Application of Solution Focused Coaching in Occupational Therapy for Mental Health Recovery in Hong Kong

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18 May 2015

HA Convention 2015
Outline

- What is Mental Health Recovery?
- Occupational Therapy and Mental Health Recovery
- Mental Health Recovery and Solution Focused Approach
- What is Solution Focused Approach and Coaching
- The OSKAR Coaching Model
- Case illustration
- Conclusion
Mental Health Service
From Institutionalization to Recovery

INSTITUTIONALIZATION
Medical Model
- diagnosis, symptoms, and medication
- clinical recovery i.e. recovery from mental illness
- patient restriction, separation from community

COMMUNITY-BASED Rehabilitation Model
- deficits and lifestyle training
- functional independence
- Linking with Community

COMMUNITY MEMBERSHIP
Recovery Approach
- Empowerment
- Self Determination
- recovery in mental illness
- citizenship role
- contribution to Community

De-institutionalization
De-stigmatization
Recovery Movement in Mental Health

- Emerged in the 1980’s
- Recovery experiences of mental health service users
- Longitudinal research

### Seven Long-Term Studies

<table>
<thead>
<tr>
<th>Subjects Recovered and /or Improved significantly*</th>
<th>Sample Size</th>
<th>Average Length in Years</th>
<th>Study</th>
</tr>
</thead>
<tbody>
<tr>
<td>62-68%</td>
<td>269</td>
<td>32</td>
<td>Harding et al. (1987a &amp; b) Vermont</td>
</tr>
<tr>
<td>57%</td>
<td>140</td>
<td>22.5</td>
<td>Ogawa et al. (1987) Japan</td>
</tr>
<tr>
<td>49%</td>
<td>269</td>
<td>35</td>
<td>DeSisto et al. (1995 1 &amp; b) Maine</td>
</tr>
</tbody>
</table>

*For Schizophrenia Subsamples

- Get better
- Cope well with symptoms
- Re-establish self-identity
- Resume work and life roles
## Mental Health Recovery in Hong Kong

### Mental Health Service Plan (HA, 2010)

- **The vision of the future** is of a person-centred service based on effective treatment and the **recovery** of the individual.
- **Focus on recovery** and social inclusion
  - Inpatient care only when indicated
- Patient-centred service delivery with **engagement** of the users
What is Mental Health Recovery?

<table>
<thead>
<tr>
<th>Mental Health Recovery</th>
<th>Clinical Recovery</th>
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<tbody>
<tr>
<td>reclaiming positive self-identity, meaningful and contributing life</td>
<td>reducing symptoms and deficits</td>
</tr>
<tr>
<td>Striving to reach full potential</td>
<td>enhancing functional improvement</td>
</tr>
<tr>
<td>taking recovery as a process of personal growth &amp; development</td>
<td>targeting recovery as treatment outcome</td>
</tr>
<tr>
<td>Taking responsibility by service users with peers and family support</td>
<td>relying on experts and professionals</td>
</tr>
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</table>

- Not a linear process

SAMSHA, 2011

William A. Anthony, PhD
Professor & Director,
Center for Psychiatric Rehabilitation,
Boston University

Patricia Deegan, PhD
User & Research Psychologist
Adjunct Professor,
Dartmouth College
School of Medicine and
at Boston University
Guiding Principles in Mental Health Recovery

- Hope
- Person-driven
- Many Pathways
- Holistic
- Peer support

- Relational
- Culture
- Addresses trauma
- Responsibility
- Respect

EMPOWERMENT
Occupational Therapy and Mental Health Recovery

- empower people with various disabilities to live a meaningful life of their choices through returning to their valued life roles at home, work and leisure
- provide comprehensive assessment and training to deal with patient’s functional deficits in work and other daily living skills
- need to renew mindset, knowledge and skills to enhance our role to support client’s personal growth and recovery journey
Mental Health Recovery and Solution Focused Approach

- Guiding principles only serve as a framework for implementation of Recovery-Oriented mental health services.
- Does not provide related intervention tools to operationalize its practice.
- The Solution Focused approach is chosen as an intervention strategy for it aligns well with the values and principles of Recovery.
What is Solution Focused (SF) Approach?

- A brief therapy developed by Steve de Shazer and Insoo Kim Berg at the Brief Therapy Center in Milwaukee, Wisconsin, USA.
- A way of thinking about how people change and reach their goals,
- through conversation with clients,
- and co-construct solutions together.
## SF Approach

<table>
<thead>
<tr>
<th>Focus is on:</th>
<th>Instead of:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Solutions</td>
<td>Problems</td>
</tr>
<tr>
<td>Strengths</td>
<td>Weaknesses</td>
</tr>
<tr>
<td>Competencies</td>
<td>Inadequacies</td>
</tr>
<tr>
<td>What is going well?</td>
<td>What is wrong?</td>
</tr>
<tr>
<td>What is working?</td>
<td>What isn’t working</td>
</tr>
<tr>
<td>Action toward a preferred future</td>
<td>Understanding the causes</td>
</tr>
</tbody>
</table>

“Change is happening all the time; our role is to identify useful change and amplify it” *(Gregory Bateson)*

“Problem talk create problems – solutions talk create solutions” *(Steve De Shazer)*
SF Assumptions

- Positive Focus
- Exceptions to every problem can be created
- Small change leads to larger change
- Clients have strengths
- Client is the expert
- Meaning and experience are interactively constructed

Mental Health Recovery

- Hope
- Person-driven
- Taking responsibility
- Respect
- Reclaiming positive self identity
- Rediscovering new meaning and purpose in life
- Striving for full potential
SF Coaching

- bring people from where they are to where they want to be (Berg & Szabo’, 2005).
- raise the awareness of clients their preferred future and to take responsibility for their goals through questioning
- the OSKAR Model (Jackson & McKergow, 2007).
  - A simple and structured model
  - Enhance consistent practice by therapists for better outcome
SF Coaching – the OSKAR Model

OSKAR

Outcome
Review
Affirm
Scaling
Know-how
Outcome

- Establish a coaching platform to facilitate change
- Typical questions
  - How do you know that the session is helpful to you?
- Find out the future perfect for the coachee
- Typical questions - Miracle Question
  - Suppose you went to bed tonight and while you are sleeping, a miracle happened...and all these things we’ve been talking about just disappeared...when you wake up in the morning, what would be the first small clue that something was different? Who would notice? What would they notice? What will be different for you?
Scaling

- condition of coachee on a performance parameter, say on a scale of hope, confidence, determination, etc.
- Objective self assessment
- Facilitate discussion on progress, strengths identified and goal setting
- Typical questions
  - On a scale of 1-10, with ‘10’ being fully confident and ‘1’ being not confident at all, where would you put yourself on the scale?
  - How do you get the number, say n and not n-1?
  - What do you need to do to maintain your number, say at n?
  - What do you need to do for one point higher, say n+1?
Know-how

- Know-how are “things that count” to help the performance of the coachee.
- Knowledge or strengths like attributes, skills of coachee.
- Important resources for goals setting.
- Typical questions:
  - What helps you to perform at the number say n on the scale?
  - When do parts of the outcome happened already?
  - When did you achieve similar things before?
Affirm and action

- Affirm coachee’s performance
- Boost confidence and motivation
- Actions to take should be
  - Do more of what works
  - Stop doing what does not work and doing something different
- Typical questions
  - What’s already going well?
  - I am impressed by what you have done....
  - What the small next steps of action will you take?
Review

- Actions taken, progress made and goals
- Typical questions
  - What’s been better?
  - How did you do that?
  - What else is better?
  - On the scale, where would you say you are now?
- Affirm coachee’s effort and to take encourage to move forward
Case Vignette

- Susan was admitted to psychiatric ward last year
  - increased restlessness with poor sleep after change of medication
  - lack of interest to go out and just stay at home
- Referred to OT in the psychiatric day hospital
  - Attended three half-day sessions a week for training on life skills
  - received weekly coaching session for about 20 minutes
- Extracted from one coaching session using the OSKAR model
Case Vignette – Session 1

C – Coach    Ce - Coachee

C: After some small talks, the Coach asks coachee, “What do you want to achieve in this session?” *(Beginning with Outcome and Setting a coach platform)*

Ce: I want to sleep better!

C: Suppose you go to bed tonight and a magic happens: your insomnia has gone! How do you know that the magic has happened when you get up in the morning? Do you notice any difference on you? *(Using the Miracle question to explore coachee’s preferred future)*

Ce: Hum, happier, do more cooking, help more people

C: What else?

Ce: Would like to chat with others more, participate in activities more and happier! *(Coachee can unexpectedly express her preferred future in details in responsive to the Miracle Questions)*

C: On a scale of 1 to 10, with 10 representing the preferred future you just mentioned and ‘1’ when the situation remains unchanged, where would you stay on the scale? *(Using Scaling question to encourage coachee to have self-evaluation)*

Ce: Six
Case Vignette – Session 1

C – Coach

Ce - Coachee

C: Well, why it is not five but a six? (Tapping coachee’s know-how)

Ce: Oh, I can still sleep for four to five hours and there is some improvement in my chest discomfort now.

C: What else that helped you to be at 6? (Identifying coachee’s know-how)

Ce: When I’m not attending the day hospital, I will occupy myself with activities like going out for strolling, listening to birds singing and doing household tasks.

C: Wow! I am really impressed by what you have learnt and done to improve yourself so far! If you would go from six to seven, 1 point higher, what will be the step that you have to take? (Coach affirms coachee’s know-how and strengths and encourages her to take further actions)

Ce: I will continue my current activities and do more things like strolling, watching the sea, listening to birds, housework during day time; discuss with doctor about my medication, practice more relaxation; try not to nap after meal and not to worry much about children and granddaughter.
Conclusion

- Mental Health Recovery is a way of living an ordinary, satisfying, hopeful, and contributing life despite having mental illness.
- Self-direction, strength-based, taking responsibility, and maintaining hopeful attitude are the key dimensions of Recovery.
- Role enhancement as a Coach is needed to empower client for personal growth in the recovery journey.
- The SF Coaching Model - OSKAR is found to support clients in Mental Health Recovery which holds people to take responsibility for their goals and preferred future.
Conclusion

- Through a genuine conversation with clients, solutions towards their preferred future are co-constructed interactively.

- The OSKAR model provides a pathway or a map for therapists to coach clients towards their preferred future.

- SF Coaching is simple yet not too simple to use effectively. Continue professional training and supervision are needed.

- Research studies are needed to enhance treatment outcome.


Reference


- Hospital-Authority, (2010). Hospital Authority Mental Health Service Plan for Adults 2010-2015. Hospital Authority, Hong Kong SAR, PRC.

Thank You