use VIMR:** While it is best that agency staff refer participants specifically for VIMR, encourage the people you supervise to generally look for opportunities to utilize VIMR with the people they serve:
  • To inspire hope for vocational recovery.
  • When the person is considering 'what's next' for him or her.
  • If a person indicates an interest in working on setting or achieving vocational goals.

➢ **Progress Notes:** Using structured Progress Notes (see Figure 1) can help both the provider and supervisor to stay focused on the basic elements of the process during VIMR sessions, as well as in supervision. These notes can be part of the informal participant record, if the agency allows informal notes in the file. Some agencies incorporate these progress notes into the official record and merge them with other forms of documentation.

➢ **Supervision Form:** At times, using a simple form to structure supervision can help to ensure that all elements are covered (see Figure 2, example, Supervision Form).

➢ **Goal Tracking Forms:** Reviewing the provider's method of tracking the participant's progress towards the goal can help the provider to remember to do so in the sessions. The Goal Tracking Form (see Figure 3) is a helpful example and tool to review with the provider in order to help them regularly check in with the participant about his or her goals.

➢ **Skills to emphasize in supervision:** While all of the skills and strategies taught in the VIMR curriculum are critical to its delivery, certain skills come up frequently as issues for staff, depending upon the level of experience and training that the VIMR staff have had. Skilled supervisors may find they spend more time on some of these 'challenging skills':

  • **Expressing warmth and empathy:** While most providers have had an interviewing or clinical course that included 'active listening', many staff have difficulty demonstrating understanding at higher levels of expertise. For example, supervisees who tend to parrot what the participant has said when attempting to express empathy, rather than really reflecting an understanding of the feeling and meaning of their communication, are supervisees who could benefit from extra time on these skills.

- **Skillfully conveying hope** that things will improve, despite extreme life issues or fostering the conviction that the person can and will work successfully. While it is easy enough to be a 'cheerleader' and convey hope, which is obviously important to do; it is more challenging to foster this hope and conviction in the person himself or herself. Inspiring the person to develop such conviction requires a complex set of skills (e.g., acknowledging negative realities, identifying a personal truth in the negative reality, and tying that to some positive future), good timing, and a real belief in the participant. Resources exist to help providers develop more skill in Inspiring. One resource that might provide additional support for a supervisee struggling with this issue might be the *Toolkit on Recovery Promoting Competencies* (for more information, see cpr.bu/develop).

- **Developing the capacity to retain a welcoming attitude** and to invite the person back, as often as it takes by seeing beyond a participant's absence or 'no show' behavior.

- **Adjusting the pace or modifying the VIMR content** to accommodate the person's abilities and educational skills without losing the person either because the information is presented too slowly or too quickly or in too simplistic or complex a fashion.

- **Reframing symptoms as barriers to the person's goal** in contrast to a problem or limitation takes practice and rehearsal. Helping the provider to 'see' the opportunity or the 'other side' of the issue in order to reframe does not always happen quickly.

There are many other skills supervisors find themselves shaping, teaching, or re-teaching as part of the supervisory process. The ones listed here are some of the most common, particularly for those providers with limited experience using a manualized psychoeducation approach or those for whom developing collaborative partnerships with the people they serve present a challenge.

Figure 1. VIMR Progress Note

Name:	**Date:**	**Time:**
Personal Goal Set or Followed-up in Session:		
□ attended session □ given handout □ phone call □ assisted with homework □ other		
Stage of Employment Process: □ Looking for job □ Keeping work □ Struggling at work □ Lost job		
Focus: Identify the specific VIMR knowledge and/or skill topic covered, including handouts and worksheets:		
□ 1. Recovery & Vocational Recovery		
□ 2. Practical Facts about Mental Health Conditions and Work		
□ 3. The Stress Vulnerability Model and Vocational Recovery		
□ 4. Using Medications Effectively and Avoiding Drugs and Alcohol		
□ 5. Coping with Challenges and Symptoms at Work		
□ 6. Coping with Stress at Work		
□ 7. Building Social Relationships at Work		
□ 8. Preventing Relapses		
□ 9. Performing Your Best at Work		
Methods Used in Session (Check all that apply)		
Motivational Interventions Used		
□ Connect information and skill learning with personal goals		
□ Promote hope and positive expectation for success in achieving goals (addressing fears, perceived barriers, lack of confidence, negative realities)		
□ Explore pros and cons of change (costs and benefits)		
□ Reframe experiences in positive light		

Educational Interventions Used

□ Interactive training	□ Check for understanding	□ Review information
□ Review homework	□ Complete worksheet	□ Break down info
□ Homework developed and assigned		

Cognitive-Behavioral Interventions Used

□ Reinforcement	□ Shaping	□ Modeling	□ Role Playing
□ Cognitive restructuring	□ Re-framing	□ Relaxation training	

Specialized Skills Training Used

□ Relapse prevention training	□ Coping skills training	□ Behavioral tailoring for meds

Employment Needs Person Requested (Provider will notify Employment Specialist)

□ Reasonable Accommodations wanted	□ Job coaching needed	□ Other

Outcome of Session: Person's response to activities of session (e.g., motivation, goal clarifications, increased knowledge/skill, and/or movement towards recovery goals).

Person's perspective on today's session (written/stated):

Person's current perspective on the meaning of work in their recovery:

Practitioner perspective:

Plan: Focus of the next session:

Clinician Narrative:

Figure 2. Sample Supervision Session Form

VIMR Supervision Monitoring

Provider:	**Supervisor:**
Date:	**Next Supervision:**

1. **Engage and Check in.** How is provider doing using VIMR? What are provider's major questions about his or her use of VIMR?

2. **Review** previous supervision session and any progress or barriers to implementing VIMR.

3. **Participant Reviews**

Motivational Strategies	Participant Examples
Bridging the gap to goal	
Reframing	
Providing Reinforcement	
Connecting benefits to VIMR skills	
Weighing Pros and Cons	
Educational Strategies	**Participant Examples**
Using Clinical & Teaching strategies to facilitate	
Learning-responding, etc.	
Using Visual aids and teaching tools	
Using Rehab teaching strategies (tell-show-do)	

Cognitive Behavioral Strategies	Participant Examples
Uses reinforcement	
Uses modeling	
Uses rehearsal	
Uses shaping (successive approximation)	
Uses Homework	
Goal Setting and Review	**Participant Examples**
Reviews goals	
Uses goal tracking sheet	
Explores challenges in goal setting and accomplishment: • *Is goal still meaningful? Tied to vocational aspiration?* • *Is goal too large?* • *Is there a need to break the goal down?* • *Are there other skills needed to achieve goal?*	
Involvement of Significant Others	**Participant Examples**
Involves significant others	
Orients significant others to VIMR and role	
Supports significant others to support participant in VIMR	
Educates significant others about VIMR	
Use of Time in Session	**Participant Examples**
Follows a structured process	
Reviews previous session & goals	
Orients to new material	
Teaches new material	
Collaboratively develops homework	
Completes summary sheet	

Figure 3: Goal Tracking Form and Example[7]

Example of a VIMR Goal Tracking Sheet

Name: *Jane Doe*	**Date Long-Term Goal was Set:** *October 31st*
Long-Term (Meaningful) Goal: *Finish training program so I can get a good paying job.*	
Achieved (Date):	**Modified* (Date):**
* Start a new Goal Tracking Sheet if the Long-term Goal is modified or a new goal is set.	
Short-term Goals Related to the Long-term Goal (place a √ after steps achieved):	

Short-Term Goal	1. Improve Study Habits	Done?	2. Improve Use of Relaxation Techniques	Done?
Steps:	a. *Print out 1 assignment, instead of none*	√	a. *Identify when I'm getting anxious (e.g., when homework assigned; when teacher give feedback)*	√
	b. *Set buzzer for 15 min before dinner*	√	b. *Identify the technique I will use when people are around*	√
	c. *Do 10 min of homework*	√	c. *Practice technique in my room*	
	d. *Spend 5 minutes only chatting with friends on the way to dinner*	√	d. *Identify technique to remember to do it*	√
	e. *Do 15 min of homework as soon as dinner ends*	√	e. *Do it once*	
Start Date: *October 31st*			**Start Date:** *December 1st*	

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[7] Adapted from Gingrich & Mueser, 2010.

Date Reviewed: *December 1ˢᵗ*	Date Reviewed: *January 3ʳᵈ*
Achieved: X Fully □ Partially □ Not at all	**Achieved:** □ Fully **X Partially** □ Not at all
Modified / Next Steps:	**Modified / Next Steps:**
1. *Set buzzer for 25 minutes before dinner*	1. *Put technique practice session on smart phone with an alert*
2. *Do 15 minutes of work before dinner*	2. *Practice one time next week*
3. *Chat with friends for 10 minutes only*	3. *Write down how I felt doing it*
4. *Do 20 minutes of work as soon as dinner ends*	

Figure 4: Blank Goal Tracking Form

Name:	Date Long-Term Goal was Set:		
Long-Term (Meaningful) Goal:			
Achieved (Date):	**Modified* (Date):**		
* Start a new Goal Tracking Sheet if the Long-term Goal is modified or a new goal is set.			
Short-term Goals Related to the Long-term Goal (place a √ after steps achieved):			
Short-Term Goal	**1.**	**Done?**	**2.**	**Done?**
Steps:	a.		a.	
	b.		b.	
	c.		c.	
	d.		d.	
	e.		e.	
Start Date:			**Start Date:**	

Date Reviewed: **Achieved:** □ Fully □ Partially □ Not at all **Modified / Next Steps:**	**Date Reviewed:** **Achieved:** □ Fully □ Partially □ Not at all **Modified / Next Steps:**
a.	a.
b.	b.
c.	c.
d.	d.
e.	e.

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