

Transcript for A Guide to Keeping Healthy After the Hospital Podcast

Recorded by Judith Cook and Jessica Jonikas

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JJ: Hello. My name is Jessica Jonikas. I'm here today with Judith Cook to talk about a tool called, *A Guide to Keeping Healthy after the Hospital*, which is available from the UIC Solutions Suite.

JJ: Thanks for joining us, Judith. Please tell our listeners about the purpose of this guide to managing wellness during and after a psychiatric hospitalization.

JC: Thanks for inviting me to talk about this useful guide. It was developed by the New York City Office of Behavioral Health. It's designed to help people who are living in psychiatric inpatient settings to identify their internal and external resources for recovery. This is done by developing peoples' sense of responsibility for their own personal recovery. Along with that, the guide helps patients to assume more control over their treatment and their lives. This is done by teaching self-management techniques that people can use to feel better while they're in the hospital, as well as strategies that help them stay out of the hospital.

JJ: Yes. Research suggests that self-management helps people to recover from many different illnesses and conditions, which can prevent unnecessary hospitalization. I'm wondering, though, whether most people know about the value of self-management, and mental health recovery in general.

JC: In our experience, many people aren't aware that mental health recovery is possible, and that simple self-management techniques can promote it. That's why this guide introduces recovery concepts over the course of an inpatient stay. The idea is to spark interest and hope, in order to jump-start the recovery process for when people return to their communities. The guide is intended to motivate people to work on their recovery once they're back at home.

JJ: You raise an interesting point about needing to motivate people. Many of us are ambivalent about the changes we need to make, even when we know we could be healthier or happier by making some changes.

JC: Isn't that the truth! Ambivalence about change is common. This is acknowledged in the guide to help users avoid self-blame and move toward behavior change. This shift in thinking is fostered by a series of motivational interviewing techniques. Through motivational interviewing, people see that there are costs and benefits to any behavior change. Openly acknowledging this can help them to start moving forward in their lives.

JJ: Many behavioral health care providers are now familiar with motivational interviewing, also called MI. Would you share some of the MI techniques used in this guide?

JC: Sure. One strategy is to ask people to reflect on what brought them to the hospital, and what they'll need to do to be safely discharged and maintain their wellness afterwards. It's crucial to allow people to reflect on these things in a non-judgmental atmosphere. This way, they begin to see how behavior or life changes may be beneficial. Another strategy in the guide is providing education and resources about mental and physical health. Providing this information can foster

hope, while also creating some concern in people about what they're currently doing. This internal tension can create motivation for change.

JJ: Interesting. Would you say more about that? How is making people feel concerned about what they're doing a recovery-oriented approach?

JC: That's a good question. In motivational interviewing, you want to help people see the difference between what they're doing and the future they'd like to have. If they can see this gap without feeling judged, then they can be motivated to try something new. A key clinician skill here is being able to do something called "roll with resistance." When helpers roll with resistance they recognize that it's not useful to argue with people about their beliefs. It's human nature to argue in support of whatever you're doing, even if you know it's not the best thing for you. MI suggests that we avoid that kind of resistance. Instead, we want to help people see the gap between what they're doing and what they want. They can draw their own conclusions from there.

JC: I'll give you an example. If someone keeps ending up in the hospital because he's hanging around friends who use illegal drugs, insisting that he give up these friends isn't going to work. He obviously gets benefit from the friendships, and he'll naturally want to defend his buddies. Better to acknowledge that, on the one hand, it feels good to have friends who are accepting, and on the other hand, having friends who use drugs creates unsafe and unhealthy situations. Let him draw his own conclusions about these conflicting realities over time, as he learns more about recovery and thinks about the life he wants.

JJ: That sounds like an important skill, and one that takes practice. How does the guide help people see the stage they're in, as it relates to making a change?

JC: You're right that the success of motivational interviewing relies partly on understanding Stages of Change theory. The guide explains that people go through a series of stages when making a change, including contemplating, preparing for, acting on, and maintaining a change. There also are people who aren't yet thinking about a change, and are in something called the pre-contemplation stage. Based on this theory, the guide offers strategies for moving forward in each stage. For example, if someone's in the contemplation stage, where she's thinking about making a change, she should talk with others who have made similar changes or do some reading to learn more and get ideas. Also included are sample statements that people often make in each of the stages. For example, people in the preparation stage might say things like, "I've made an appointment with my doctor to get the patch to quit smoking," or "I called the local drop-in center to ask for peer support."

JJ: I like the idea of giving people statements for what the stages of change sound like. You mentioned that people benefit from what they're doing, even when they know it's not the best thing for them. Can you say more about how the guide helps people deal with that?

JC: Yes, this is an important part of MI. People feel heard when someone acknowledges that there are reasons for what they're currently doing and reasons to feel anxious about making changes. The guide takes people through a series of exercises to consider the pros and cons of changing their mental health, their physical health, and their substance use. Then, for each of the 3 areas, they rate how prepared they are to make a change right now. A zero indicates they're not at all prepared to change, while a 10 indicates that they've already made the change. If they didn't choose 10, they're asked to write down small things they can do to increase their motivation.

JJ: Earlier you mentioned that the guide also helps people to continue working on their recovery, once they're back at home. Would you explain how that works?

JC: Yes, that's right. The guide helps users create a Personal Health Plan for managing their well-being after discharge from the hospital. First, they write down what to do if they aren't engaging in self-care or keeping themselves safe. They also record what has and hasn't worked well for them in the past when they've had a mental health or substance use relapse. They record the name, contact information, and reason for the visit for each of the medical and behavioral health providers they're going to see once they're discharged. Additionally, they record a few simple mental and physical health goals they'd like to pursue. Finally, they're helped to translate the information from their Personal Health Plan into a Portable Health Plan that fits into a purse or wallet. The portable plan contains the core information about what they'd like done if they go into crisis, along with a list of free hotlines they can use. The guide also contains multiple pages of resources that people can use to support their wellness.

JJ: Thanks, Judith, for describing this excellent tool! We're happy to offer Keeping Healthy after the Hospital as part of our Solutions Suite.

Announcer: Thank you for listening. You can obtain additional Solutions Suite recordings, or download a transcript, by visiting the Center's web site.