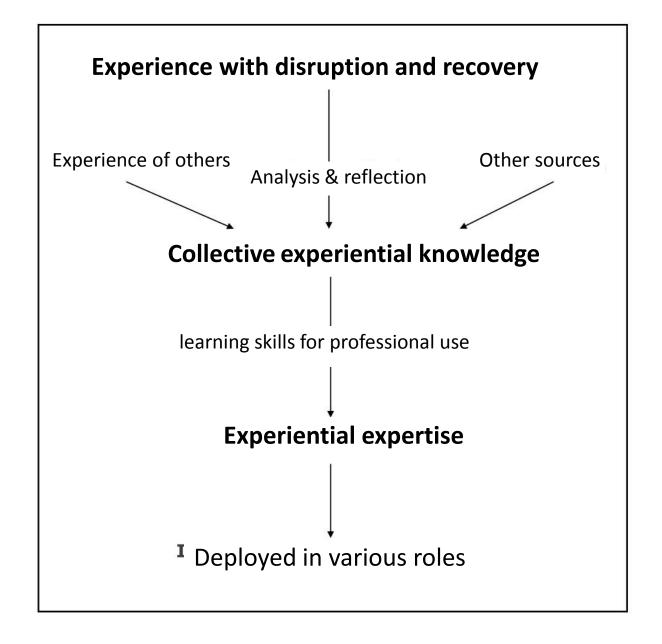
The road from own experience to experiential expertise



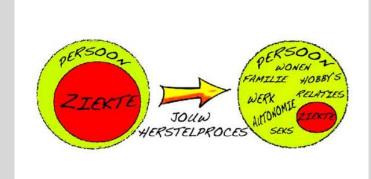
Bron: Hilko Timmer, coördinator Bureau Herstel SBWU.

Recovery – multiple definitions

- World Health Organisation (1948)
 - A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity
 - **→** 95% of the present healthcare budget is spent on medication and intervention.
- Bill Anthony (1993)
 - A deeply personal, unique process of changing one's attitudes, values, feelings, goals, skills and/or roles.
 - It is a way of living a satisfying, hopeful, and contributing life even with limitations caused by the illness.
 - Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of mental illness.
 - Recovery from mental illness involves much more than recovery from the illness itself.
- Machteld Huber and Marja van Vliet, 2014
 - Health as the ability to adapt and self-manage, in light of the physical, emotional and social challenges of life









Recovery supported care

NOT: Insert recovery support in treatment and or support

BUT: Inserting treatment and support into recovery processes

De three main tasks

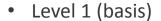


- Support in individuals recovery processes;
- Organisation of recovery supported care;
- Emancipatory influencing of social processes and destigmatisating
- Two important pillars:
- 1. Methodigal self management
- 2. Emancipation

Task of the Peer Support Worker	Level	1	2	3
1. Facilitates diagnosis-free space and invites you to use it	client	+++	+++	+++
2. Supports the individual recovery process	client	+++	+++	++
3. Provides requested social and practical support	client	++	+++	++
4. Guides groups of people in recovery	client	+	+++	+++
5. Peer avocadcy	client	+	+++	+++
6. Contributes to the organization of recovery support care	organisation		++	+++
7. Contributes to coaching, training and the promotion of expertise of regular care providers and peer experts	organisation	+	++	+++
8. Advises teams, management and Staff departments in care programs and policy	organisation		+	+++
9. Develops and participates in relevant networks	organisation		++	+++
10. Establishes and maintains contact with social parties for the purpose of creating social opportunities	organisation			+++
11.Contributes to education and research	organisation	+	+	+++
12. Reflects on one's own actions aimed at the sustainable development of a learning inquiring professional attitude	profession	++	++	+++
13. Maintains own expertise	profession	++	+++	+++
14. Contributes to professional development and professional deployment of peer expertise	profession	+	+	+++

Competence = Knowledge + Insight + Skills + Attitude + Personal characteristics

Competences → provide adequate results			to be able to use peer expertise and to facilitate recovery				
	GENERIC COMPETENCES basic attitude = transcending	SPECIFIC COMPETENCES for specific (core tasks)	Level 1	Level 2	Level	SPECIFIC PROFESSIONAL KNOWLEDGE AND PROFESSIONAL THEMES	
1.	Non-medical language	Contact and communication skills in individual contacts and with groups	++	+++	+++	Knowledge areas recovery and recovery support	
2.	To be able to view meaning critically and openly	2. Being able to use own experience in an empowering manner	++	+++	+++	Knowledge theoretical knowledge areas	
3.	Unprejudiced listening	3. Act methodically	++	+++	+++	3. Practice-oriented knowledge areas	
4.	Reciprocal input with respect for difference	4. Collaborate	+	++	+++	4. Contextual knowledge areas	
5.	Flexible handling of boundaries	5. Conceptual and normative thinking	+	+	+++		
6.	Understanding and confidence in recovery	6. Informing, advising, coaching and education	+	++	+++		
7.	Understanding of and for conflicts	7. Self-management and self-handling	+	++	+++		
8.	Reflection and introspection	8. Peer avocadcy	++	++	++		



- Level 2 (senior/ specialist)
- Level 3 (advisor/ coordinator)



- Complexity
- Transfer
- Independence
- Responsibility

