Recovery in Mental Illness: Concept Analysis
Ruhsal Hastalıklarda İyileşme: Kavram Analizi

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Abstract

The aim of this study is to analyze the concept of recovery in mental illnesses. Concept of recovery was examined by Walker and Avant's concept analysis method. By reviewing the literature; between May -September 2018, in Pubmed, Science Direct, Ovid and Google Academic databases with key words of "recovery, healing, wellness, mental health, concept analysis" and 5 Turkish and 18 English articles, 2 books, Turkish Language Institution dictionary and the Oxford English Dictionary were reached and examined. The analysis is carried out according to Walker and Avant's concept analysis method and in the first step, the concept is selected as 'recovery' and in the second step the purpose of concept analysis is determined. In the third step, lexical definition of the concept of recovery determined and all uses of concept that may be discovered is identified. In the fourth step, the defining attributes of the concept are determined as individual, hope, meaning, relationship, support, empowerment. In the fifth and sixth steps, the concept is discussed in terms of defining attributes in a model case, in borderline case and contrary case. In the seventh step, the anteceden factors leading to the emergence of the concept are trust, acceptance, respect, human rights, culture and recovery programs; the consequences that emerged after recovery has been identified as insight, coping, responsibility and functionality. In the last step, empirical referens are defined and various measurement tools were introduced to evaluate recovery. It is thought that a detailed concept analysis of recovery in mental illnesses will contribute to both clarification of the concept and presentation of recovery-focused services in the mental health field.

Keywords: Recovery, mental illness, concept analysis

Öz

Bu çalışmanın amacı ruhsal hastalıklarda iyileşme kavramının analizini yapmaktır. İyileşme kavramı Walker and Avant'ın kavram analizi yöntemi ile incelenmiştir. Literatür incelemesi; Mayıs- Eylül 2018 tarihleri arasında Pubmed, Science Direct, Ovid ve Google Akademik veri tabanlarında "iyileşme, iyi olma, şifa bulma, iyilik hali, hastalıktan kurtulma, salah, sağlık bulma, ruhsal hastalık, kavram analizi, recovery, healing, wellness, mental health, concept analysis" anahtar kelimeleri ile yapılmış ve kavram analizi için uygun 5 Türkçe, 18 İngilizce makale, 2 kitap, Türk Dil Kurumu sözlüğü ve Oxford ingilizce sözlük incelenmiştir. Walker and Avant'ın kavram analizi yöntemine uygun olarak yapılan analizin ilk adımında kavram 'iyileşme' olarak seçilmiş, ikinci adımında analizin amacına yer verilmiştir. Üçüncü adımda kavramının sözlük tanımı ve diğer kullanım alanlarındaki farklı tanımları incelenmiştir. Dördüncü adımda kavramın tanımlayıcı özellikleri; bireysellik, umut, anlam bulma, ilişki, destek, güçlenme olarak belirlenmiştir. Beşinci ve altıncı adımda kavram tanımlayıcı özellikler doğrultusunda model, sınırda ve karşıt vakalarda tartışılmıştır. Yedinci adımda kavramın ortaya çıkmasını sağlayan hazırlayıcı faktörler güven, kabul, saygı, insan hakları, kültür ve iyileşme programları; iyileşme oluştuktan sonra ortaya çıkan özellikler iç-görü, baş etme, sorumluluk ve işlevsellik olarak belirlenmiştir. Son adımda iyileşmenin değerlendirildiği farklı ölçüm araçları sunulmuştur. Ruhsal hastalıklarda iyileşme kavramının kavram analizi yöntemiyle ayrıntılı bir şekilde incelenmesinin, iyileşme kavramının netleştirilmesine ve ruh sağlığı alanında iyileşme odaklı hizmetlerin sunumuna katkı sağlayacağı düşünülmektedir.

Anahtar sözcükler: İyileşme, ruhsal hastalık, kavram analizi

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RECOVERY is a concept which is used in various disciplines, including medicine, nursing, public health, religion and spirituality (Schrank and Slade 2007, Aston and Coffey 2012, Mccauley et al. 2015, Hökelekli 2018). Recovery has also definitions in which all disciplines have identified in a unique way (Huiting 2013, Firth et al. 2015). Several definitions of recovery concept have taken a place in health discipline (Huiting 2013, Firth et al. 2015). Recovery concept is defined as "rehabilitation/retrieval of health status and functions to the level of health which the individual had before the beginning of the illness" (Huiting 2013). Recovery concept has been discussed within multiple aspects in a special field of health discipline, psychiatry (McElligott 2010, Çam and Yalçıner 2018). For a point of view, recovery is a dynamic interaction process between strengths and weakness of an individual (Bodine 2013, Klockmo 2013, Firth et al. 2015). Another definition of recovery mentions the importance of overcoming obstacles, being able to live independently and learning how to give contribution to the society (Erikson 2013, Güler 2017). Recovery in mental illness is also defined as the personalized journey managed by the individual to acquire positive self-perception, role and will, despite the difficulties of illness (Knutson et al. 2013, Çam and Durmuş 2016, Soygür et al. 2017). For the individuals whom have faced with mental illness, recovery is defined as both creation and living a meaningful life in time when symptoms of illness may present or not (Brown 2013). Personalized-recovery is an individual, time-consuming, varied (stepbacks and forwards) experience that based on hope, identity, meaning and responsibility (Erikson 2013, Brown 2013).

Family has played an important role in recovery process of the mental illness (Firth et al. 2015). Studies show that family support and peer support have a key role in recovery (Zaday 2015, Güler 2017). Last steps of recovery which are recuperation of his role in society and creating a new, preferred identity occur with the support of family (Zaday 2015). Families of individuals whom with mental illness believe that if they feel that there is a rosy future for their patients; then it may be named as recovery (Huiting 2013). In addition, role of family in the recovery has also takes a place in definitions that consist of individual, health professionals and manifestation of illness (Brown 2013, Çam and Yalçıner 2018).

Perspective of health professionals has added new dimensions of the recovery concept (McElligott 2010). This perspective positions the patient in the center of concept and it adapts diagnosis, treatment, symptom and rehabilitation into a personalized aspect making a way for successful intervention, decreased number of hospitalization, increased social functionality, oriented lifestyle changes, improved coping mechanisms and gained insight (Davidson et al. 2006, Huiting 2013, Çam and Durmuş 2016, Townsend 2016). Recovery in a clinical aspect refers the clinical outcomes where the symptoms of the illness are professionally graded. It has also focused on decreasing the severity of symptoms and regaining the functionality (Davidson et al. 2006, Macpherson et al. 2016).
Reasons of importance of recovery concept which is defined within different aspects for health professionals are an obligatory to understand the related concepts in detail, adding personalized aspect in center of illness management, delivering personalized health care for every patient (McElligott 2010, Huiting 2013). In the light of this information, first step is to clarify the recovery concept, second step is to define the main structure of which concrete and applicable interventions are based on. Aim of this study is to analyze the first step, which is recovery concept.

Method

Concept analysis is a process that requires information to be investigated, to be analyzed in depth, to be separated with similar concepts and to evaluate the validity of a concept and it is a process that requires attention (Meleis 2012). In this study, Walker and Avant's concept analysis method is used for the analysis of the concept of recovery (Meleis 2012). Walker and Avant's concept analysis method consists of 8 steps;

1. Select a concept: In this step, the concept which will be analyzed is selected.

2. Determine the aims or purpose of analysis: Purpose of concept analysis is determined.

3. Identify all uses of the concept: Evaluation of existing concept definition in all possible fields by evaluation the lexical meaning of concept.

4. Determine the defining attributes of Concept: Characteristics of concept that is defined in the literature are being evaluated.

5. Construct a model case: A model case is created that contains all the descriptive characteristics of concept.

6. Construct borderline and opposite cases: A borderline case that consists of limited number of descriptive characteristics of concept and an opposite case which consists none of descriptive characteristics of concept are created.

7. Identify antecedents and consequences: Antecedents in concept analysis are the events that must occur prior to the occurrence of the concept. Consequences of concept analysis are the events that occur as a result of occurrence of the concept.

8. Define empirical referents: It classes of categories of actual concept how to evaluate.

In this study; keywords such as "mental illness, recovery, healthy, healing, well-being, recovery of illness, improvement, health gain, overcome, concept analysis, and psychiatry" are being searched in academic library databases, Pubmed, Science Direct, Ovid and Google Academic from May 2018 to September 2018. 18 English, 5 Turkish article, 2 books and two dictionaries (Turkish Language Association and Oxford) were available for concept analysis.

Results

In this section, analysis of "Recovery Concept for an Individual with Mental Illness" is presented in accordance with the Walker and Avant's 8-Step Method.

1. Select a concept

"Recovery" is selected as the concept that will be analyzed.

2. Determine the aims or purpose of analysis

Aim of study is to define concept of recovery for individuals with mental illness and ensure intelligibility.

3. Identify all uses of the concept

Lexical meanings of recovery concept and usage in different disciplines are being evaluated in this step of concept analysis.

Lexical meanings of "recovery"

The word "recovery" is defined in Turkish Language Association Dictionary as "task of recovery, improvement in well-being, recovery of illness, healing and salah (get better) (Turk Dil Kurumu 2018). Word "Salah" comes from Arabic and it means "the best of situation, healing, recovery" (Turk Dil Kurumu 2018). Word "cure" Arabic roots, "sfw"; means "end of the mental and physical illnesses, pull through the illness, healing (Etimolojiturkce 2008, Turk Dil Kurumu 2018). Word "recovery" is defined in Oxford English Dictionary in three different meanings, in terms of area of usage; "A return to a normal state of health, mind, or strength."; "The action or process of regaining possession or control of something stolen or lost." and "The process of removing or extracting an energy source or industrial chemical for use, reuse, or waste treatment (Oxford 2018). Word "healing" is defined in Oxford English Dictionary as "The process of making or becoming sound or healthy again(Oxford 2018).

Definitions of recovery in different disciplines

In this step, recovery concept is observed in various disciplines and it has unique definitions for each discipline. In computing, recovery is a process of salvaging (retrieving) inaccessible or lost data. In natural science, recovery means re-planting of fields which were deforested. In metallurgy, recovery is a changing process of microstructure of polycrystalline. In economy, recovery means that a phase of the business cycle following a recession, during which an economy regains its optimum output level (Huiting 2013). Taking into account of these definitions; recovery means a process which needs intervention to replace of a deficiency/deprivation, in general.
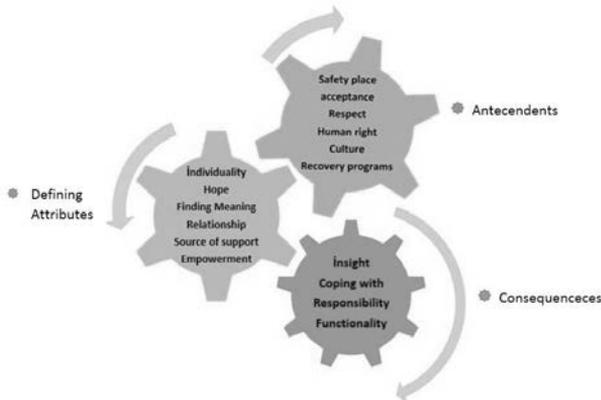

Figure 1: Antecedents and descriptive characteristics of recovery and consequences

4. Determine the defining attributes of concept

In this step, other concepts which are related to recovery concept are determined and evaluated (Meleis 2012). According to the literature, individuality, hope, finding mean-

ing, relationship, support, empowerment are terms which are related with recovery (Erikson 2013, Knutson et al. 2013, Moller and McLoughlin 2013, Townsend 2016, Soygür et al. 2017). These concepts lead us to the recovery concept in an inductive pattern.

Individuality

Individual with mental illness is an expert of himself, just because his experiences are unique. Recovery is an individual process that person redefines and restructures his roles and functions in existing conditions. At the end of this process, individual gains his functionality to take decisions of his life (Schrank and Slade 2007, Barker and Barker 2011, Klockmo 2013, Macpherson et al. 2016).

Hope

Hope includes faith which makes life meaningful and instills recovery can be possible. Hope motivates individual that obstacles can be overcome by focusing the strengths and future will be better than present. It is well known that keeping hope alive is important to overcome the up and downs in recovery process (Jacobson and Greenley 2001, Schrank and Slade 2007, Aston and Coffey 2012, Moller and McLoughlin 2013).

Finding meaning

Finding meaning in illness process corresponds to accept the illness and to gain insight into current situation, making an effort to think better and to find meaning in life, despite the limitations of illness (Knutson et al. 2013, Soygür et al. 2017).

Relationship

Developing healthy relationships between individuals with mental illness and his family, friends and health professionals may be a key to successful recovery. Because of these relationships, individual maintains his roles with awareness of having a place in society and sense of belonging (Knutson et al. 2013, Çam and Durmuş 2016, Townsend 2016).

Sources of support

Family members, peers, friends and health professionals, non-governmental organizations, various support organizations, health institutions and health organizations are important sources for supporting individuals with mental illness in recovery process. These sources aid individuals with support and strategies to overcome the obstacle, share hope for recovery process (Erikson 2013, Townsend 2016, Çam and Yalçıner 2018).

Empowerment

An individual with mental illness can be empowered by believing himself, making rational choices, gaining autonomy, encouraging himself to find meaning in illness experiences and discharging his responsibilities (Knutson et al. 2013, Moller and McLoughlin 2013).

5. Construct a model case

A model case which consists of the descriptive characteristics of recovery; individuality, hope, finding meaning, relationship, support and empowerment is presented.

Model case

32-year-old, male patient (M.T.) is single and graduated from university. He had diagnosed with schizophrenia 12 years ago. He had been hospitalized before and this is the second time of hospitalization. Persecutory delusions, social isolation and non-adherence to therapy are the reason of being hospitalized. Psycho-education sessions were held which is the part of the therapy. Symptoms, treatment, coping strategies of illness and giving up smoking were the main topics of these sessions. Preferences of patient was taken into consideration for making a decision of being hospitalized. All the decisions are taken according to the will of the patient including the visitors and the patient accompanist. Coping strategies which were used to in the past were replaced with new and effective coping strategies; it was observed that patient was better able to cope with current stressors. Exercises of starting and maintaining communication with patients and health professionals were performed in hospitalization period. Presence of hope was observed in fifth session by the words of patient; I am going to be recovered, get back to my work and I want to get married". Family and workmates of patient were informed about this mental illness and workmates are encouraged to visit the patient. After one month of discharging, patient was examined by professionals and it is recorded that patient was able to communicate effectively with relatives and his friends. In that session, insight of patient was evaluated with the words of patient; "My perspective of the interactions between individuals was changed with the experience of illness. I am more willing to help others, compared to the past. I got unique support from a therapy group which were composed of people with same experience". After six months, patient was examined again and there were no problems about adherence to the therapy and no active symptoms of illness were recorded. It is also noted that patient got started to his work again.

6. Construct borderline and opposite cases

A borderline case which consists of some of descriptive characteristics of recovery concept (individuality, finding meaning, support) and an opposite case which consists none of descriptive characteristics of recovery concept are presented.

Borderline case

C.E, 20 years old female patient had hospitalized in first time with the symptoms of anhedonia, decreased energy and feeling of useless. These symptoms have lasted for six months and it is noted that patient got absented from school frequently, had limited social relationships and also had family estrangement. Following of hospitalization, mother of patient stayed to accompany with patient, however, limited communication between patient and her mother were observed. After ten days of hospitalization, patient began to speak in therapy groups in clinic at times; she attended in some of clinic actions, such as morning sports by voluntarily. She decided to accept some of her family members as a visitor in following days. She stated that she could not able to get control all over the actions around her. She also admitted that she took responsibilities without support; more than she could handle by her own.

Opposite case

H.A, 40 years old, married male patient whom had three kids. Patient with schizophre-

nia for ten years was hospitalized for the fourth time, with positive symptoms, and with the complaints of not being able to work in a job, not being able to leave his home to go out and with decreased role performance. Patient communicated just T.K and he stated that another patients and health professionals will hurt him. He also believed that he had special abilities and people were reading his thoughts. Patient with these positive symptoms did not accept any support. Just because of appointment of guardianship decision by court, he is not permitted to take decisions of himself.

7. Identify antecedents and consequences

Antecedents in concept analysis are events that must occur prior to the occurrence of the concept (Meleis 2012). Safety place, acceptance, respect, human rights, culture and recovery programs are accepted as an antecedents of recovery concept in literatüre (Jacobson and Greenley 2001, Erikson 2013, Knutson et al. 2013, Moller and McLoughlin 2013, Soygür et al. 2017). It is important for the individuals with mental illness, to feel free in a safe environment, which promises qualified care, away from violence, injury or abuse, in order to achieve recovery in individuals with mental illness (Knutson et al. 2013, Soygür et al. 2017).

In order to achieve a successful recovery, it is also important for society has to accept patient, with the limitations and consequences which are accompanied by illnesses (Erikson 2013). Patients have the fundamental rights, such as education, employment, housing and access to health without any stigmatization (Jacobson and Greenley 2001, Moller and McLoughlin 2013). In addition to this, establishment and application of recovery programs which are appropriate with cultural infrastructure are needed (Macpherson et al. 2016).

Consequences of concept analysis are events that occur as a result of occurrence of the concept (Meleis 2012). In this context, insight, coping with, responsibility and functionality are the literately-defined consequences. Individuals can gain insight by accepting the illness throughout the recovery process (Knutson et al. 2013, Brown 2013, Güler 2017). They can succeed to develop coping strategies to manage the symptoms and be able to focus their strengths and be able to take responsibility for their choices (Schrank and Slade 2007, Erikson 2013, Knutson et al. 2013, Çam and Durmuş 2016). After the recovery journey; individuals can pick up their individual, social and occupational roles where they left off (Davidson et al. 2006, Schrank and Slade 2007, Bodine 2013).

8. Define empirical referents

Various assessment tools are used to evaluate the recovery concept in individuals with mental illness (Bodine 2013, Güler 2017). "Recovery Assessment Scale (RAS)", "Recovery Process Inventory (RPI)", "llness Management and Recovery Scale" are tools used in recovery studies (Güler 2017). The RAS was developed as an evaluation tool, and has been used to assess the impact of a range of programs. It covers five domains: personal confidence and hope; willingness to ask for help; goal and success orientation; reliance on others; and no domination by symptoms (Güler 2017). The RPI measures the following domains of recovery from the consumer's perspective: anguish; connectedness to others; confidence/purpose; others care/help; living situation; and hopeful/cares for self (Shanks et al. 2013). Illness Management and Recovery Scale covers information about mental illness, adherence to the therapy, preventing relapses, social support, effective

coping and substance dependence (Çam and Yalçıner 2018). Descriptive characteristics of concept are needed to evaluate the concept (Meleis 2012). Descriptive characteristics are included in the development stages of three scales. Subscales of these scales are similar with the descriptive characteristics which are included in our study.

Conclusion

Recovery concept is an important concept which has to be evaluated in psychiatry. This concept is defined with point of view of patient, family and health professionals and features which are clinically related with recovery. Because of this reason, analysis of concept can be complicated, however in accordance with its complication, evaluation of analysis is becoming crucial.

In this study, analysis of recovery concept is performed. As a result of study, definition of recovery arises with taking part of some of descriptive characteristics which are individuality, hope, finding meaning, relationship, sources of support and empowerment. It is thought that common language will be established between professionals by descriptive characteristics which come to exist at the end of study and use of concept. Further studies should be conduct in accordance with recovery and related concept, it will have based on the definition of individually-recovery concept, also will have defined the structure of which concrete and applicable interventions are based on.

References

Aston V, Coffey M (2012) Recovery: what mental health nurses and service users say about the concept of recovery. J Psychiatr Ment Health Nurs, 19: 257–263.

Barker PJ, Barker PB (2011) Mental health nursing and the politics of recovery: a global reflection. Arch Psychiatr Nurs, 25: 350–358.

Bodine MN (2013) Validation of the mental health recovery measure as a clinical assessment (Doctoral thesis). Ohio, The University of Toledo.

Brown P (2013) A National Framework for Recovery-Oriented Mental Health Services: Guide for Practitioners and Providers. Australia, Australian Health Ministers' Advisory Council Australia.

Çam MO, Durmuş H (2016) Ruhsal hastalığı olan bireyler ve psikiyatri hemşireleri açısından iyileşme. Ege Üniversitesi Hemşirelik Fakültesi Dergisi, 32: 97-106.

Çam O, Yalçıner N (2018) Ruhsal hastalık ve iyileşme. Psikiyatri Hemşireliği Dergisi, 9: 55-60.

Davidson L, Lawless MS, Leary F (2006) İyileşme kavramları: birbiriyle çelişiyor mu yoksa birbirini tamamlayıcı mı? Curr Opin Psychiatry, 2:41-46.

Erikson MS (2013) An Integrative review of what contributes to personal recovery in psychiatric disabilities. Issues Ment Health Nurs, 34:185-191.

Etimolojitürkçe (2018) EtimolojiTürkçe. https://www.etimolojiturkce.com/. (Erişim tarihi: Temmuz 2018)

Firth K, Smith K, Sakallaris BR, Bellanti DM, Crawford C, Avant KC (2015) Healing, a concept analysis. Glob Adv Health Med, 4:44-50.

Güler C (2017) İyileşme Değerlendirme Ölçeği'nin Türkçe formunun geçerlik ve güvenirliği (Yüksek lisans tezi). İzmir, Ege Üniversitesi.

Hökelekli H (2018) Din, Değerler ve Sağlık. İstanbul, Dem Yayınları.

Huiting X (2013) Recovery in mental illnesses: A concept analysis. International Journal of Caring Sciences, 6:439-450.

Jacobson N, Greenley D (2001) What is recovery? A conceptual model and explication. Psychiatr Serv, 52:482-485.

Klockmo C (2013) The role of personligt ombud in supporting the recovery process for people with psychiatric disabilities (Doctoral thesis). Sundsvall, Sweden, Mid Sweden University.

Knutson MB, Newberry S, Schaper A (2013) Recovery education: A tool for psychiatric nurses. J Psychiatr Ment Health Nurs, 20:874–881

Macpherson R, Pesola F, Leamy M, Bird V, Boutillier CL, Williams J, Slade M (2016) The relationship between clinical and recovery dimensions of outcome in mental health. Schizophr Res, 175:142–147.

Mccauley CO, Mckenna HP, Keeney S, Mclaughlın DF (2015) Concept analysis of recovery in mental illness in young adulthood. J Psychiatr Ment Health Nurs, 22:579-589.

McElligott D (2010) Healing. J Holist Nurs, 28:251-259.

Meleis AI (2012) Theoretical Nursing Development and Progress, 5 th edition. Philadelphia, Lippincott William & Wilkins.

Moller MD, McLoughlin KA (2013) Integrating Recovery practices into psychiatric nursing: where are we in 2013? J Am Psychiatr Nurses Assoc, 19:113–116.

Oxford (2018) English Oxford Living Dictionaries. https://en.oxforddictionaries.com/ (Erişim tarihi: Temmuz 2018)

Schrank B, Slade M (2007) Recovery in psychiatry. Psychiatr Bull, 31: 321-325.

Shanks V, Williams J, Mary L, Bird VJ, Boutillier CL, Slade M (2013) Measures of personal recovery: a systematic review. Psychiatr Serv, 64: 974–980.

Soygür H, Yüksel HM, Eraslan P, Özden S (2017) Mavi At Kafe'nin 6 yılda öğrettikleri: şizofreni hastalarının gözünden iyileşmeye katkıda bulunan etmenler-nitel bir analiz. Turk Psikiyatri Derg, 28: 75-80.

Townsend MC (2016) Ruh Sağlığı ve Psikiyatri Hemşireliğinin Temelleri Kanıta Dayalı Uygulama Bakım Kavramları, 6. Baskı (Çeviri Ed. Özcan CT, Gürhan N). Ankara, Akademisyen Tıp Kitabevi.

Turk Dil Kurumu (2018) Türkçe Dil Sözlüğü. http://www.tdk.gov.tr/. (Erişim tarihi: Temmuz 2018)

Zaday ML (2015) A public service announcement about the recovery model (Master's thesis). Northridge, California State Unıversıty.