## Introduction

I am a Vietnam era veteran and when I was discharged from the army there was little help for me regarding ‘symptom management-reintegration back into civilian life’. The Vietnam conflict was an unpopular war and veterans were not respected then like they are today. Beyond veterans trying to care for each other and supporting each other there was not a lot of help from the VA Health care system, the VA Health care system ***was not as sophisticated then as it is today.***

In the 1970’s when I was discharged, PTSD was called ‘anti-social behavior’ or “tripping” or ‘Out to lunch”. The symptoms I experienced pertaining to PTSD, I learned to deal with on my own. Back in the 1970’s, the methods I chose to use were not good ones i.e. self medicating with illicit drugs, rebellion against ‘the establishment’, anger and just plain dropping out of society.

Over time, (decades) my PTSD symptoms became less and less severe and faded in intensity over time. My mental health issues were never dealt with by the VA, I never was considered to be “a mental case”. When I was in the service anything connected to *“Section 8” status* was to be avoided and the prevailing attitude by everyone, in and out of the military was that ‘mental or emotional problems were a sign of weaknesses’. ***‘I even believed I was strange.’***

For me my mental health issues were three fold:

1. paranoid schizophrenia
2. reintegration issues (PTSD)
3. Illicit substance abuse issues.

Because my mental health issues were not diagnosed and not treated early on I spend 30 years homeless and loss everything.

* I became reclusive and alienated from family and friends
* I became a desperate drug addict
* I dropped out of college
* I lost my job and career
* I finally loss my wife and children
* I spent five years in prison
* I spent the next thirty years homeless and living in the street

Five years ago I was finally diagnosed by a community mental health outreach program and saved from the streets by a housing first program called ***“Pathways to Housing’***. It was at this time that I was introduced to a consumer self help approach called ***Wellness Recovery Action Planning (WRAP).*** WRAP has been beneficial and helped me with my symptom management-reintegration back into civilian life.

## What is WRAP

**WRAP** is a self-management and recovery system developed by a group of people who had mental health difficulties and who were struggling to incorporate wellness tools and strategies into their lives. WRAP is designed to:

* Decrease and prevent intrusive or troubling feelings and behaviors
* Increase personal empowerment
* Improve quality of life
* Assist people in achieving their own life goals and dreams.

**WRAP** is a structured system to monitor uncomfortable and distressing symptoms that can help you reduce, modify or eliminate those symptoms by using planned responses. This includes plans for how you want others to respond when symptoms have made it impossible for you to continue to make decisions, take care of yourself or keep yourself safe.

The person who experiences symptoms is the one who develops their personal WRAP. The person may choose to have supporters and health care professionals help them create their WRAP.

The **WRAP** system was developed by people who have been dealing with a variety of psychiatric symptoms for many years and who are working hard to feel better and get on with their lives. Mary Ellen Copeland has shared it with people with other illnesses and they too believe that it can be easily adapted for use with other conditions

I experience feelings and symptoms that are upsetting, that keep me from being the way I want to be and doing the things I want to do. Because I use the Wellness Recovery Action Plan system I have made great advances in learning how to do things to help myself get well and stay well. The action plans for prevention and recovery described in the wellness recovery action plan system are simple, low-cost, and can be changed and added to over time; anyone can develop and use these plans.

Because I use the WRAP plan I am prepared and can take action as necessary to feel better more often and I have improved the overall quality of my life dramatically.

**Wellness Recovery Action plans for prevention and recovery work for me because they—**

* are easy to develop and easy to use
* are individualized
* improve my ability to communicate effectively with people and health care providers
* directly address the feelings, symptoms, circumstances, and events that are most troubling to me with plans to respond to them
* renew my sense of hope that things can and will get better, and that I have control over my life and the way I feel

## Developing a Wellness Toolbox

To develop my wellness recovery action plan, it was necessary for me to create a resource list called the Wellness Toolbox. In it I identified and listed the things I use to help myself feel better when I am having a hard time. Some of them are things I know I must do, like eating healthy meals and drinking plenty of water; others are things I could choose to do to help myself feel better.

Some ideas for my Wellness Toolbox are—

* eating three healthy meals a day
* drinking plenty of water
* Getting to bed by 10:00 p.m.
* doing something I enjoy–like playing a musical instrument, watching a favorite TV show, or reading a good book
* exercising
* doing a relaxation exercise
* writing in my journal
* taking medications
* taking vitamins and other food supplements

This is a resource list for me to refer back to when I am developing and updating my plans. I continue to refine my Wellness Toolbox over time, adding to my list whenever I get an idea of something I’d like to try, and crossing things off my list if I find they no longer work for me.

## Daily Maintenance Plan

There are certain things I need to do every day to maintain my wellness. Writing them down and reminding myself to do these things on a daily basis is an important step to maintaining my wellness. A daily maintenance plan helps me recognize those things that I need to do to remain healthy and plan my days accordingly. As part of my wellness recovery action plan, my daily maintenance plan provides a daily structure that ensures I am taking optimal care of myself.

The first part of my daily maintenance plan is a description of what I am like when I am well. This serves as a reference point, so when I am not feeling very well I can refer back to how I want to feel.

For example, I would describe myself as,

* Retaining a sense of self as a valuable person who has something to live for
* I am able to play and enjoy life.
* I am able to use anger constructively
* I am able to help myself and others.
* I accept the unique person I am and appreciate life around me.

The next part of my daily maintenance plan is to describe those things I need to do every day to maintain my wellness. I use my Wellness Toolbox for ideas. This is a list of things I must do, not things I would choose to do. The following is a sample of my daily maintenance list—

* eat three healthy meals and three healthy snacks that include whole grain foods, vegetables, and smaller portions of protein
* drink at least six 8-ounce glasses of water
* get exposure to outdoor light for at least 30 minutes
* take medications and vitamin supplements
* have 20 minutes of relaxation or meditation time or write in my journal for at least 15 minutes
* spend at least half an hour enjoying a fun, affirming, and/or creative activity
* Check in with myself: “how am I doing physically, emotionally, spiritually?”

I also use my plan to make a list of dreams and goals to work toward i.e.…:

* Fully understanding and coping with my mental illness and psychiatric disability
* Start to realize, “There is more to me than mental illness. I am a whole person.”
* Start to dream again about who I am and who I can be.
* Develop the capacity to love other people and be loved in return.
* Start to want things again.
* Feel hopeful about developing meaningful work, and grateful to those who help me along the way.
* In coming to feel good about myself, I am able to connect or re-connect with others who care about me, because I can give as well as receive.
* I can help others along the path I have struggled to travel.

**Triggers, Early Warning Signs & When Things are breaking down**

I use the same process I used in developing my Daily Maintenance List as I work my way through the next three sections of WRAP-Triggers, Early Warnings Signs & When things are breaking down. Each of these sections includes a listing of difficulties or uncomfortable feelings and responses and actions I could take in these situations.

**Triggers** are external events or circumstances that if they happen, may make me feel upset, and I may begin to experience anxiety, panic, discouragement, despair, or negative self-talk. Triggers are often something that I can’t completely plan for or avoid. Because of this, it helps for me to develop a plan of what I can do if those triggers come up-a plan that can keep these triggers from worsening my overall health and sense of well-being.

In this section of my wellness recovery action plan I identify my triggers and make a list of them and using my list of tools from my Wellness Toolbox, I develop plans to avoid or deal with triggering events, increasing my ability to cope and feel better quickly. By developing a plan like this, I intervene and take positive action at a time when it is easy to do, before the situation has escalated or worsened.

**Early Warning Signs** are internal and may be unrelated to stressful situations. In spite of my best efforts at reducing my symptoms, I may begin to experience early warning signs, subtle signs of change that indicate I may need to take some further action. Because I have a ***dual diagnosis*** (psychiatric illness and addictive disorder), I must also be aware of early warning signs that can include old behaviors that were related to my drinking and drug use. Reviewing my substance abuse early warning signs regularly helps me to become more aware of them. If I can recognize and address my early warning signs right away, I often can prevent more severe symptoms and prevent spiraling down into bad feelings and more severe symptoms and illness.

Using my wellness recovery action plan and addressing early warning signs is much easier, less stressful, and healthier than trying to deal with the situation after it has worsened. In this section of my WRAP plan I make a list of my early warning signs that alert me that my condition might be worsening. They are changes in the way I think, act, and/ or feel…

* Negative thinking increases
* Feeling overtired
* Having aches and pains
* Difficulty sleeping
* Excessive overeating
* Anxiety
* Feelings of abandonment or rejection
* Compulsive behaviors

Once I notice these early warning signs I use my response action plan that I have developed to stabilize and hopefully reverse the symptoms. For me the best response to my early warning signs is my ***circle of support***. Using the lessons that I have learned from Mary Ellen Copelands ‘WRAP for Veterans and WRAP for Persons with Dual Diagnosis’ I’ve learned that self-talk can be very gloomy and self-defeating; I realize what I say to myself, the behavior I engage in based on that self-talk and the consequences of that behavior.

The work is to change the attitudes that produce negative self-talk and problem behaviors. I’ve learned skills for dealing with my own thoughts, emotions and behaviors, and those of others who react to me. I’ve learned how to ask for the kind of help I need, and evaluate whether that help is useful, I’ve learned to help myself and others.

**When Things are Breaking Down** In spite of my best efforts, my symptoms may progress to the point where they are very uncomfortable, serious, and even dangerous. This is a very important time. It is necessary for me to take immediate action to prevent a crisis or loss of control. I may be feeling terrible and others may be concerned for my wellness or safety, but I can still do the things that I need to do to help myself feel better and keep myself safe. At this time, more intensive, structured, and directive action is needed.

**Part A. Symptoms That Indicate Things Are Breaking Down**

In this section of my WRAP plan I make a list of symptoms that indicate to me that things are breaking down or getting much worse. Some of the things on this list may be the same things I have put on my early warning signs list. The difference may be in intensity, durations, and the addition of other symptoms and signs that are appearing at the same time.

My signs or symptoms might include—

* feeling very oversensitive and fragile
* responding irrationally to events and the actions of others
* being unable to sleep
* avoiding eating
* wanting to be totally alone
* substance abusing
* taking out anger on others
* chain smoking
* eating too much
* obsessed with negative thoughts
* suicidal thoughts
* paranoia
* not feeling anything

**Part B. Action Plan for Relieving Symptoms When Things Are Breaking Down and Heading toward a Crisis**

Responding when my symptoms, circumstances, or events have begun to further increase in severity is much more difficult. During these times it becomes very important to know how I recover and what I need to do to promote the healing process. In this section of my WRAP, I write an action plan that I think will help reduce my symptoms when they have progressed to this point. The plan now needs to be very direct, with fewer choices and very clear instructions.

Some ideas for my action plan are—

* call my doctor or other health care professional, ask for and follow his or her instructions
* call and talk for as long as necessary to my supporters
* arrange for someone to stay with me around the clock until my symptoms subside
* make arrangements to get help right away if my symptoms worsen
* make sure I am doing everything on my daily check list
* arrange and take at least three days off from any responsibilities
* have at least two peer counseling sessions
* do three deep-breathing relaxation exercises
* write in my journal for at least half an hour
* schedule a physical examination or doctor appointment or a consultation with another health care provider
* ask to have medications checked

## Crisis Planning

Identifying and responding to my symptoms early reduces the chances that I will find myself in crisis. It is important to confront the possibility of crisis, because in spite of my best planning and assertive action in my own behalf, I could find myself in a situation where others will need to take over responsibility for my care. In a crisis, I may feel as if I am totally out of control. Writing a clear crisis plan when I’m feeling well, to instruct others about how to care for me when I’m not well helps me maintain responsibility for my own care. It will keep my family members and friends from wasting time trying to figure out what to do for me. It relieves the guilt that may be felt by family members and other caregivers who may have wondered whether they were taking the right action. It also insures that my needs will be met and that I will get better as quickly as possible.

I need to develop my crisis plan when I am feeling well. Decisions like this take time, thought, and often collaboration with my health care providers, family members and other supporters.

The crisis plan differs from the other action plans in that it will be used by others. However, when writing a crisis plan, I must make it clear, easy to understand, and legible. Once I have completed my crisis plan, I give copies of it to the people I name in this plan as my supporters.

**Part 1 Feeling well**

In this section of my WRAP plan I write what I am like when I’m feeling well. I can copy it from Section 1, **Daily Maintenance Plan.** This can help educate people who might be trying to help me. It might help someone who knows me well to understand me a little better, for someone who doesn’t know me well—or at all—it is very important.

**Part 2 Symptoms**

In this section of my WRAP plan I describe my symptoms that would indicate to others that they need to take over responsibility for my care and make decisions in my behalf. Through a careful, well-developed description of my symptoms that I know would indicate to me that I can’t make smart decisions anymore, I can stay in control even when things seem to be out of control. I must be very clear and specific in describing each symptom. Some of my symptoms might include—

* being unable to recognize or correctly identify family members and friends
* uncontrollable pacing; inability to stay still
* Neglecting personal hygiene
* Not cooking or doing any housework
* not understanding what people are saying
* thinking I am someone I am not
* thinking I have the ability to do something I don’t
* displaying abusive, destructive, or violent behavior, toward self, others, or property
* abusing alcohol and/or drugs
* Not getting out of bed
* refusing to eat or drink

**Part 3 Supporters**

In this next section of the crisis plan, I list those people who I want to take over for me when the symptoms I listed in the previous section arise. Before listing people in this part of my plan I talk with them about what I’d like from them and make sure they understand and agree to be in the plan. They can be family members, friends, or health care providers. They should be committed to following the plans I have written. When I first develop this plan, my list was mostly health care providers. But as I worked on developing my support system, I add more family members and friends.

Many people like to include a section that describes how they want possible disputes between their supporters settled. For instance, you may want to say that if a disagreement occurs about a course of action, a majority of your supporters can decide or a particular person will make the determination. You also might request that a consumer or advocacy organization become involved in the decision making.

**Part 4 Health care providers and medications**

In this section of my WRAP plan I name my physician, pharmacist, and other health care providers, along with their phone numbers. Then list the following—

* the medications I am currently using, the dosage, and why I’m using them
* the medications I would prefer to take if my medications or additional medications became necessary—like those that have worked well for me in the past—and why I would choose those
* the medications that would be acceptable to me if medications became necessary and why I would choose those
* the medications that must be avoided—like those I am allergic to, that conflict with another medication, or cause undesirable side effects—and give the reasons they should be avoided.

**Part 5 Treatments**

There are particular treatments that I like in a crisis situation and others that I would want to avoid. The reason may be as simple as “this treatment has or has not worked in the past,” or I may have some concerns about the safety of this treatment in this part of my crisis plan, I list the following—

* treatments I are currently undergoing and why
* treatments I would prefer if treatments or additional treatments became necessary and why I would choose those
* treatments that would be acceptable to me if treatments were deemed necessary by my support team
* treatments that must be avoided and why

**Part 6 Planning for my care**

In this section of my WRAP plan I describe a plan for my care in a crisis that would allow me to stay where I like. I think about my family and friends. Would they be able to take turns providing me with care? Could transportation be arranged to health care appointments? Is there a program in my community that could provide me with care part of the time, with family members and friends taking care of me the rest of the time? Many people who would prefer to stay at home rather than be hospitalized are setting up these kinds of plans. I regularly ask my family members, friends, and health care providers what options are available.

**Part 7 Treatment facilities**

In this section I describe the treatment facilities I would like to use if family members and friends cannot provide me with care, or if my condition requires hospital care. I also include a list of treatment facilities I would like to avoid—such as places where I received poor care in the past.

**Part 8 what I need from others**

This part of my crisis care plan is very important and deserves careful attention. In this section I describe what my supporters can do for me that will help me feel better. I describe everything I can think of that I want my supporters to do (or not do) for me. I also talk to my supporters and health care professionals to get more ideas from them.

**Things others could do for me that would help me feel more comfortable might include—**

* listen to me without giving me advice, judging me, or criticizing me
* encourage me to move, help me move
* lead me through a relaxation or stress reduction technique
* peer counsel with me
* provide me with materials so I can draw or paint
* give me the space to express my feelings
* don’t talk to me (or do talk to me)
* encourage me and reassure me
* feed me nutritious food
* make sure I take my vitamins and other medications
* just let me rest

I also include a list of specific tasks I would like others to do for me, who I would like to do which task, and any specific instructions they might need. These tasks might include—

* buying groceries
* paying the bills
* taking out the garbage or trash
* doing the laundry

I also include a list of things that I do not want others to do for me things they might otherwise do because they think it would be helpful, but that might even be harmful or worsen the situation. These might include—

* forcing me to do anything, such as walking
* scolding me
* becoming impatient with me
* talking continuously

Some people also include instructions in this section on how they want to be treated by their caregivers. These instructions might include statements such as “kindly, but firmly, tell me what you are going to do,” “don’t ask me to make any choices at this point,” or “make sure to take my medications out of my top dresser drawer right away.”

**Part 9 Recognizing recovery**

In the last part of this crisis plan, I give my supporters information on how to recognize when I have recovered enough to take care of myself and they no longer need to use this plan. Some examples are—

* when I am eating at least two meals a day
* when I am awake for six hours a day
* when I am taking care of my personal hygiene needs daily
* when I can carry on a good conversation
* when I can easily walk around the house

Once I have completed my crisis plan, I update it when I learn new information or change my mind about things. I date my crisis plan each time I change it and give revised copies to my supporters.

## Using My Action Plans

Now that I have completed my wellness recovery action plans for prevention and recovery, I need to spend good quality time on a regular basis reviewing my plans. As I have become more familiar with my daily list, triggers, symptoms, and plans, I find the review process takes less time and that I know how to respond better.

If I am all right, I do the things on my list of things I need to do every day to keep myself well. If I am not feeling all right, I review the other sections to see where the symptoms I’m experiencing fit. Then follow the action plan I have designed.

For instance, if I feel very anxious and know that it is because one of my triggers happened, then I follow the plan in my triggers section. If there weren’t any particular triggers but I noticed some early warning signs, then I follow the plan I designed for that section. If I notice symptoms that indicate things are breaking down, then I follow the plan I developed there.

If I‘m in a crisis situation, my WRAP Crisis plans can help me realize it so I can let my supporters know they should take over. However, in certain crisis situations, I may not be aware or willing to admit that I’m in crisis. This is why having a strong team of supporters is so important. They will observe the symptoms I have reported and take over responsibility for my care, whether or not I am willing to admit I am in a crisis at that time. Distributing my crisis plan to my supporters and discussing it with them is absolutely essential to my safety and well-being.

Now that I am using these plans regularly and updating them as necessary I’m finding that I have fewer difficult times, and that when I do have a hard time, it is not as bad as it used to be and it doesn’t last as long.

I had shut everyone and everything out, but here was a plan that I was able to adapt to address my own personal difficulties.  WRAP has helped me to control my moods instead of having my moods control me. My life today is better than ever and WRAP is an integral part of my life. My illness and pain had become all consuming, now I have something to look forward to.  ***“America’s Veterans Need WRAP “***

Yours truly,

Gerard Thomas

Let’s RAP about WRAP … go to: [www.wrapofdc.org](http://www.wrapofdc.org)