
INTERVIEW WITH **JOE CALLEJA** BY **MICHAEL WINKLER**

Recovery focussed respite

Carer respite is valuable. Carer respite targeted towards recovery is invaluable. Joe Calleja, Chief Executive Officer of the Richmond Fellowship of Western Australia, is an advocate of carer respite which is meaningful and purposeful. 'Unless the person with the mental illness feels central to the respite option it will not work and will result in an outcome where the carer and care recipient will feel let down,' Joe says. 'This will lead to the system having failed again and the family feeling further marginalised. We should no longer accept the minimalist approach where carer respite is little more than minding a person for a fixed period of time.'

Joe Calleja says that a crucial difference between respite for carers of people with mental illness and carers of people with intellectual or physical disabilities is that respite for the former group can and should be geared to supporting the person towards recovery.

'It's a matter of setting consumer-centred longer-term goals, then together designing shorter-term relevant activities with the consumer that can build progressively towards recovery – toward the life of their choosing.'

'In the areas of intellectual and physical disability the medical parameters are better understood and it is about pure respite, but in the mental health area respite can be part of the recovery plan. If we look at recovery being an individualised journey in which a person is able to live a more meaningful life from their perspective, then respite activities are those which help them work towards goals that they have established within their recovery plan. Whether the respite is for the carer or the individual, both need to be satisfied that the respite activity has some personal meaning.'

'These activities can be simple, such as going out for a coffee, visiting a gym or going to a movie. When they have an end goal, such activities can be about relationship building as well as providing respite. 'Going to the movies can build confidence,' he says. 'Learning how to use public transport can help towards recovery. These things provide enjoyable activities for the consumer, provide a break for the carer, and are building blocks towards recovery. It is small steps at a time.'

'Other activities can be more intensive such as the Richmond Fellowship five-day camp program. We have had people who were initially very reluctant to leave their houses, but through simple things like going out,

meeting a group of people, doing an activity, they have built their confidence to the point where they have then gone to a camp. Originally you would have thought that would not be something that they would be able to do.'

'Most carers do not want to see their loved ones given mundane or meaningless activities simply as a way of 'getting them off their hands'. Providing meaningful activities during respite is a tangible way of demonstrating respect to carers and consumers alike. 'Good recovery is about relationships,' Joe says.'

He cautions that 'carer' can be an awkward term, masking the true nature of the connection between people. 'I think that label can be artificial. If we work carer respite properly and provide good support, we allow people to be in the roles they should be in – father, mother, brother, sister, son, daughter, partner – rather than being pushed into a different role.'

'Recovery support during a carer respite relationship goes both ways, and it is important to support both parties through this growth process. Joe notes that successful carer respite changes the nature of the relationship between the carer and their loved one. While this is largely positive, it is not uncommon for tensions to emerge as a normal part of the empowerment process. A greater sense of confidence and empowerment for the consumer means a decrease in dependency, which some carers find challenging.'

'The huge investment that a carer makes in the life of the person they care for often means they may feel over-protective and may develop risk-averse responses and fears,' Joe says. 'That can sometimes cut across a person's capacity to move on in terms of recovery, because the carer naturally wants to ensure that the consumer won't get hurt. By and large, consumers are adults. The danger is that carers, if they are overprotective, do not allow the adult to emerge more fully. Therefore this is a time of growth when we can learn ways to support ourselves to embrace new challenges and move beyond fear-based and limiting patterns.'

Physical disability activists coined the term 'the dignity of risk'. Joe thinks it is applicable to the mental health sphere also, where people diagnosed with a mental illness also need to be allowed to make a mistake, feel its consequences so as to learn, and move on. However there can be some issues between carers and consumers around the extent to which those choices can be supported, negotiated and managed. Again, this is an area where a good respite program can work with carers to understand and enhance the process.

Richmond Fellowship espouses a 'no wrong door' policy to ensure that any carers or consumers who approach their service are provided with access to a network of allied service providers. 'We try to link people in and find how we can fit this into people's lives,' Joe says. 'We've got good working relationships with the carer respite centres.'