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# Recovery

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**The concept of 'recovery' as applied to severe mental illness has fostered a cultural change in attitudes to the long-term outcome of conditions such as schizophrenia. 'Recovery' has a specific meaning in this context. It refers to the possibility that even in the presence of a chronic psychiatric disorder there is hope for a life that has value. The affected individual can still make a contribution to society; he or she can expect to live independently and with dignity. The term implies that our traditional medical model of illness lacks the longer-term perspective on how patients might learn to cope with their condition.**

We present three themed articles on 'recovery' as applied to mental healthcare. Two of those articles review the concept of recovery and its historical antecedents. The third concerns the specific case of schizophrenia and reviews surprising findings about the prognosis of the condition in different countries and cultures.

We start with an authoritative account of the origins of the 'recovery movement' in the USA, from Anthony Ahmed and colleagues. Back in the early 1970s grave concern was being expressed by patients, their families and some professionals about the management of severe mental illness and the role played at that time by lifelong institutional care, which was then prevalent in the USA and many other high-income countries. As a reaction against this management strategy there was a push

for greater patient participation in decision-making. This was the start of the focus on 'recovery'. It involved the establishment of advocacy for those who wished to leave institutional care and make a future for themselves within rather than outside the community at large. Such a movement challenged societal stigma about those with impaired mental health.

Ahmed and colleagues discuss the development of the 'recovery theme' of psychiatric illness in the USA, where it appears to have been most enthusiastically supported. In their view, in the UK we are lagging behind. On the other hand, Jed Boardman and Geoff Shepherd are optimistic about the changes that we are beginning to see here. They discuss in outline the Implementing Recovery – Organisational Change project, which is a national strategy that aims to help organisations in the UK become more supportive of recovery.

Finally, Aleksandar Janca and Sivasankaran Balaratnasingam take a historical perspective on cross-national comparisons of prognosis in schizophrenia. Since the pioneering projects devised by John Wing in collaboration with the World Health Organization, 40 years ago, evidence has been accumulating that indicates there are major international differences in the prevalence and the prognosis of schizophrenia. Here, the surprising and controversial accounts of better 'recovery' from the condition in countries that have rudimentary mental health services, than in the psychiatrist-led, medication-oriented, hospital environments of the Western world, are debated.