

Psychiatric Hospitalization and Resiliency: Experiences of Adults with Serious Mental Illness upon Reentering their Communities

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Abstract

This qualitative study describes the narrative accounts of **12 adults living with a serious mental illness** (SMI; e.g., schizophrenia, bipolar, major depression) **who have experienced psychiatric hospitalization in the past six months to two years**. The research examines aspects of resiliency described by participants that facilitated their return to community life after being discharged from the hospital.

The Present Study

The present study poses the following questions:

1. How do adults with mental illness **describe their psychiatric hospitalization** experience?
2. What **individual aspects, if any, of resilience** do adults identify as relevant factors in their readjustment to community life following psychiatric hospitalization?
3. What **social and community level resiliency components, if any**, do adults feel assisted them in their overall reintegration to the community following psychiatric hospitalization?

Rationale

Qualitative approach:

Existing conceptualizations typically view resiliency as a personal characteristic without regard for environmental influences. A qualitative approach can allow for: 1) an understanding of both individual and environmental factors of resilience to emerge; 2) participants' views on relationships between resiliency, hospitalization, and mental health recovery.

Adults coping with serious mental illness:

There are few existing studies that explore resiliency for people coping with psychiatric disability. Prior studies suggest that individuals with SMI report lower resiliency scores overall than the general population.

Psychiatric hospitalization:

Psychiatric hospitalizations are inherently life-interrupting and are often part of the lived experience of adults coping with serious mental illness. Upon discharge, adults are asked to return to their everyday lives. Although studies suggest ways that mental health professionals can facilitate adults' return to community life, little is known about factors related to adults' resiliency after their psychiatric hospitalization experiences.

Protocol

The goal of this interview protocol is to allow participants to reflect upon and share their hospitalization experiences from events that led up to the hospitalization, to the time when they felt their life was "back to normal." The protocol contains open-ended questions to let participants speak to resiliency efforts salient to them in their adjustment back into the community post-discharge.

Interview Outline:

- Demographic information
- Hospitalization experiences
- Pre- and Post-hospitalization experiences
- Situational
 - Living situation
 - Employment
- Social
 - Current and prior close relationships
 - Social involvement in hospitalization experience
- Everyday Experiences
 - Goals & Commitment
 - Patience
 - Happiness
 - Humor
 - Past success
- Overall perspective on resiliency

Data Analysis

Data analysis process:

- Transcribe interviews
- Form summaries of each interview
- Identify initial themes
- Create coding manual
- Identify any additional common themes and code
- Form common themes into conclusions
- Have independent researcher check codes for validity

Process for coding resiliency components:

Literature suggests there are 16 identifiable resiliency components. Not all resiliency components were explicitly examined in the interview protocol, allowing participants to speak to unique factors that may be related to aspects of resiliency not previously identified in the literature. Table 1 outlines the two major categories of resiliency components: social and individual, and highlights the components of resilience that were examined in the interview protocol.

Table 1. Resiliency Components

Social
Engaging support of others
Close, secure attachments
Positive interpersonal relationships
Help-seeking
Individual
Adaptability to change
Commit to obligations
Past success
Sense of humor
Patience
Goal setting (individual or collective)
View change or stress as challenge/opportunity
Recognition of limits of control
Strengthening effect of stress
Realistic sense of control/have choices
Action-oriented approach
Tolerance of negative affect

Key

Black: Explicit topics to be discussed in interview
 Orange: Open-ended topics that may be discussed in interview.

Implications

The goal of this study is to identify areas of resiliency that are salient in individuals' experience adjusting to their community after a psychiatric hospitalization. Implications of this study for future research include:

- **Exploring individual and social factors describing resilience**
 - Develop quantitative resiliency measures that allow for exploration of both individual and social factors
 - Identifying social factors of resilience can inform mental health systems about additional elements needed at discharge that can facilitate community readjustment
- **Studying a specific life altering event such as psychiatric hospitalization**
 - Explore how resiliency components may be related to specific life circumstances
 - Focus on development of programs or interventions that can foster resiliency for specific life event
- **Giving voice to the experiences of adults coping with serious mental illness**
 - Describing the lived experience of these adults can inform the research community and mental health professionals
 - Allows adults to reflect and share their valuable experiences and insights.