

Section II: Overview of the Framework

Philadelphia's Approach to Transformation

Before examining the scope, purpose and framework of these guidelines, it is important to provide a brief overview of Philadelphia's approach to developing a system that promotes recovery and resilience, and to acknowledge the systemic challenges that exist.

Integrated Service Approach

The Philadelphia Department of Behavioral Health and Intellectual disAbility Services (DBHIDS) is taking a holistic approach to the transformation of behavioral health care. This approach uses the concepts of recovery and resilience to form a conceptual framework for service delivery and a bridge in the integration of mental health and addiction services for children, adolescents, transition-age youths, adults and families (Please refer to Appendix B for further discussion of the concepts of recovery and resilience)

This aspect of transformation is particularly important. Although mental health and substance use conditions frequently co-occur within the same individual, the services for these two categories of conditions are often disconnected and/or delivered in parallel or sequential service models. In Philadelphia, however, services for mental health and substance-related conditions are funded and overseen by the same agency. This offers the city the opportunity to bring these services, not only under the same roof, but also under the same vision and goal: that of resilience, recovery and a meaningful and self-determined life in the community.

Transformative Approach

Three approaches to recovery-focused system transformation efforts have been identified: additive, selective and transformative approaches (Achara, Evans, & King, 2010). In an **additive approach**, systems focus on simply adding non-clinical recovery support services to the existing treatment system. As this approach focuses on adding new services, it perpetuates the belief that recovery-oriented systems of care can be created only with "new dollars."

Additive approaches to system transformation fail to recognize that all services, including treatment, should be delivered within a recovery framework. They overlook the essential role that treatment services must play in transformation processes. The

primary focus in additive approaches is on recovery support services, rather than on re-examining **all** new and existing services through a new lens and values framework. As a result, important treatment variables such as assessment processes, service planning, the nature of service relationships and the focus of services remain unchanged.

This raises the risk that, even if non-clinical recovery support services are made available, they may be offered or designed in a manner that is not recovery oriented. They may be provided in ways that fail to reflect the values and principles of recovery-oriented care.

Another emerging approach to recovery-focused system transformation is the ***selective approach***. In this approach, there is recognition that treatment practices must be changed and better aligned with principles of recovery and resilience, but the emphasis is on changing the treatment practices of select programs or in particular levels of care and incorporating recovery support services into the system.

Philadelphia's practice guidelines are based on a ***transformative approach*** to system change. In this approach, the entire system—including the context in which it operates—is aligned with principles of recovery and resilience. This includes treatment services and non-clinical recovery support services, as well as the fiscal, policy, community and social contexts within which the system operates.

In the transformative approach, the nature of treatment itself radically changes to align with the values and principles of recovery and resilience. Non-clinical recovery supports are developed and integrated into treatment settings and community contexts. Funding and regulatory policies are examined and modified through the lens of recovery- and resilience-oriented approaches. Non-clinical recovery supports and clinical treatment services are provided in a seamless, integrated manner and regarded, not only as equal in importance, but also as indispensable in promoting sustained recovery. To illustrate this approach, strategies that apply to both clinical and non-clinical recovery support services are interwoven throughout this document.

In Philadelphia's transformative approach, **there is no diminishing of the value or role of professional treatment**. In fact, as those working and those receiving services in the system focus on recovery as a real possibility, build resilience and remove barriers to a successful life in the community:

- motivation for change increases;
- acceptability of services increases;
- insight into the need for additional help increases; and, as a result,
- the demand for expert clinical care increases.

Along with increased demand come higher expectations of the skill and sophistication with which treatment professionals deliver care. For treatment providers whose traditions and/or funding mechanisms may have steered their focus of care toward

deficit, disease and dysfunction, the shift to a focus on everyday functioning in the real world requires both an expansion and a deepening of the skills they already possess. Whether this practice incorporates cognitive-behavioral psychotherapy, family therapy, psychiatric rehabilitation strategies, psychopharmacology or any other approach, recovery- and resilience-oriented clinical care requires that the provider use the highest level of professional expertise, along with his or her unique personal experiences, to activate resilience factors and facilitate recovery. Philadelphia's approach to transformation embraces a number of critical elements of effective services, including evidence-based practices, trauma-informed services and attention to health equity. (Please see Appendix C and Appendix D for descriptions of the roles of evidence-based practices and trauma-informed services in Philadelphia's approach to system transformation.)

To reflect the transformative approach, this document is written in terms of "recovery- and/or resilience-oriented services," a concept that encompasses **both** clinical and non-clinical services.

The Systemic Challenges

On the national level, behavioral health systems stand at a challenging point in history, a time of uncertainty and scarcity of economic resources. As this practice guidelines document is being completed:

- both federal and state governments continue to reduce funding;
- cities, including Philadelphia, are experiencing major challenges that may require the redirection of funding toward issues of violence prevention, homelessness, prison overcrowding, child welfare and violence in the schools; and
- there is a strong possibility that resources allocated to community-based programs will be reduced because of funding constraints, donor fatigue and the current national and global economic crisis.

It is important to acknowledge these challenges, because they have the potential to affect all that the stakeholders in this system are doing now—as well as all they dream of doing in the future. However, much of what is proposed here does not require additional resources. Rather, it requires a reorientation of services and a focus on long-term recovery and resilience as the desired outcomes. In addition, the directions proposed in these guidelines allow providers enough latitude to respond creatively and flexibly to both the threats and the opportunities of the day. In fact, this document is based on the premise that a transformed system is even more essential in the face of these social challenges and funding constraints. This is because:

- transformation can better equip individuals and families to face their challenges by connecting them with both formal and informal supports and services;
- transformation emphasizes the effectiveness and efficiency of services; and

- a transformed system also works to capitalize on the previously untapped resources of the people receiving services in the system—people who have many valuable resources to offer one another, providers and the city as a whole.

It is also essential to acknowledge that many of the values and principles described in this document are already embraced by many providers in Philadelphia. Unfortunately, the systems at the local, state and federal levels are not fully aligned to support the delivery of services that promote recovery and resilience. Consequently, implementation of some of the strategies outlined in this document will require continued fiscal and policy alignment with recovery and resilience principles. This reality will be frequently acknowledged throughout the document.

Despite the legitimate challenges that exist, this system and its stakeholders have already begun to align their practices with those driven by recovery and resilience. This will ensure that all children, youth, adults and families receiving behavioral health care in Philadelphia have access to the services and supports they need to live meaningful and self-determined lives in this vibrant community. The practice guidelines contained in this document serve as one more tool to turn this shared vision into a reality.