Foreword

Since the issuance of the report of the President’s New Freedom Commission on Mental Health in 2003, the challenge of transforming the nation’s mental health system with the goal of recovery has been accepted by the mental health community with amazing enthusiasm. But while the concept of recovery has been generally accepted, there seems to be considerable divergence of opinion as to the meaning, and the implications, of the term ‘recovery’. As someone who has personally been in recovery from schizophrenia throughout the past four decades, I find this an exciting time. Indeed, as I often say during the self-revelatory talks I sometimes give concerning recovery from schizophrenia, this is the best time in history to be a person with schizophrenia.

However, despite my enthusiasm for these exciting, recovery-oriented times, it seems clear to me that we must begin to wrestle with trying to get a better grasp on what is meant by the term recovery.

In this regard, I find this volume, The Roots of the Recovery Movement in Psychiatry: Lessons Learned, a most welcome, useful and timely contribution. It is particularly relevant for those interested in the evolving delivery of mental health care as it impacts persons with schizophrenia and other forms of serious mental illness.

The authors characterize their work as a conceptual, as opposed to an historical overview of the development of care for the mentally ill during the past few centuries. I would suggest, however, that this fine publication is both, with a special focus on those aspects of care which can be viewed as precursors to the recovery approach.

The authors survey the perspectives of those thinkers whom they view as being major contributors to advancing our care of the mentally ill, as we have evolved from a medical (disease) model, through a rehabilitation perspective, to our emerging recovery view of care. I found much about the authors’ thesis appealing throughout the text, but I feel some aspects of this work are particularly noteworthy.

First, of the various figures the authors have chosen to review, none are characterized as being messianic deliverers of truth. All these progenitors of the current recovery movement are portrayed as being important contributors who might have been driving forces during their times. Nevertheless, all had views discordant not only with many in their own eras but also with each other. This
point is charmingly brought to the fore in the concluding chapter. Here the major forerunners of the recovery movement engage in an imaginary dialogue along the lines of the old Steve Allen television show *The Meeting of the Minds*.

Second, throughout the text, primary attention is given to the person in recovery being first a human being, as opposed to an object of scientific or even social manipulations. Continual focus is directed to the importance of the personal perspective of the recovering individual, as opposed to his adherence to procrustean, ideologically driven models that have too often been the basis of treatment approaches in the past. As an example of this, I found particularly attractive how the authors bring home this point with the encouragement of, but not the usual ‘word-police’ insistence on, the use of ‘person first’ language.

Third, in their historical overviews, the authors for the most part focus on pragmatic approaches to care. I was very pleased to see both Adolf Meyer and Lev Vygotsky extensively portrayed, and characterized as being progenitors of occupational therapy, a field which deserves profound respect for its focus on ‘purposeful work’. Many forget that occupational therapy had its professional beginning in the state psychiatric hospitals. Although today most occupational therapists are involved in what they cavalierly refer to as ‘physis’ (physical disorders), this publication may serve to remind our occupational therapy friends of their roots and hopefully nudge them back a little in that direction.

Finally, *Schizophrenia Bulletin* recently published an article in the March 2009 issue, co-authored by myself, Dr Ed Knight and Professor Elyn Saks. In that manuscript, we focussed on our definitions of recovery and those of seven other doctoral level persons, mostly psychiatrists and psychologists who are also in recovery from schizophrenia. Upon reading the personal tribulations of Dorothea Dix and others, who apparently experienced psychotic episodes, it was refreshing to be reminded that we are not the first mental health professionals with schizophrenia to be open about our conditions. Particularly poignant is the portrayal of Harry Stack Sullivan, who viewed his ongoing recovery from schizophrenia as a major motivating factor in his efforts to help others.

In summary, this well-written, interesting volume should serve to provide significant edification and enlightenment to anyone desirous of a better grounding in how we have arrived at these relatively halcyon days of transforming our approach to persons with serious mental illness from one focusing primarily on care to one where the primary goal is that of recovery.

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