

# Measuring the Impact of Day Activities as an Instrument for Recovery for People with a Serious Mental Illness? Defining the Concepts to Come to a User's Perspective

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Received: 01 June 2019; Accepted: 26 June 2019

**Citation:** Davy Dries, Stefaan De Smet. Measuring the Impact of Day Activities as an Instrument for Recovery for People with a Serious Mental Illness? Defining the Concepts to Come to a User's Perspective. Clin Rev Cases. 2019; 1(1): 1-4.

## Keywords

Day activities, Integrated care, Recovery outcomes, Mental health.

## Introduction

### The theoretical framework

The driving force behind this research idea are the current funding cuts within mental health services instigated by municipal councils in Belgium and in the Netherlands that have an effect on the availability of day activity services, raising the possible question if the lack of services has an effect on the recovery process of people with a serious mental illness.

Another underlying reason and concern behind the need for this investigation are the recent figures that show an increase of forced admissions in Psychiatric Hospitals. This has been attributed to a decline in supportive strategies and admission possibilities that assists in the recovery process [1].

Clinical and community relevance in regard to day activities has been a long-time supporting strategy in caring for people with a serious mental illness, either in a hospital or community setting. These services have been around since the dawn of psychiatric care. In large psychiatric hospitals activities were and are organised as part of the treatment and nursing processes.

These days participating in activities outside the confines of home can stimulate community participation, create an exchange mechanism between service users and promote a more positive self-esteem. Furthermore, the possible therapeutic benefits of reducing relapses of psychiatric symptoms, community acceptance and participation have been documented [2].

## Problem definition and variables

When people with a serious mental illness are recovering, can they contribute this achievement as a whole or part to their involvement in organised day activities?

As the dependent variable the principal researcher identified "serious mental illness" and as the independent variable "day activities" and "recovery". This leads to our final research question: Are day activities an instrument for recovery for people with a serious mental illness? Before we can answer this question, the concepts have to be outlined, and we need to define a valid method. A continuing literature search will assist in determining the level of positive or negative aspects in this investigation. We need to outline the key concepts of day activities, before we can measure the self-reported recovery outcomes. The purpose is to determine a valid and useful method for interviewing patients in day activity centers about their perceived quality of life.

## Methods

### Literature Review

There is a substantial amount of literature dealing with the issue of activities and the issues related to the recovery process. The principal researcher has found articles that touched on the subject in the database PubMed, Google Scholar, and the International Journal of Mental Health Nursing, Community Mental Health Journal, International Journal of Mental Health, International Journal of Mental Health Systems and Quality of Life Research. For example, key articles by Happell et al. [3] and Borg et al. [4] were used. The databases PubMed and Cochrane Library were considered for multiple searches using various combinations of key words as: day activity, recovery, ACT (Assertive Community Treatment), serious mental illness, schizophrenia, psychosis,

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psychiatric hospital admission, service users, local community and Ghent. These data bases have been selected as they specialise in health care and nursing literature and contain large amounts of current and historical data. The aim of the search is to identify articles investigating day activities in relation to recovery of seriously mentally ill consumers and how these interventions contribute to community participation and acceptance. Other searches might occur as a result of examining findings where new topics of interest have revealed themselves and so, as the study and findings progress, the need to broaden and at time refine searches might continue throughout this study. The aim is to determine whether a survey, research by means of interviews with the support of a pre-designed questionnaire, is a useful method to gain an understanding of patients' experiences and their story about recovery.

### Ethical issues in the planned data collection

Ethics approval will be sought from the Ethics Committee of the Ghent University Hospital, to start interviewing patients in the day activity center in Ghent. Participants will be provided with information of the study and asked to sign a consent form. Identifying information will be removed from any reported material. De-identification of participant's names and their socio-demographics will occur, with a pseudonym allocated to each participant to preserve their confidentiality. The recordings of interviews will only be heard by the principal researcher, the transcribing in Dutch will be completed by the principal researcher to increase his experience of familiarity with the data. The recordings will not be used for any other purpose.

The participants are to be advised that participation is voluntary and they have the right to withdraw their consent at any time during the study. Informed consent has been described as the cornerstone of ethical research. All data will be securely stored under lock and key, accessible only by the principal researcher. Discussing sensitive issues can be difficult and confronting (Mead et al, n.d.) particularly when discussing issues around psychosis, trauma and recovery. With this in mind sensitivity towards the reactions of participants and appropriate support will be offered. No participant will be forced to disclose or discuss issues that are personally sensitive.

The principal researcher is a psychiatrist in training of Ghent University Hospital where the research is to occur. The principal researcher does not have any management or supervisory responsibilities for any of the participants. The risks for participants is no greater than those risks of everyday life. Appointments for interviews will be at a time that suits individual participants with the aim of protecting their anonymity and reducing the impact that participation might have upon them.

## Results

### Literature

The literature defines day activities as all activities that participants are involved in to fill in her or his day. Therefore, the first aim of these activities is to be occupied. These activities vary from active employment to hobbies and anything in-between. The literature

shows, by entering keywords in the databases, that day activities have an important role in recovery. By using the search engines, the following concepts have been identified by the principal researcher:

- Relaxation is a model identified by the literature. Within this concept the participant is involved in activities that will relax them, like listening to music.
- Feeling fit is also a component. It serves the feeling of well-being and energy. It can assist to gain physical health after a period of i.e. illicit drug use.
- Self-expression are all the activities that can fall under the concept of creativity. Examples are acting, drawing, painting and photography.
- Self-development. This entails all activities that are aimed at the process of recovery [5].

The fourth item can be marked as the umbrella of the concepts that have been identified. Numbers 1, 2, and 3 can be viewed as part of number 4.

The literature shows a variety of definitions of recovery. Aside from the official Macquarie dictionary (online) definition: "Repair, reinstate, salvage and salvation" [6].

Clients give descriptions as:

- Something that is broken that needs to be mended
- Conscious thought and less occupied with problems
- Cured from drugs and
- Being part of the community again.

Literature describes an advantage of a semi-structured qualitative research to measure recovery outcomes. The emphasis with semi-structured qualitative research is on exploring the occurrence, the manner in which it shows itself, and any other factors relating to it [7]. It is a particularly useful approach when there is limited information about the phenomena under investigation. Individual interviews with participants will be arranged at a time that will suit each participant and not impact upon their private time or impact upon their work commitments. Open ended interviews will encourage participants to explain their attitudes, emotions, ideas, sentiments, suggestions or opinions in their own words [7].

### Implications for data collection

The interviews will be conducted at University Hospital Ghent or other setting of their choosing. The data collection will be conducted conform the following process:

Individual interviews, with the use of a pre-designed questionnaire. The aim of the interviews is to encourage participants to speak openly about their experiences, feelings, or attitudes, but in a structured way. During the interviews, the participant being interviewed is considered the expert and the interviewer is considered the student [7]. The researcher's interviewing techniques are motivated by the desire to learn everything the participant can share about the research topic.

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During the individual interviews, participants will be asked to reflect on their history within psychiatry with an initial question:

“How would you describe your thoughts about day activities in relation to your mental well-being?”

The guiding principle with the interview process is to encourage the participants to speak about their experiences and to gain an insight into their possible road to recovery. The questionnaire will assist in creating a structure during the interviews, but allowing a certain amount of flexibility in their individual responses.

A semi-structured qualitative design is the methodology selected for this study in order to explore a participant’s experience of using and participating in day activities as part of their recovery process.

### **Applied setting and participants**

The setting for this research will be at the Ghent University Hospital. This setting is used for the convenience of participants and that of data collection for the principal researcher. The setting includes a community day activity centre, voluntary and regular work facilitation services and a fitness room and other recreational happenings.

The target group for inclusion in this research project are clients with serious mental illness using the day activity service of University Ghent Hospital. No clients, in principle, receiving this service, will be excluded from this research. The only exception are those service users who receive a mental health service delivery from the principal researcher. The principal researcher will work closely with supervisors.

### **Implications for data analysis**

The interviews will be recorded with the permission of the participants. The interviews will be transcribed verbatim by the principal researcher, to assist with developing familiarity with and sensitivity to the content of the interviews. The transcripts will then be reviewed to enable identification of the main themes [7,8].

The process of reading and re-reading the transcripts to identify common themes will occur, with the principal researcher noting down initial ideas and grouping common responses. The interviews will progress simultaneously with analysis of the data, an approach advocated by, whereby you continuously take verbatim text and notes and place them in groups. The aim is to find words and phrases carrying meaning and importance to the phenomena of interest [7]. Initial themes that emerge will be reviewed by the principal researcher during supervision sessions with his practice supervisor.

### **Correct assessment of qualitative data collection**

The triangulation or perspective method is used to collect and interpret data about this investigation, in order to converge on an accurate representation of reality. Questions relating to the issues that might have been overseen will be addressed [7]. In this interactive process three academic professionals are prepared to

assist the principal researcher in this process. These are Mr. S. de Smet, senior lecturer Hogeschool Gent, Belgium; Mr. A. Aerts, Master in Communication Science and Master in Ethics; and Mr. K. Lafaut, Master in Clinical Psychology.

### **Discussion**

In order to understand the full scope of the issue at hand, one will have to realise that the fairly recent introduction of the Mobile Teams and FACT (Flexible Assertive Community Treatment) model changed the care for people with a serious mental illness significantly, thus needing new parameters to evaluate this care. Extended admission to a psychiatric hospital is now replaced by active social psychiatry [9]. Their strength is that they work with the local partners in their subsequent municipal council. These partners also include the organised day activities delivery of care. The core business is recovery and focusses on recovery supporting care and methodology.

A strength of this pilot study is the qualitative approach. Qualitative approaches offer flexibility. Qualitative research is “multi-method in focus, involving an interpretive, naturalistic approach to its subject matter” [8]. This means that qualitative researchers study issues in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them.

Qualitative research is explorative. It is in-depth, and subjective, and is intended to increase the knowledge of the field of study [7]. The participants are selected for their knowledge or experience and ability to convey these to others. Qualitative research is concerned with the systematic collection, ordering, description and interpretation of textual data generated from talk, observation or documentation. According to Polit and Hungler [7], qualitative research is used for “identifying problems with current practice, making judgment or determining what others in a similar situation are doing”. The goal of qualitative research is to “develop a rich understanding of the phenomenon as it exists in the real world and as it is constructed by individuals in the context of that world” [7], with the intent to thoroughly describe and explain the phenomenon.

Another strength is the fact that all users of day activity center at University Hospital Ghent, who give informed consent, will eventually be included in the pilot study. No clients, in principle, receiving this service, will be excluded from this research. The only exception are those service users who receive a mental health service delivery from the principal researcher. The principal researcher will work closely with supervisors and with 2 fellow academics with different backgrounds (nursing, communication sciences and ethics).

The literature review also identifies the need for further discussion of this topic and for this research to point the way ahead for this important area of mental health service delivery and the issues surrounding recovery [10]. The researcher’s final aim is to generate more questions in relation to a user’s search for recovery, and therefor aiming for more investigations.

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