Citizenship and community inclusion: Why it matters and what we've learned from around the world.

yale
program
for
recovery
and
community
health

No one has any financial disclosures on this presentation.

5Rs

relationship

rights

Belonging

roles

resources

responsibilities

citizenship

- Recovering Citizenship Learning Collaborative
- Citizens Project
- Project Connect
- F.A.C.E. (Focus-Act-Connect-Everyday)
- Financial Health & Empowerment
- Arts collaborations (e.g., music, theater, magic)
- International Recovery and Citizenship Collaborative (IRCC)

Citizenship work in Connecticut and beyond
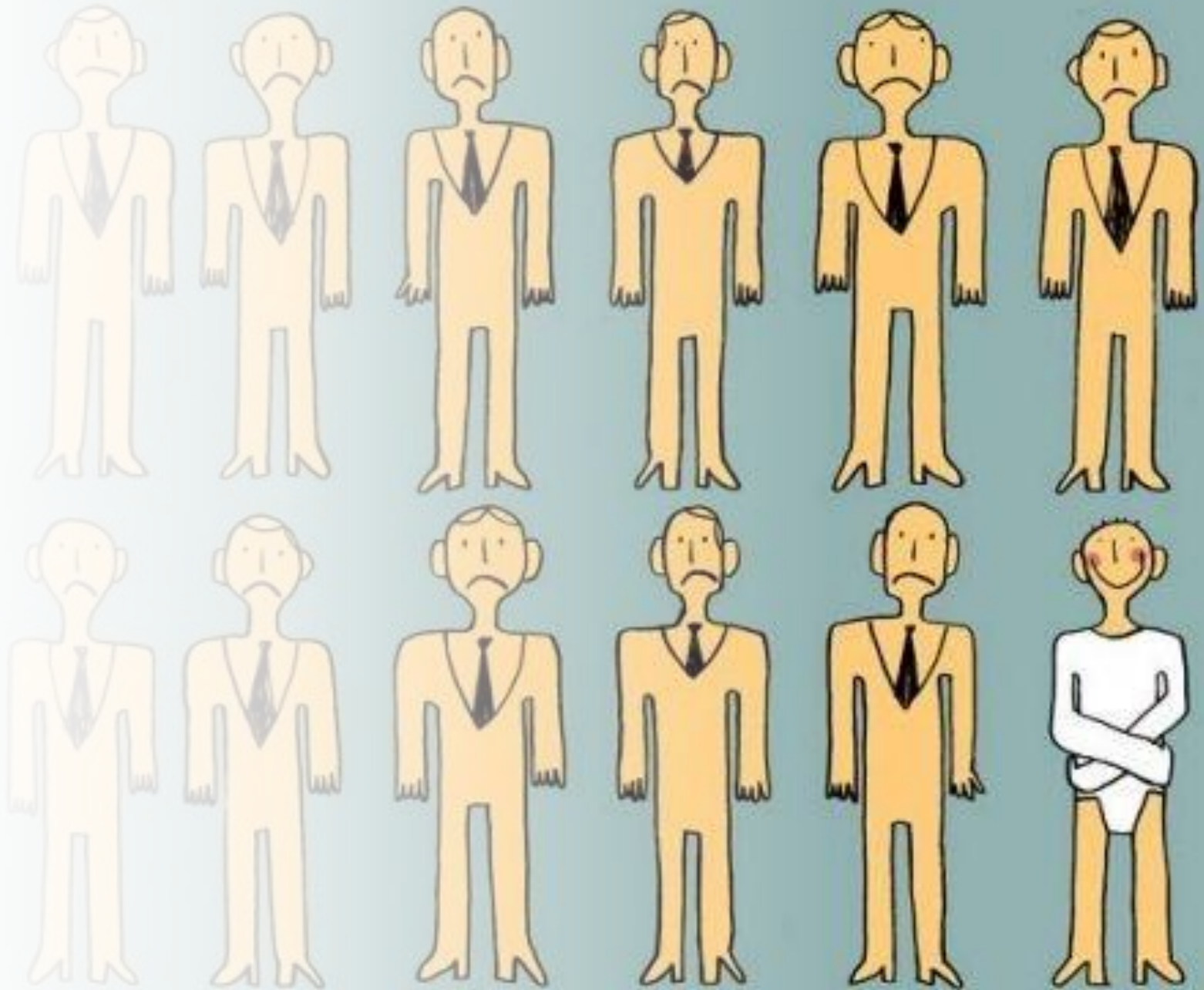
Citizenship AS mental health

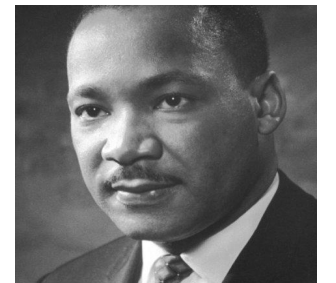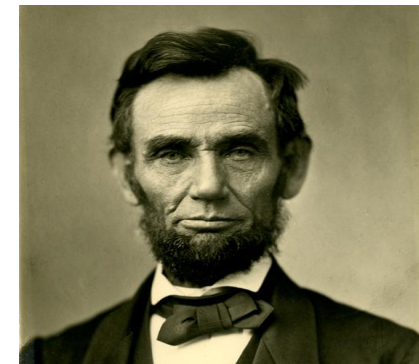# DISCRIMINATION
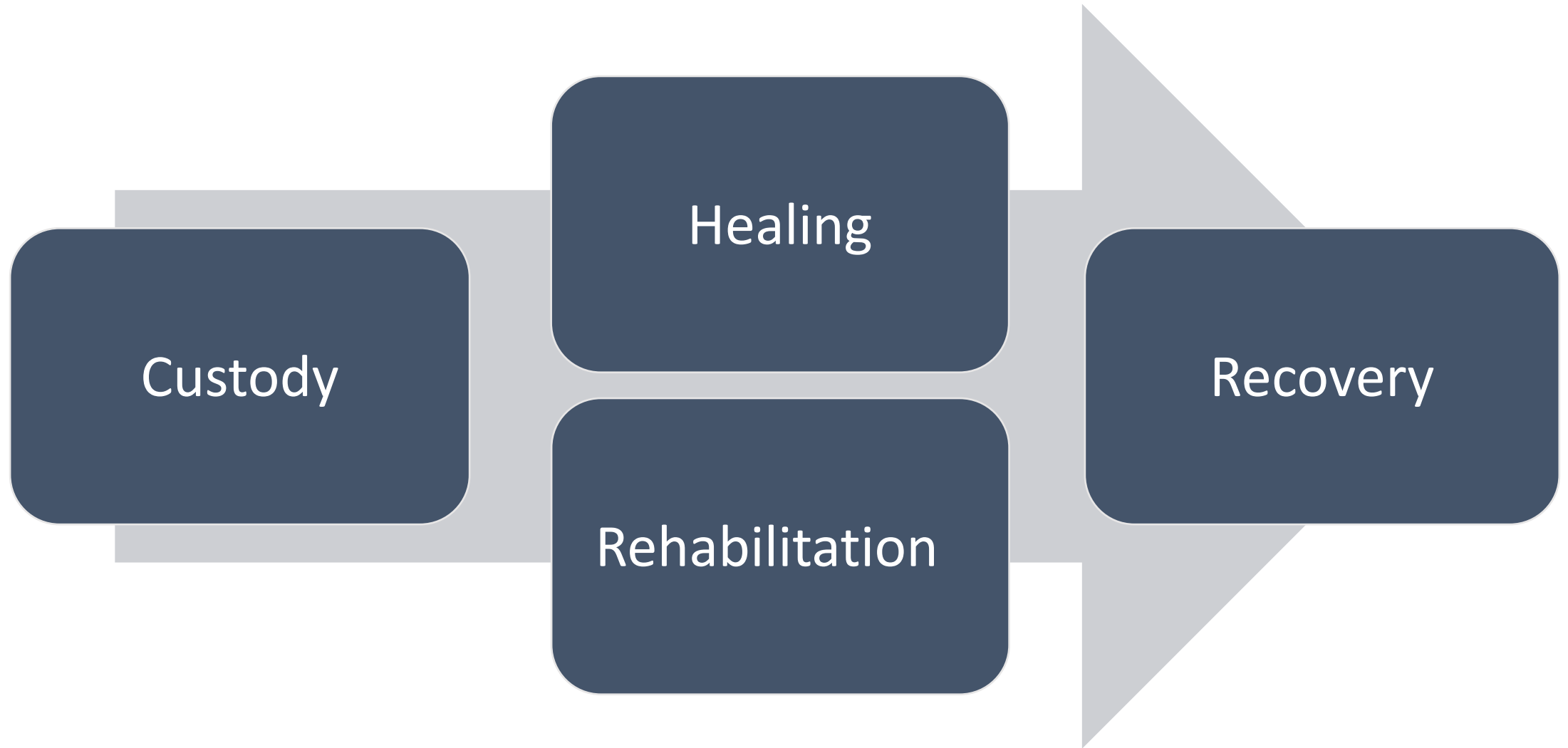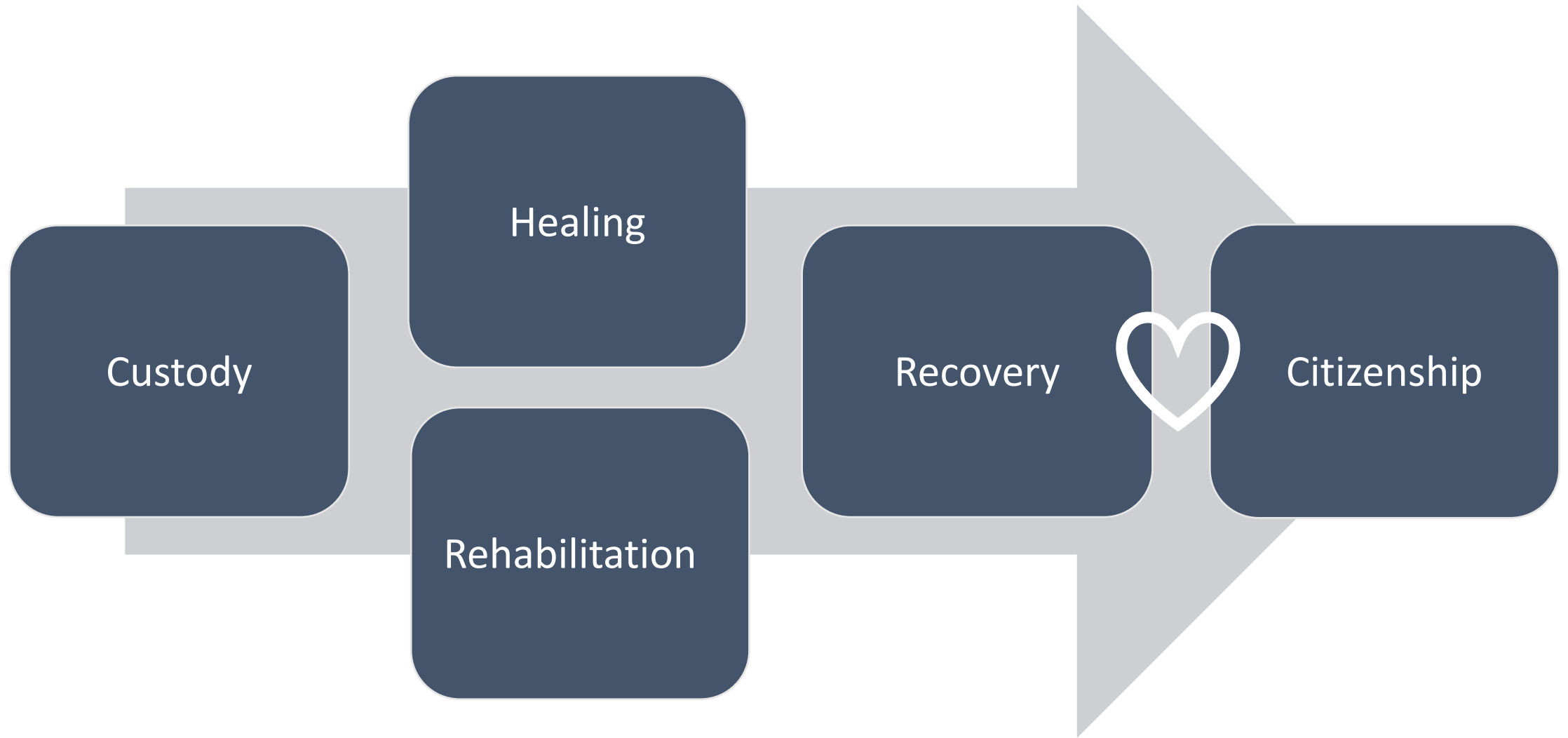
What makes these people different...
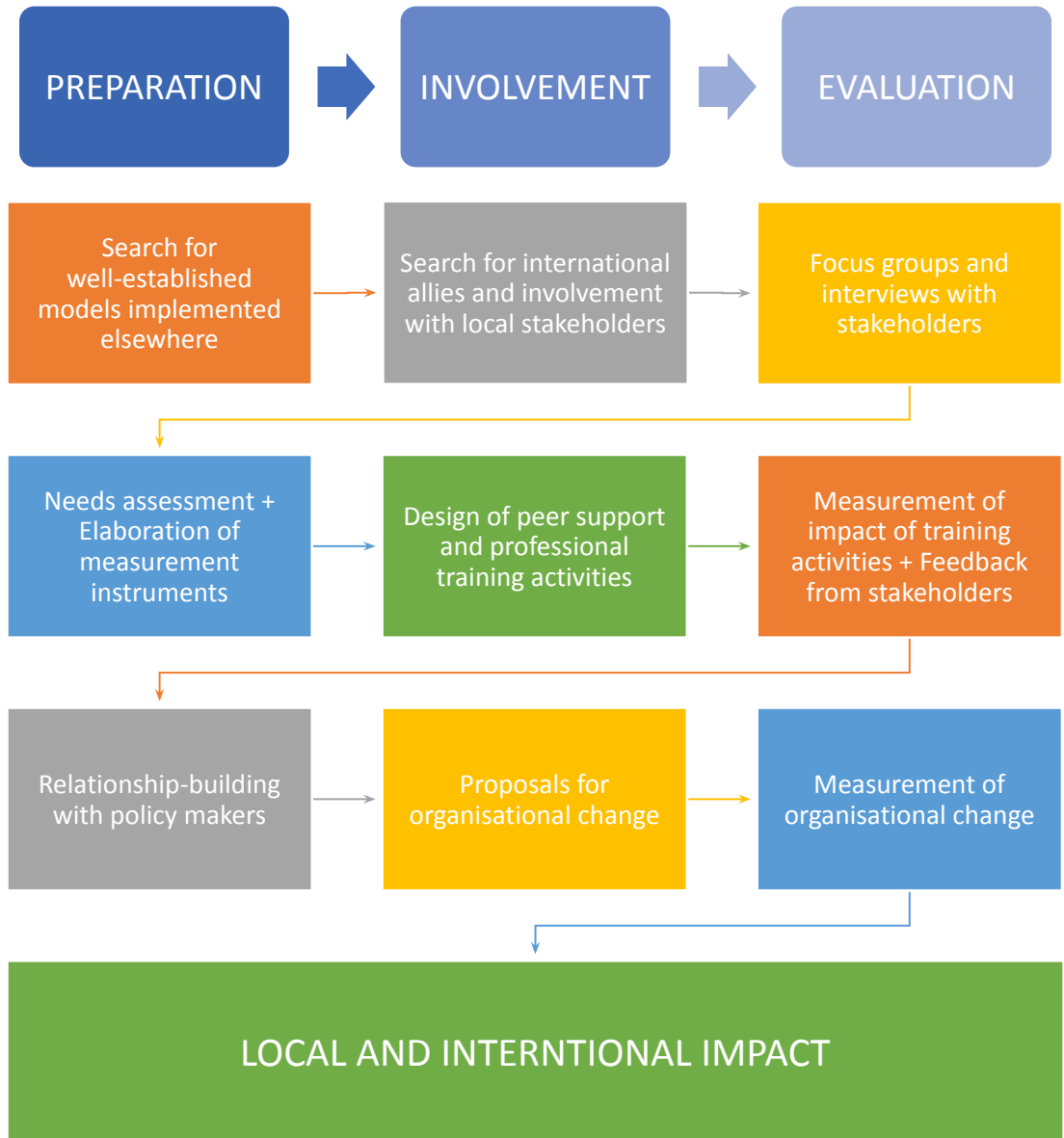
from these?

Mental health professionals' objectives

Custody

Healing

Rehabilitation

Recovery

Mental health professionals' objectives

Mental health professionals' objectives

Custody

Healing

Rehabilitation

Recovery
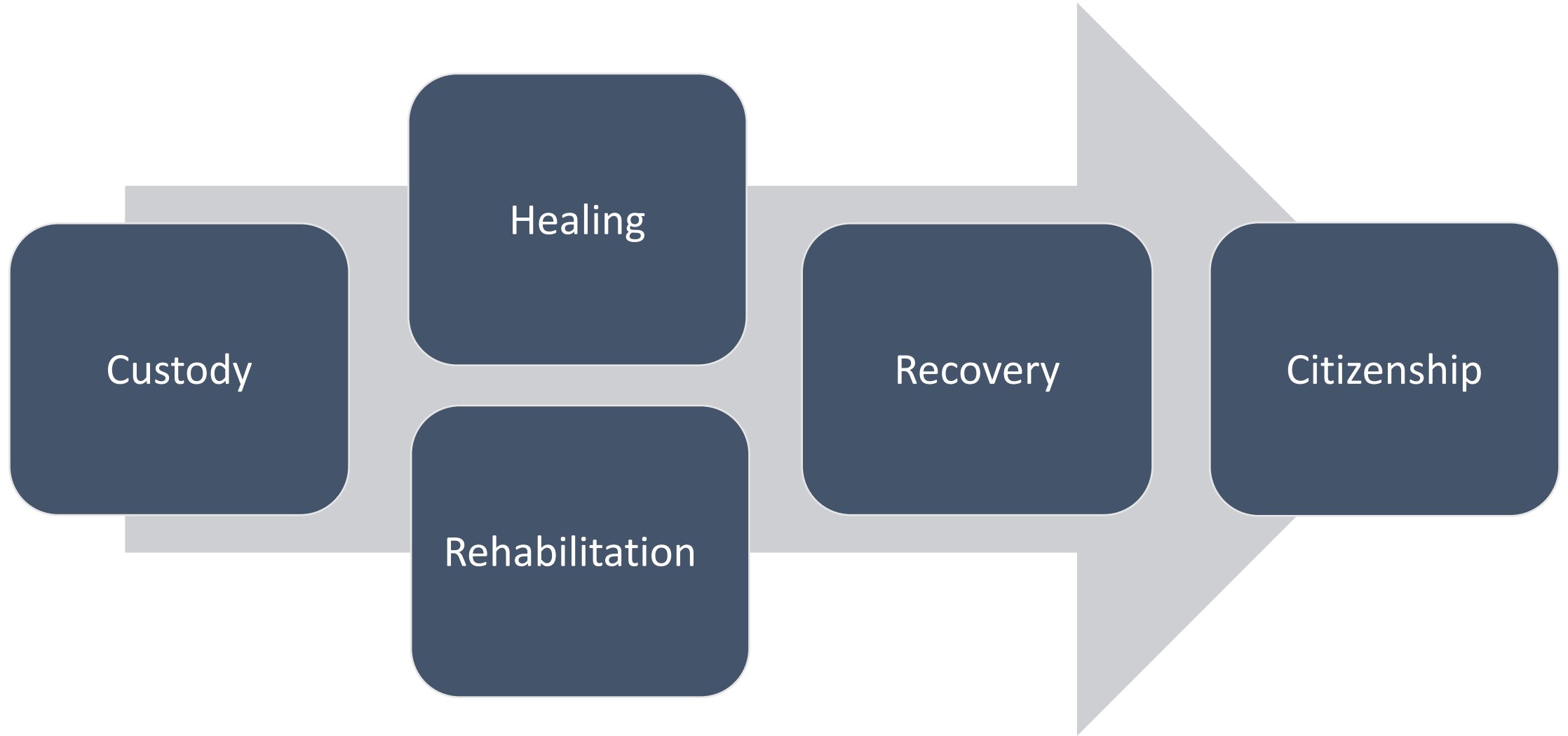
Citizenship

Process

Check for updates

Taking the Concept of Citizenship in Mental Health across Countries. Reflections on Transferring Principles and Practice to Different Sociocultural Contexts
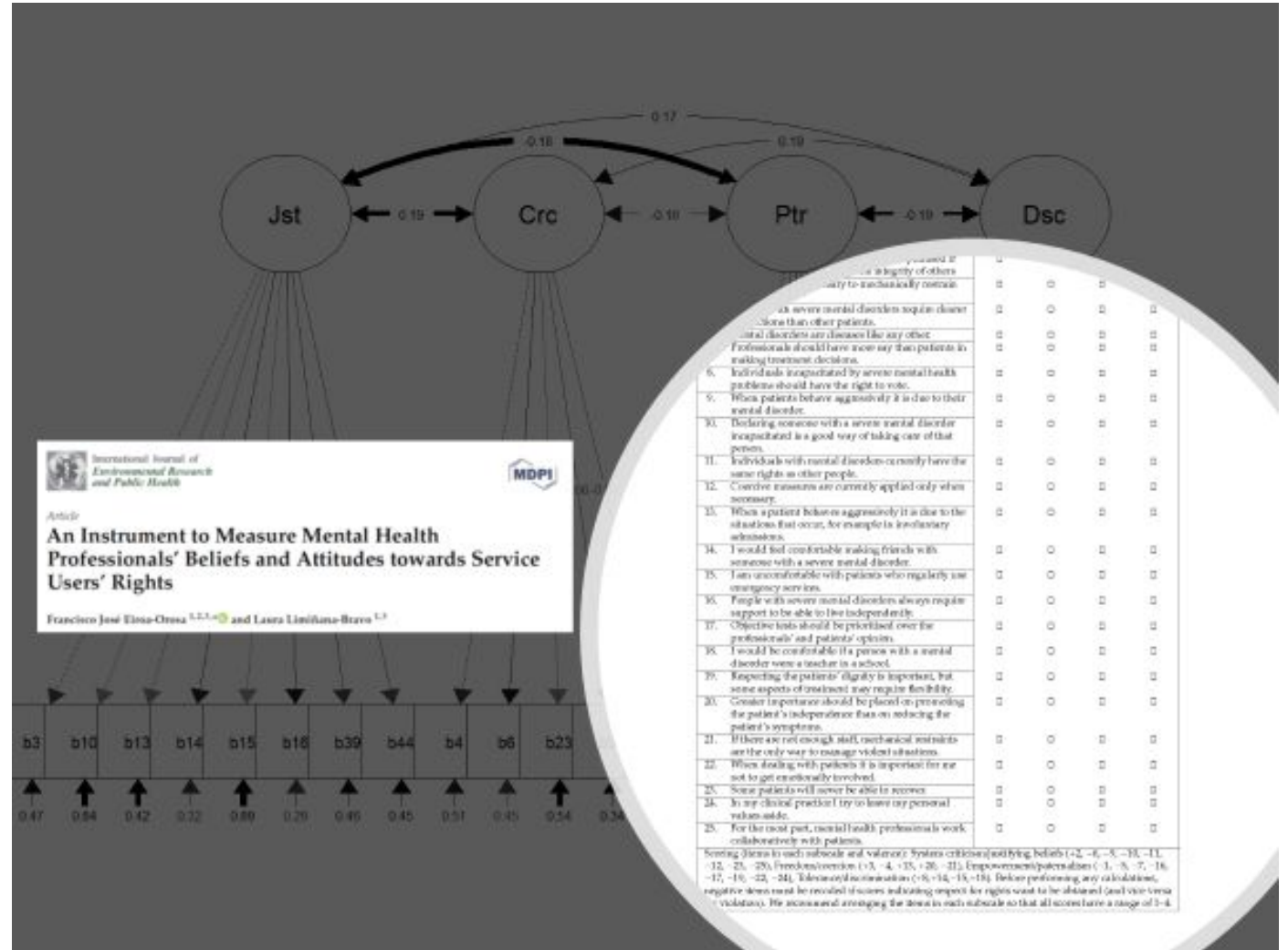
Francisco José Eiroa-Orosa[1,2]* and Michael Rowe[1]

PREPARATION → INVOLVEMENT → EVALUATION

Search for well-established models implemented elsewhere

Search for international allies and involvement with local stakeholders

Focus groups and interviews with stakeholders

Needs assessment + Elaboration of measurement instruments

Design of peer support and professional training activities

Measurement of impact of training activities + Feedback from stakeholders

Relationship-building with policy makers

Proposals for organisational change

Measurement of organisational change

LOCAL AND INTERNTIONAL IMPACT

Measure

Beliefs and Attitudes Mental Health Scale (BAMHS)

BAMHS Dimensions

- System criticism/justifying beliefs
  - Professional beliefs that justify or oppose the status quo.
- Freedom/coercion
  - Acceptance or rejection of coercion as a standard practice.
- Empowerment/paternalism
  - Adoption or rejection of paternalism in the form of guidelines and constant support, with emotionally distant and value-free practices.
- Tolerance/discrimination
  - Beliefs or disbeliefs of prejudices towards mental health service users.

Training

ORIGINAL ARTICLE

A Systematic Review and Meta-analysis of Recovery Educational Interventions for Mental Health Professionals

Francisco José Eiroa-Orosa[1,2,3] · Helena García-Mieres[1,4]

Results:

Positive results for beliefs and attitudes.

Not clear for recovery-based practice
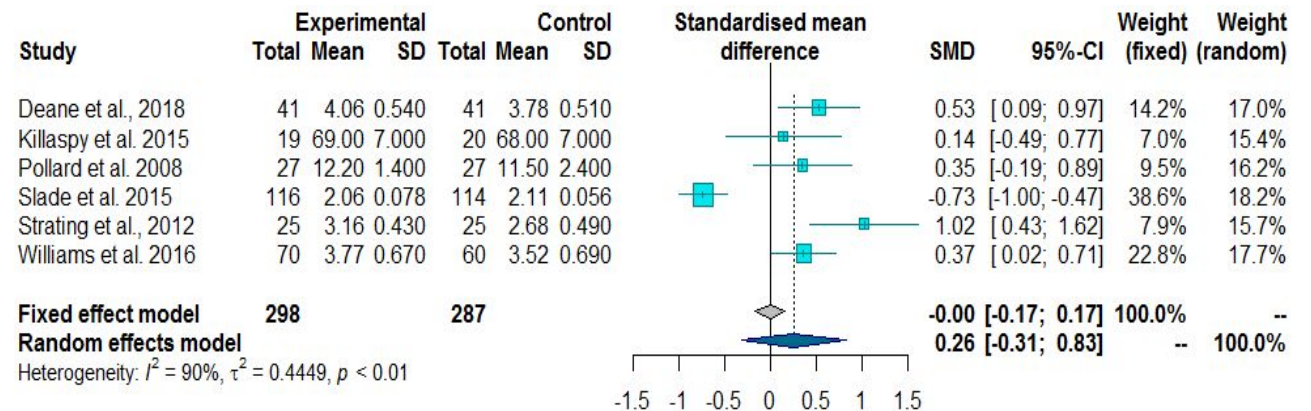
Training

Continuing education activities for mental health professionals

Evaluation

Results

frontiers | Frontiers in Psychology

Beyond recovery: toward rights-based mental health care — A cluster randomized wait-list controlled trial of a recovery and rights training for mental health professionals with or without first person accounts

Francisco José Eiroa-Orosa[1,2,3]*
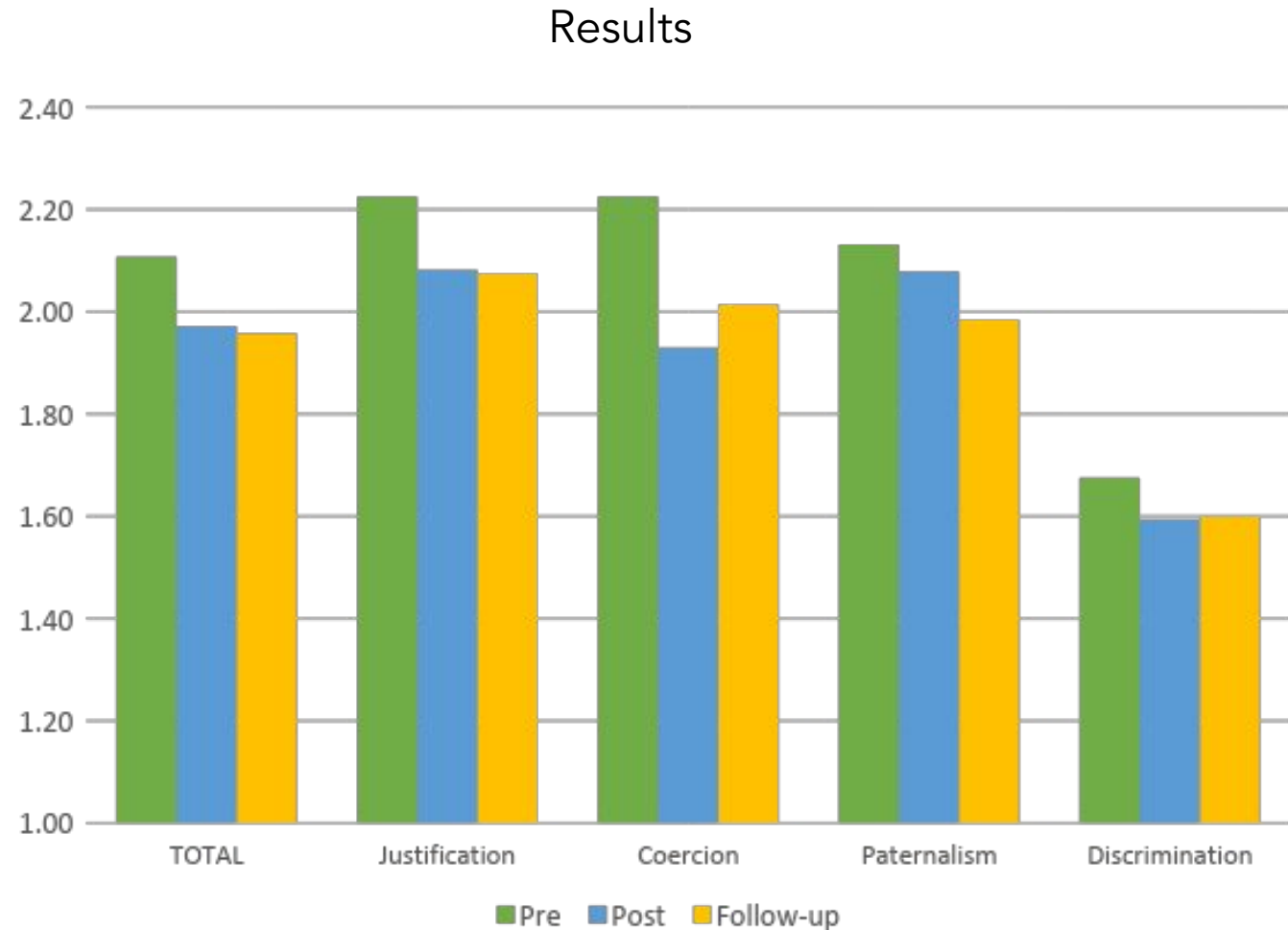
Awareness

Analysis tool

Analyzing Community Mental Health Programs Through the Citizenship Framework

A Learning Experience

FRANCISCO JOSÉ EIROA-OROSA

		Elements to Highlight (Parts of the program that we believe already deal with this dimension of citizenship)	Elements of Reflection (Parts of the program that we believe could be modified to deal with this dimension of citizenship more deeply)
Rights	Are there elements that help people to be more aware of their rights and/or learn strategies to exercise them assertively and respectfully?		
Responsibilities	Are there elements that help people to take responsibilities in an effective but realistic way according to their abilities?		
Roles	Are there elements that help people to exercise roles considering both their preferences and needs and those of other people in their family and community?		
Resources	Are there elements that help people to get and manage resources by themselves?		
Relationships	Are there elements that help people to establish relationships of mutual support and complicity with other people regardless of age, ethnicity, gender, social class, or any other characteristic?		

Awareness

Citizenship as mental health. A study protocol for a randomised trial of awareness interventions for mental health professionals

Francisco José Eiroa-Orosa

JOURNAL OF PUBLIC MENTAL HEALTH

Instead of treating aspects of citizenship as determinants of mental health, as is already the case but without a clear impact on changes in the care model, our proposal is to treat citizenship as the main outcome of any mental health intervention and treat psychopathology as one, among many others, of its determinants.

Integrated Health and Social Services Centre West-Montérégie (CISSSMO)

- South shore of Montreal
- 504 402 inhabitants
- 11 000 employees
- 3 727 km2 area

- Jean-François Pelletier : Specialist in Clinical Activities
  - Peer Support Work and Primacy of the Person
- Department of Mental Health and Addiction Services

Integrated Health and Social Services Centre West-Montérégie (CISSSMO)

Peer Support Workers (PSWs)

PSWs are persons with first-hand lived experience of mental health or addiction problems and who are further along in their own recovery journey.

Upon training, they can provide supportive services when hired to fill such a paid specialty position, as now recommended by recovery-oriented best practices guidelines.

Indeed, recovery focuses on how individuals can have more active control over their lives (agency).

It is characterized by a search for the person's strengths and capacities, satisfying and meaningful social roles, and mobilizing formal and informal support systems.

Peer support has thus become one predominant feature of the recovery paradigm and, as per their title and function PSWs are specialized in peer support.

Citizenship Measurement (CM)

Led by Pr. Michael Rowe, the CM was developed through a Community-based Participatory Research design in response to a prompt, suggested by persons living with MHPIs who were involved as research partners and research staff. The prompt was: *For me, being a citizen means…*

The French CM items spread out on the following five dimensions: (1) *Self-determination* (6 items, Cronbach's alpha = 0.67), (2) *respect by and for others* (4 items, Cronbach's alpha = 0.74), (3) *involvement in community* (4 items, Cronbach's alphas = 0.65), (4) *basic needs* (5 items, Cronbach's alpha = 0.60), and (5) *access to services* (4 items, Cronbach's alpha = 0.60).

Outcome Measures

Measures of personal-civic recovery (47 items)

Recovery Assessment Scale (24 items)

Citizenship Measure (23 items)

Clinical recovery

Anxiety State-Trait Anxiety Inventory Form Y6 (STAI-Y695) (6 items)

Depression Patient Health Questionnaire (PHQ-996) (9 items)

Alcohol Use Disorders Identification Test (AUDIT-1097) (10 items)

Drug Abuse Screening Test (DAST-1098) (10 items)

Psychosis Screening Questionnaire (PSQ99 12 items)

Social functioning: World Health Organization Disability Assessment Schedule (WHODAS 2.0100) (12 items)

A Clinical Tool Reserved to PSWs

An institutional Committee has the mandate to approve all clinical tools in use at CISSS-MO.

Once a new clinical tool is approved also by the Medical Archives, it is officially numbered.

To our knowledge, this is *première* for a public mental health setting

All PSWs will use the same 47-item clinical tool.

To guide and define the PSWs' individual and group interventions

To wright evolutionary notes in the medical records of service users

Possibility of multiple research projects, including longitudinal ones and in combination with other sources of data provided by the public system.

Citizenship in Scotland: learning from Professor Michael

Our early collaboration: funded by Horizon Europe – CRISP Project

Exchange visits between researchers, policy makers, practitioners and people with lived experience between Strathclyde University (Scotland), Yale University, New York University, Ulm University (Germany) Illinois Institute of Technology, Mieli Mental Health (Finland) and Mental Health Foundation (UK)

Focus on 4 key areas of mental health: citizenship, recovery, stigma and public policy

The main objectives of the CRISP network included sharing and disseminating learning in terms of 'what works' to promote citizenship, recovery and social inclusion in different social contexts. Particular attention was given to issues of intersectionality and how to promote social inclusion, citizenship, and human rights of people with lived experience of mental health problems.

Scottish citizenship model and measure

Stage 1: Concept mapping process

Stage 2: Multidimensional scaling & cluster analysis – developing the conceptual model

Stage 3: Pre-pilot – establishing relevance and clarity of statement items

Stage 4: Pilot of preliminary measure across diverse groups

Stage 5: Establishing validity and reliability of measure – sound psychometric properties

Involvement of peer researchers at all stages of the project

Grouped Scatter of DIM_1 by DIM_2 by Ward Method
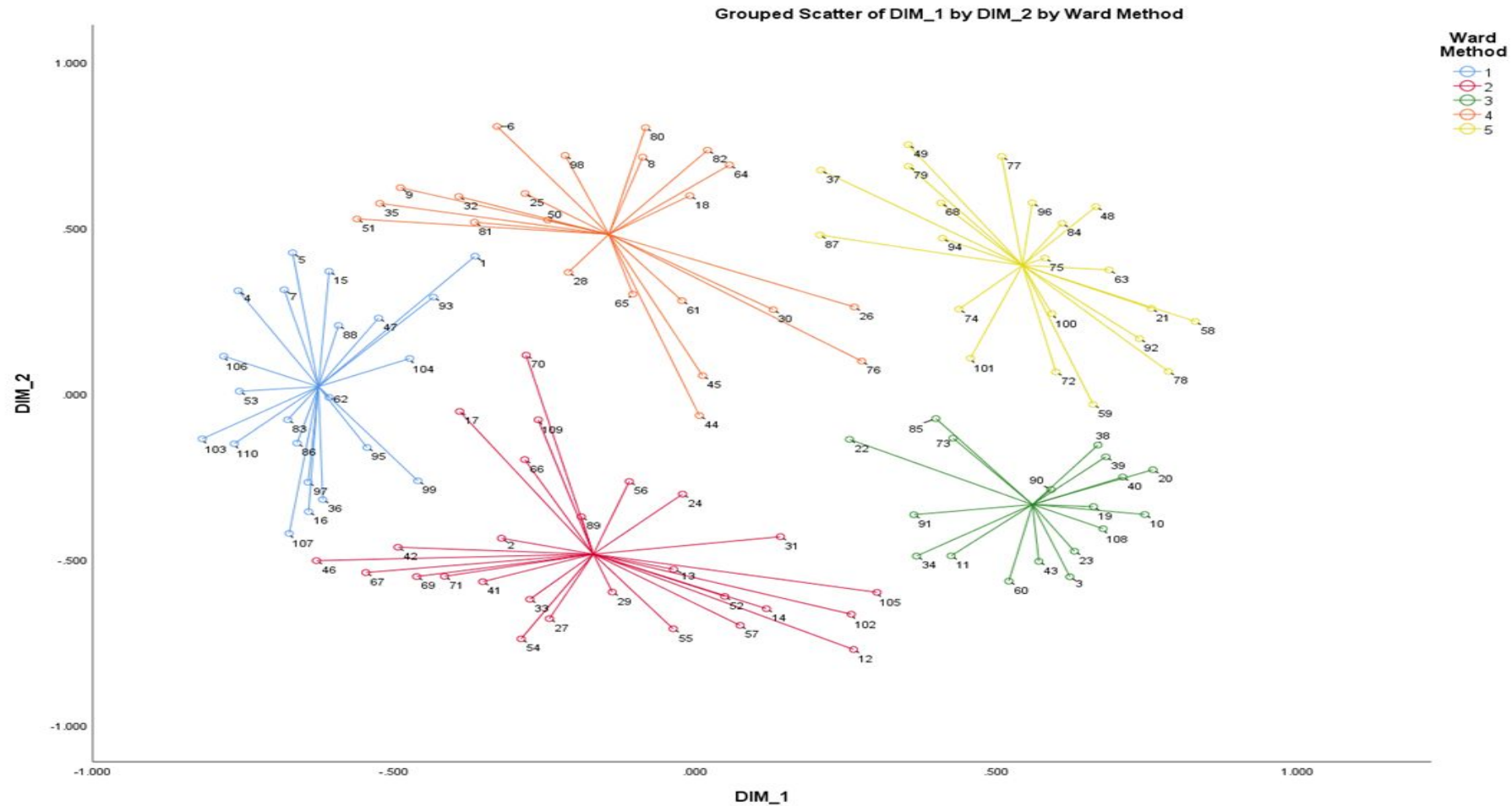
Scottish citizenship model and measure

Cluster 1: Building Relationships

Cluster 2: Acceptance and Autonomy

Cluster 3: Access to services and supports

Cluster 4: Shared values and social roles

Cluster 5: Civic Rights and Responsibilities

Citizenship as an approach and a philosophy underpins the organization's ethos and strategy

Connecting citizens project

Piloting the citizenship measure and developing a citizenship tool to be used across different projects to facilitate conversations

Use of the tool with different groups including asylum seekers and refugees and people with learning disabilities

- Sufficient resources, planning and preparation
- Provide appropriate recruitment, training and compensation for working with peer researchers
- Reflexivity – recognizing own blind spots
- Regular 'catch up' meetings
- Respectful culture of working together (MacIntyre et al, 2019)

Impact

Michael's ability to bring people together to share ideas in a space that feels safe, and welcoming is truly remarkable. His work and his manner have had a profound impact on me and many of us working in Scotland, Dr Nicola Cogan

It was one of the highlights of my professional career to work with Michael Rowe. He was incredibly generous with his time and work…his commitment to ensuring the inclusion of those with lived experience and greatly influenced our approach in Scotland, Dr Ailsa Stewart

Michael's impact was that he wanted to make sure that people were taken and made equal and knew what citizenship was…we took it back to Glasgow and learned a lot from him, Linda Hamill, Peer Researcher

Michael Rowe has been a fantastic collaborator and inspirational figure to me. His ideas on citizenship and the value he places on lived experience have taught me a great deal…His influence and legacy and profound… Neil Quinn, Professor of Social Work

Michael's work changed how I understand mental health and homelessness and gave us a conceptual map to work within…it provides a mechanism for staff to understand what they are doing and the difference they are making, Frank Reilly, Scottish Association of Social Workers

Michael believed in me…I will be forever grateful that I had the incredible opportunity to go to Yale…I will always cherish the experiences and immersing myself in Michael's work on citizenship…the ripple effects of which will be felt in so many people's lives for years to come, Dr Kirsten MacLean, former PhD student

Recovering Citizenship in Community Mental Health Services in Hong Kong
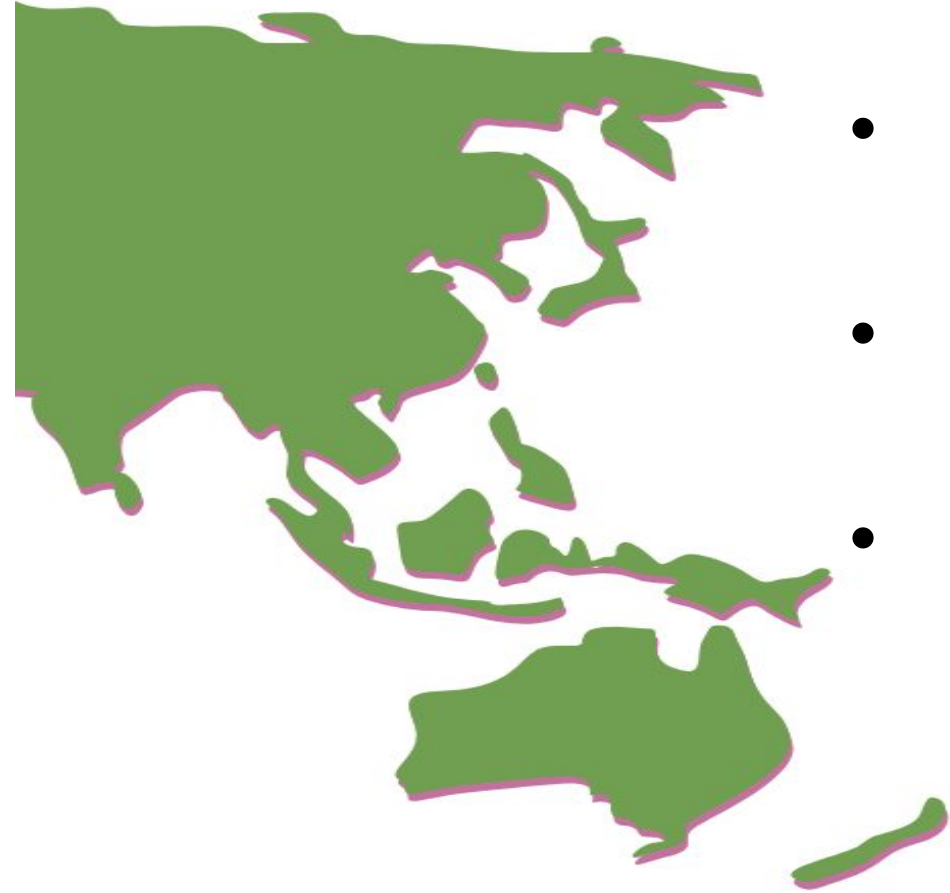
- Outline the milestones of Recovering Citizenship in Hong Kong
- Highlight major studies and community programs using RC
- Plans on RC development in mental wellness and community engagement

Milestones in Recovering Citizenship Development in Hong Kong

2019	Research Study Focus group study on the views of staff on incorporating the concept of RC into services
	Findings: •Staff members (social workers, peer supporters, rehabilitation workers, and admin. Staff) were generally supportive toward RC •Limited understanding on RC •Concerned about guidelines and protocols, and proper training
2019	Research Study The Chinese version of the Citizenship Measures
	Findings: •Same items (46) and domains as the original Citizenship Measures •Internal consistency: Cronbach's alpha = 0.961 (Excellent) •Test-retest reliability: Intra-class coefficient = 0.828 (Good)

Recovering Citizenship Development in Hong Kong

2020	Training in Yale PRCH
	Six staff members attended training at Yale PRCH, i.e. peer support workers, occupational therapists, clinical psychologist, and administrator

Citizens Project in Hong Kong

Oct 2020 – Present	Citizens Project in Richmond Fellowship of Hong Kong
	• Modeling the Yale Citizens Project; we organize this 6-month projects for people in recovery • Five Groups completed with 30 graduates (80% attend.) • Five graduates worked as helpers • 5 peer support workers, 4 occupational therapists, and 9 social workers were trained as facilitators • The Citizens Project continues as regular service in RFHK

RC-related Research Study

Jan – Feb 2021	Community knowledge and attitudes toward RC and mental illness
	• Interviewed 1009 subjects aged >18 years through a telephone questionnaire survey in Hong Kong • Good knowledge of mental health (MAKS mean score = 4.37 +/- 1.08) • Around half heard about a similar concept of RC with 79% - 94% agreed with the 5 Rs • Dissemination of the concept of RC and having PIR take up valued roles could potentially facilitate social inclusion and acceptance • Published on Journal of Public Mental Health in May 2023

Community knowledge and attitudes toward recovering citizenship and mental illness: a telephone survey approach

Fiona Yan-yan Wong, Keith Kin-lung Wong, Paul Chi-wai Lam, Lok-yan Chin and Cheung-tim Fung

(Information about the authors can be found at the end of this article.)

Abstract
Purpose – This study aims to assess the knowledge and attitudes toward recovering citizenship (RC)/5 Rs and mental illness of people aged ≥ 18 years in Hong Kong using a telephone survey approach.
Design/methodology/approach – A questionnaire comprised the Mental Health Knowledge Schedule (MAKS), Short Form-Community Attitudes Toward Mental Illness (SF-CAMI) and questions on attitudes toward RC/5 Rs, was administered on the phone.
Findings – A total of 1,009 respondents completed the telephone survey. A high mean score of MAKS (4.37 ± 1.08) was found with 68%–94% answering the knowledge items correctly. The mean score of SF-CAMI was 46.50 ± 8.74 with the most positive attitude toward fear and exclusion. Approximately half had heard about a similar concept of RC and 79%–94.3% agreed with people in recovery to possess the 5 Rs. Those with greater knowledge or more positive attitude toward mental illness, or knowing someone in recovery were more supportive toward 5 Rs. Those aged 18–44 years, attained a post-secondary education, were employed, and received a monthly income of US$3,861–6,434 were significantly more positive toward 5 Rs.
Originality/value – To the best of the authors' knowledge, this is the first study assessing the views of RC of people in the community. The sample had a good knowledge of mental illness but recognition of recovery from mental illness and a sympathetic view toward people in recovery can be further improved. Besides promotion programs, dissemination of the concept of RC and having people in recovery take up valued roles in the community could potentially facilitate the acceptance of social inclusion and acceptance in the community.
Keywords Recovery, Recovering citizenship, Mental illness, Community integration, Mental health knowledge, Attitudes
Paper type Research paper

Introduction

Knowledge and attitudes toward mental illness have been widely studied across cultures. Studies involve identifying symptoms and causes of different mental disorders, social distance, reactions and behavioral intentions toward people with mental illness are commonly measured (Jorm, 2012; Link et al., 2004). People with mental illness were still regarded as dangerous and potentially violent although the concept of mental health recovery has been promoted over 30 years (Davison and Strauss, 1992). In recent years, these attitudes have decreased somewhat although social distancing from and rejection of people with mental illness still exist (Angermeyer and Dietrich, 2006; Link et al., 1999). Systematic reviews revealed the increase in public mental health literacy, however, this trend had limited positive impact on the public's attitudes toward mental illness (Morgan et al., 2018; Schomerus et al., 2012).

Previous studies that examined knowledge and attitudes toward mental illness in Hong Kong were usually targeted at particular populations such as secondary and university

Webinar on Recovering Citizenship

May 2022	Asia Pacific International Mental Wellness Webinar 2022
	• Prof. Michael Rowe gave a keynote speech on the RC approach in mental health • RFHK shared practice experience in local implementation of RC

Board Game Kit on Recovering Citizenship

2022	RC Board Game
	• Designed by the RC Team of RFHK • A game about the recovery journey of PIR, focusing on the 5 Rs and 1 B. • Playing the game with PIR as introduction to RC • Promote RC to community stakeholders.

RC in Casework and Community Programs

2023	**Pilot-testing the Citizenship Measures-Brief (12-item)**
	• Use as an interviewing tool for new cases in community service
	• To facilitate clients to explore their 5 Rs and 1 B to the community
2023	**Incorporating RC concept into community programs**
	Environmental Volunteers Program • To enhance the roles and responsibilities of PIR in the community, and encourage relationship with other people.
	Warm Dormitory (Visiting residents who lived in our half-way houses) • To maintain connection with people and facilitate community belongingness

- To share the latest knowledge and experience in mental wellness
- To advocate recovery and recovering citizenship of people-in-recovery
- To share the experience of RC in the U.S., New Zealand, Australia and Hong Kong

Future Plans on Recovering Citizenship

The main strategic plan strives to further the implementation and promotion of Recovering Citizenship in Hong Kong

- Citizens Project: Localization to meet the needs of PIR; Training graduates to be facilitators
- Validation of the Citizenship Measures-Brief
- Incorporating the 5 Rs into community and service programs
- Promoting RC across community stakeholders

Claiming the Rights of Citizenship with Positive Behavioral Support

Using PBS as a means to gain citizenship from behind the locked doors to the community

- (PBS) Positive Behavioral supports is a method for understanding why concerning behaviors may occur within inpatient (or other) settings and aims to:

  - Seek understanding of why the behavior occurs (using a functional analysis of behavior)
  - Teach new skills to the individual to render the concerning behavior no longer needed
  - Equally important to teach new individual skills *and ecological changes to environment*
  - These behaviors are varied: harm to self, harm to others, suicide attempts, verbally abusive behavior, behavioral inactivation, behaviors to seek containment by seclusion/restraints, etc.

  AVOIDS ALL COERCION and PUNITIVE MEASURES

HOW PBS maps on to the ideals of citizenship

- Use of PBS at its core is to help every individual have a meaningful life and one within the community where they have the 5 R's (valued roles, their rights, personal responsibilities, resources, and relationships)

  - Is focused on a *person-centered approach and regaining a life of meaning*
- Takes into account the sociopolitical experience of SMI impacting onset of behaviors and the ability to make change and have a meaningful life

    - Thus some of our basic mechanisms for change are targeted at helping them with gaining elements of citizenship (rendering concerning behaviors less useful or desired)

From us vs. THEM ➝ Enacting rights of Citizenship

- Focus on helping the community hold more value, become welcoming, and more meaningful than locked inpatient settings (where people may have been institutionalized for long durations)

- Empowers people to lean into personal responsibilities for self-regulation of emotions and behavioral urges and also into their responsibilities for leading their team into helping actualize:
  - Housing that personally works
  - Meaningful work and/or hobbies
  - Relationships that are mutual and bring support
  - Right to choose where to live, where to get services, right to decline tx, right to be a neighbor, to vote, to work, to date, to oppose conservatorship or which conservator

- Focus of PBS and shift to Citizenship can't just come from the individual
  - Have to be strong advocate with community partners and help build connections, pathways, and pressure systems and community to alter/take "risks" – be CREATIVE!
    - Ask systems to bend (make new ways and opportunities)

    - Advocacy within communities for openness for all individuals

- Advocate for reality that we all as a community suffer if certain people are left out and inclusion of all people helps all people in community together

Empirical Support & Building

- Methods of PBS does help decrease concerning behaviors and more effective, skillful behaviors over time

- Thus, helping people move and shift more towards being able to engage in the full rights of citizenship (Carr & Hillbrand, 2022)

- Other articles in submission stage and building empirical support.

Thank you!

References

Carr, E.R., & Hillbrand, M. (2022). Positive behavioral support assessment and intervention for individuals with SMI and criminal justice involvement. *Psychological Services,* 19 (2) 225-233.

Rowe, M. (2015). *Citizenship and mental health.* New York: Oxford University Press.

Sylvestre, J. (2017). Housing, citizenship, and communities for people with serious mental illness. In J. Sylvestre, G. Nelson, & T. Aubrey (Eds.), *Housing, citizenship, and communities for people with serious mental illness: Theory, research, practice, and policy perspectives* (pp. 371–380). New York: Oxford University Press.

Modini, M., Tan, L., Brinchmann, B., Wang, M. J., Killackey, E., Glozier, N.,… Harvey, S. B. (2016). Supported employment for people with severe mental illness: Systematic review and meta-analysis of the international evidence. *The British Journal of Psychiatry*, *209*(1), 14–22.

Collective Citizenship

- Response to individualizing tendency of mental health service systems

- Power rests within the group, rather than being possessed or portioned out by a paid professional

  - Professionals can play important roles as *common-cause partners*, not as designated leaders

  - A *shift in power* from social service providers to community members with lived experience of marginalization has to occur

- Does not replace individual's personal rights, but rather provides relationships & mutual support to act collectively to secure rights

Applying Collective Citizenship in New Haven

- Focus Act Connect Every-day (FACE)
- Witnesses to Hunger and the Unhoused Activists Community Team (U-ACT)
- Teaching psychiatry residents and psychology fellows

Citizenship as Community

Questions and Thought

For more information: The Yale Program for Recovery and Community Health < Yale Program for Recovery and Community Health

Research < Yale Program for Recovery and Community Health