

# [Recovery is rediscovering purpose and meaning nursing essay](https://assignbuster.com/recovery-is-rediscovering-purpose-and-meaning-nursing-essay/)

Recovery is rediscovering purpose and meaning after irregular events after a person suffers from mental illness and ability to live t he life normally. According to the Mental Health in England, 2004 states recovery as achievement of quality which is acceptable to a person or Achieving a state of wellness or process of recovering or act of obtaining usable resources or Process of restoring or gaining something(Clarke, V et al 2007). The four stages of recovery includes hope, responsibility to self, meaningful role and shift from protective focus to empowerment and reduction of harm.

Recovery model is the first mental health model developed conjointly by the people and mental health nurses. The recovery models used in practiceinclude Tidalmodel, Strength model and Wellness Recovery action plan.

a)Tidal Model:

The tidal model or recovery model developed by Barker is a philosophical approach used as the means of interdisciplinary mental care and recovery. It brings self-recovery and management and mainly focuses on patient centered care. This focuses on continuous change process and emphasizes on the patient’s wisdom and voice and empowering them to lead their own recovery. Thismodel follows six philosophical assumptions :

a faith in curiosity

identification of the power of resourcefulness, rather than focusing on problems or weaknesses

acceptance of crisis as opportunity

acknowledging and identifying that all objectives must belong to an individual self

respect for the person’s needs and wishes

the virtue of pursuing elegance-wanting the simplest possible means

The individual or the patient is represented b three personal domains which are self, others and the world. This model asserts that mental well-being depends on life-experiences of an individual including the sense of perceptions, self, actions and thoughts. The values of this model can be distilled into ten commitments which include:

1)Value of choice

2)Respect and allowing people to use any language

3)Develop curiosity and interst in a peson

4)Revealing wisdom from personal experience.

5) Becoming an apprentice

6) Using the person’s story containing information regarding the working of an individual

7) Being transparent with both the patient and the caretaker at all times will ensure understanding of the operation between the two.

8) Knowing that change is steady

9) Knowing the importance of time and using it properly.

10) Analyzing together to know the next step.

This model also give twenty competencies to aid with the auditing regarding the recovery practices undertaken the health practitioners which will ensure an individual towards full recovery faster and efficiently and are related to the ten commitments(Nursing Theories 2012). The first recovery-focused model of mental health nursing recognised internationally as a significant mid-range theory of nursing. The Tidal Model is one of the few recovery models to have been evaluated rigorously across different settings, in different cultures.

The Strengths Model: ( NSW Consumer Advisory Group2009)

The principle governing this model includes:

focus on person’strength

perceive community as collection of resources.

Clinician to client relationship is essential and primary.

Interventions need to e self-determined y the patient

Assertive outreach in the intervention mode

Patient can continuously grow, learn and change

The Wellness Recovery Action plan:

It is a recovery system and self-management plan designedto mantainwellness, increase responsibility, decrease symptoms and improve quality of life. It teaches the clients to identify and monitor symptoms and to use personal, safe skills, support to reduce the symtoms. Also include early detection and care plan.

Besides the recovery model , there are few recovery tools for mental health workers and staff which include collaborative recovery model, recovery self-assessment and Australian mental health work qualification and training. The table shos an overview of recovery oriented practices with traditional services.

(Source: Destination Recovery, Mental Health Foundation of New Zealand 2008 cited in NSW Consumer Advisory Group 2009)

Conceptual model of mental health:

Mental health nurses approve conceptual model as vital in respect to treatment, aetiology and other factors which asserts the role of nurses, role of health services and influence improvement in psychiatric treatment of patirnts. They include psychoanalytical, interpersonal model, social model, supportive therapy and existential models(Carlyne, D 2012, p. 221).

Pyschoanalytical model(Stuart, G 1995):

This model was first developed by Sigmund . It focused on the nature of unusual behavior

a) The view of behavioural deviations: based on adequate resolution in various stages of developmental conflicts.

b) The therapeutic process involve use of techniques of dream analysis and free association and identifying problem area by analysing through patient’s transferences and resistances.

c)The patient needs to verbalize all dreams and thoughts and the therapist remain remote to the problems .

Interpersonal model:

This is developed by Sullivan. This model stresses the value of inter-personal relationships.

The view of behavioural deviations : It says that behaviour potrays around interpersonal relationships and behaviour is based on two drives which is the drive for satisfaction and the drive for security(Otong, A 1994).

The therapeutic process includes building relationship between the patient and therapist, herby building faith, having sense of security and gain interpersonal satisfaction.

The patient shares his emotions and feeling with the therapist and therapist can show empathyto understand his client’s feelings and use as positive experience.

Social Model:

Social model focus on the environment which effects the person and the life experience.

a)The view on behavioral deviation include environmental and social factors which create stress and anxiety and deviant behavior.

b)The therapeutic process includes exhibiting freedom of choice regarding social supports, environmental manipulations and intervention during crises etc.

c)The patient should share his problem to work on the problem collectively and the use of social systems and resource and services available till the patient achieves satisfaction.

Existential Model(Varcolis et al 2005):

This model focuses on the person’s experiences in the present and acceptance of self.

The person with deviation in the behaviour and being self-alienated , slef-criticizing and lack of self-awareness making the patient feel sad, lonely and helpless.

The therapeutic process includes conducting therapy is groups , assuming control on behaviour and giving encouragement to accept self.

Patient get to know his self and therapist helping his patient to understand the value of self, exploring feelings and guide to stay in reality.

Supportive Therapy model:

This model is used widely in community and hospitals.

a)The change in behavior is due to biophysical factors and emphasizing on coping strategies.

b) The therapeutic process involves enhancing self-esteem, enlisting of social supports and reinforcing coping responses.

c) Patientis nvolved in therapy actively and the therapist show empaty and care towards their patient.

Medical Model:

This model focus on conventional relationship between health care professionals and patient.

The disruption is behaviour is due to problem in central nervous system. And symptoms result due to various factors.

The medical process includes patient examination and the conventional procedures for treatment.

The patient undertakes the therapy prescribed and therapist diagnosis and commences the therapeutic approach(Videeck, 2004).

Nursing process:

Mental health nurses have adopted problem solving method for the implementation of these models. This problem solving strategy helps the nurses to work in a logical, structured and coherent manner.

## Elements of a nursing process

(Source: Clarke, V et al 2007)

Components of recovery include:

The goal of both models is sharing information with the customers and exposing the best practices, approach, activity with the help of clinicians and community support to reach optimum functioning and recovery. Furthermore, this models integrate psychosocial, cultural, neuroiological, spiritual principles and concepts that give rise to wide problems and disorders. This would give nursing plan care for the patients and developing therapeutic relationship with the client based on empaty, trust, honesty, validation and active listening in a collaborative way to empower and draw inner strength and resources in addition to treatment implemented with the help of community nurses who work with people in their own homes and psychiatric mental health nurses and admiral nurses who specialize in caring for older population. However, to make this a reality work needs to e done at individual level, shift in service culture and staff attitudes and at systems level by having greater awareness of mental illness and focussed efforts toeliminate discrimination and stigma and awareness on human rights too. Additionally, the language used to potray mental illness needs to dramatically shift from being deficit to being reframed to build empowerment and hope.

These models emphasizes on the importanceof evidence-based research and practice in mental health nursing and also have a basic understanding of mental health care for newly registered nurses(Clarke 2007, p. 21). This brings anholistic approach togrowth and recovery.