Longitudinal study exploring the value of occupation in the recovery of mental health service users within the Kawa Model Framework

Key findings
- Recovery as a concept is unique and personal, and cannot be generalised amongst all mental health service users.
- Participants equated the success of their recovery upon not having a relapse and remaining out of hospital.
- Isolation, loss of hope and boredom are major contributors to poor mental health, relapse, and also hinder recovery.
- The pressure to be employed and be in paid work, leads to undue stress for those with a long-term mental health conditions.
- Strong social networks, personal friends, engagement in creative activities and spiritual faith were considered to be necessary for mental health recovery and remaining well.
- Participants wanted to contribute to society and saw voluntary work, being involved in service users groups and offering support to their peers as ways of giving something back.
- Engagement in meaningful occupations, activities and participation were important for remaining well and promoting recovery.
- Participants indicated that they were able to relate to the river metaphor and found the concepts of a river representing their recovery journey as helpful in assisting them to both map and better appreciate the contributors and barriers to their recovery and well-being.
- Participants highlighted the Kawa model as beneficial in assisting them to explore, reflect upon and gain insight into their personal recovery and in exploring their diverse lived experiences.

Project aims
This research aimed to explore the lived experiences of mental health service users as they journey through their own recovery. The study examined:
- The personal nature of mental health recovery.
- The value of occupation in mental health recovery.
- The utility of the Kawa Model in assisting participants to explore and understand their personal journey of recovery.

Background
Understanding and appreciating the recovery journey and experiences of mental health service users are fundamental to ensuring the delivery of client-focused and effective services. The National Service Framework for Mental Health (1999) highlights the importance for health and social care professionals to actively engage service users in exploring key factors that support their personal recovery from mental illness. Service user organizations like Rethink, Mind and the Mental Health Foundation have similarly highlighted the importance of supporting the recovery experiences of service users (National Institute for Mental Health in England 2005, Sainsbury Centre for Mental Health 2008).

The College of Occupational Therapists Mental Health Strategy (2007) further highlights the importance of understanding the unique value and role of meaningful occupation in contributing to the recovery of service users. However current literature is limited in highlighting how engagement in occupation is beneficial to service user recovery and health (Lloyd et al 2008, Reberio 2003). The Kawa model, a new occupational therapy model, has the potential to aid the exploration of how occupation may impact on the recovery journey and treatment experiences of service users (Lim 2008). Current single case study research has noted positive results, including clients being able to actively engage in their treatment through using the Kawa model and it enhancing their understanding of their own recovery experiences (Lim and Iwama 2006), however more large scale research is required to support its utility and it’s potential as a personal recovery framework.
Methodology

A qualitative research methodology was adopted and 8 participants were recruited, via a local mental health charity following ethical approval, and interviewed a total of five times at three monthly intervals, throughout one year.

The interviews were focused on exploring how participants viewed and experienced their own recovery and establishing the range of factors that both promoted and hindered personal recovery and the value of occupations and activities in supporting recovery. The interviews were transcribed verbatim and then Interpretative Phenomenological Analysis was applied as the form of analysis for the interviews.

Additionally, participants were introduced to and also used the Kawa Model to create individual recovery maps at each interview to examine and explore their recovery as a river journey. The maps provided a visual record of each participants own mental health recovery journey through one year of their lives.

Benefits from the research for service users and the profession

The outcomes from the research provide clinical practitioners with valuable service user insights into what recovery actually means to those with a mental health condition and also personal perspectives on factors that promote mental health, well-being and personal recovery, for example:

Value of Occupation: “So poetry, singing, my voluntary work, and those are the most important things that matter to me.” Diane

Utility of the Kawa Model: “I think it’s brilliant because it has given me a visual, tangible form and being able to reflect where you were.” Kim

The research also provided the group of service user participants an opportunity and voice to express their own views and opinions about personal recovery in an unrestricted way, sharing their personal narratives and experiences.

The results from the study have illuminated the therapeutic value and potential of occupation and occupational therapy and enable occupational therapists to better understand how to deliver relevant and effective interventions that best assist their clients in making choices, taking action or engaging in activities that enhance their overall health, wellbeing and recovery. The research outcomes have also supported the added value of occupation in supporting mental health recovery as highlighted in Recovering Ordinary Lives (COT 2007). The potential and value of the Kawa Model as both a therapeutic and recovery framework promoting partnerships and assisting respective clients to gain awareness, knowledge and understanding of how they can personally influence and enhance their own health, well-being and recovery is valuable to the profession, practitioners and service users alike.

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References


