Mental health promotion in a hospital setting – the patients’ voice:

A PhD study in Norway at Division of Mental Health and Addiction, Vestre Viken Hospital Trust

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Introduction

• Mental health promotion in a mental health hospital
• To expand current knowledge on:
  – positive mental health
  – how to promote and protect positive mental health in mental health care
• To explore lived experiences of everyday life and in-patient care
• Informants: persons diagnosed with mental disorders
Theoretical framework

- Aaron Antonovsky’s salutogenic model of health
- Health as a continuum, not a dichotomy
- A search for a movement towards the ease end of the ease – dis-ease continuum
Theoretical framework

- Corey Keyes’ model of positive mental health
- Complete mental health – a two continua model
- Presence of positive mental health: Feeling good about a life in which one is functioning well
The Two Continua Model

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Research question 4
Which experiences from in-patient care in a mental health hospital do previous patients describe as promoting positive mental health?
Research question 5:

Which improvements in a mental health hospital are suggested by previous patients in order to protect and promote positive mental health?

August 25, 2014
Methodology

• **Design:**
  – A qualitative study exploring lived experiences
  – Inspired by Interpretative Phenomenological Analysis (IPA) Smith, Flowers & Larkin, 2009
  – Qualitative interviews guided by an interview schedule
  – Transcribed and analyzed with a case and a issue focus inspired by IPA
  – Software QSR NVivo 10
Methodology

- Participants:
  - Purposive selection of twelve former in-patients:
    - In-patients for at least 14 days over the last two years
    - Who consider themselves to be in recovery
    - Who consider that their lives have improved with the help of mental health services
  - 7 women; 5 men; age: 23-80; inpatients stay: 1->50, spouse; parents; partner
  - Work; disability pension; work assessment allowance
Collaborators

• Supervisors
  – Professor Geir Arild Espnes, PhD, Norwegian University of Science and Technology, Norway
  – Associate Professor Hege Forbech Vinje, PhD, Vestfold University College, Norway
  – Associate Professor Monica Eriksson, PhD, University College West, Trollhättan, Sweden

• Colleagues and associate researchers
  – Department of Mental Health Research and Development

• Advisory team
Advisory team

- Service user involvement in the research process
- Different from participating as an informant
- Three persons diagnosed with a severe mental disorder
- Three family members of persons with severe mental disorder
- Contributions from the team have influenced several phases of the research process

August 25, 2014
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Preliminary findings
Factors promoting positive mental health

• Patient related factors (1)
• Relationships to health professionals (2)
• Organizational factors (3)
Inpatients’ experiences of mental health promotion

• The relationship to staff and therapists (2)
  – Continuity and time together
  – To be cared for and to get “start-up” help, to overcome the “threshold”
  – To be seen as a person not only a “case”
  – To feel that experiences are appreciated as valuable in treatment and care planning
Nina: You mentioned your primary nurse? Will you tell me more about that?

Guro:

She meant everything to me. She was something to hold on to. I knew I could go to her ... I knew she understood me, somehow.

It was crucial to the whole stay, really ...

And her for me - I feel that she saved my life, actually.

So the primary nurse, it is an important thing, I believe. Having that one person you know who is there for me and who has heard and knows my story a little more thoroughly.
Health promoting organizational factors (3) "Dream hospital"

• Predictable routines and structured organization
• Psychoeducation and saluseducation
• Dissemination of positive experiences from both professionals and persons with mental disorders
• Joyful, creative and meaningful activities
• More focus on challenges in everyday living
Marit:

Knowledge about what promotes your health, what's good for your health, what's good for your well-being is very important. Such as dental care and dental health - how to brush your teeth, completely elementary but important things, that helps you feel good. Or that they push me to shower. Imagine how great you feel after a shower when you haven’t showered like in two weeks. And what is good food, for example. We had a course entitled: Healthier Living. That ordinary knowledge about the normal things that are important to feeling good.
Irene:

Routines are essential. To have a fixed weekly schedule to deal with. That is one of the reasons for my inpatient stays - to get regular routines, because that's often what happens that I veer out and sleep late and fall asleep late and eat little, eat unhealthily. So getting a daily rhythm back... Yeah, a little push to actually, yes eat regular meals, do regular activities, get a routine back. So essentially it's sleep, regular medication, or medication at set times, and food, which is important when I am hospitalized.
Discussion

- The significance of the 24 hours care for well-being and recovery must be further explored.
- A revitalized focus on milieu therapy and primary nursing is needed to utilize its health promoting potential.
- Healthy learning (saluseducation).
- The patients’ voice must be included in planning and implementation of mental health promotion interventions.
Thank you for listening