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Impact of a Recovery-Based Program for Patients in Inpatient Psychiatric Stays

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Introduction

Recovery-based practice is an international trend in psychiatric services development. In recovery-based practice, patients are encouraged to relearn about themselves and regain opportunities for self-development to lead the meaningful life of their own choice.

Objectives

This study is an intensive retrospective evaluation of 63 patients with different diagnoses of psychotic and affective disorders whom participated in the recovery-based psychiatric rehabilitation in occupational therapy department of Tai Po Hospital.

Methodology

All subjects were in-patients whom had participated in a three-week recovery-based occupational therapy program. A series of psycho-education program and therapeutic group sharing were conducted. Patients' level of hope, mental wellbeing, progress towards recovery and illness management were assessed by Chinese Hope Scale (CHS), Chinese Short Warwick-Edinburgh Mental Well-being Scale (CSWEMWBS) and Chinese Illness Management and Recovery Scale (CIMRS).

Result

A number of positive changes was noted in our patients, including enhanced ability to generate routes to recovery goals, enhanced capacity in initiating and maintaining the actions that necessary to reach their recovery goals. There is significant improvement noted in seeking social support and getting involvement from their family and friends ($p < .05$). These positive changes could be attributed by their social network re-activation and more social inclusion, as suggested from findings of Perry and Pescosolido (2015). Female showed significant change in both pathway thinking and agentic thinking in the hope scale measure. Nevertheless, male showed only significant change in pathway thinking ($p < .05$). This phenomenon could be explained

by Snyder et al (1991) that female and male adopt different perspective in formulating their recovery and illness management strategies. Male would have enhanced ability to generate routes to his recovery goals. Female patients would have enhanced capacity for initiating and maintaining the actions necessary to reach a goal. The recovery of female patients would be facilitated by emotionally supportive social relationships with others who listened to them, and who understood and showed engagement. The recovery process of male patients is influenced by gender constructions both in terms of societal gender expectations and the men 'doing gender' in their strategies to control the illness. Furthermore, female patients showed significant awareness in getting social support from their trusted one than male ($p < .05$). This finding is similar to the study of Davidson (2003) that male would adopt their recovery journey by involving in a limited social network than female. After the recovery program, patients showed enhancement in knowledge and information acquisition ($p < .05$). It echoed with Mueser's (2002) finding that psycho-education would increase individuals' insight and sociability. It was believed that recovery strategies were acquired through knowledge and skills obtained in relationships with therapist, therapy assistants and other patients with their own experience of mental illness. Recovery-based psychiatric rehabilitation program is an effective way of treatment for psychiatry inpatients. Results showed that there was gender difference in recovery. A closer look into gender difference may provide new insights in providing care to facilitate patient's recovery.