

Exploring Recovery-Focused Health Workers for Advancing Mental Health: Literature Review

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Abstract. The process of recovering from mental disorders extends beyond medical treatment to address the individual needs of patients. Achieving recovery from mental disorders requires a comprehensive approach and effective collaboration among healthcare services, caregivers, and the community. Health workers play a crucial role in the treatment and recovery journey of patients; however, their services may encounter challenges. Hence, this study aims to explore the role of health workers and the challenges they face in aiding the recovery of patients with mental disorders. A literature review methodology was employed, utilizing two electronic databases, PubMed and Scholar, with keywords including "Mental Health," "Mental Disorder," "Mental Illness," "Recovery," and "Mental Health Professional," "Nursing," or "Mental Health Practitioner." Twelve articles were selected for inclusion in the review. The literature revealed several themes concerning the role of health workers in the recovery process of mental disorders. These themes include: suboptimal knowledge among health workers, highlighting the need for education and training; the presence of stigma among health workers towards mental disorders, necessitating interventions to address these biases; and the types of services provided to patients.

Keywords: Recovery, Mental illness, Health workers

1 Introduction

Mental health recovery is a personal journey in which individuals grow through their strengths, skills, hope, and independence to live productive and meaningful lives even when they may still experience symptoms of their illness [1];[2]. The aim of this recovery is to regain physical, mental, social, spiritual, emotional, cognitive and aesthetic health and help patient with mental disorder or in Indonesia called Orang dengan Gangguan jiwa (ODGJ) to socialize optimally.

Recovery services focus on restoring function, mental well-being and a more effective quality of life for patient through a holistic approach [3]. This approach focuses on individual strengths rather than disease [4]. Achieving recovery from mental disorders

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necessitates a holistic approach and a cohesive collaboration among healthcare services, caregivers, and the community. This collaborative effort enables individuals with mental health challenges to interact effectively with others, cultivate a positive self-image, and enhance their well-being autonomously [5];[6].

Health workers occupy an important position in the treatment and recovery of ODGJ. The behavior and attitudes of health workers are related to treatment outcomes and quality of care [7]. Mental health workers, apart from serving patient and their families, are also role models and educators, thereby forming people's beliefs about treating mental disorders [8]. Health workers as experts have more attitudes and knowledge towards ODGJ [9]. Recovery practices are oriented towards the well-being of ODGJ so that health workers are encouraged to identify well-being goals and to manage their disease effectively [10];[11].

To apply the mental health recovery model, health workers must have the knowledge, skills and attitudes to implement it [12]. Healthcare professionals require assistance and educational resources to cultivate skills essential for aiding in recovery, ultimately aiming to enhance outcomes for consumers [13]. The responsibility of healthcare providers lies in supporting individuals throughout their recovery journey. Education and training serve as effective strategies for enhancing the knowledge and mental disposition of healthcare professionals [14]. Thus, this study seeks to investigate the roles and challenges encountered by healthcare workers in facilitating the recovery of individuals with mental health conditions.

2 Method

The approach employed in this paper is a literature review methodology. A literature review itself is a data collection activity, both library data and documentation [15]. The data used as material in this research comes from journals which contain the concepts to be studied [16].

3 Information Sources and Search Strategies

The search for articles was conducted using two electronic databases, specifically Pub-Med and Scholar. These criteria include the year of collection from 2018 to 2023 and the match between keywords and journal results.

Keywords (AND) and (OR) are used in searches for articles or journals to help narrow down the results and find articles or journals that are relevant. Key words used in this literature review consist of:

- 1. Mental Health OR Mental Disorder OR mental illness
- 2. Recovery
- 3. Mental health professional OR nursing OR mental health practitioner

4 Eligibility Criteria

In accordance with the purpose of the review, the criteria for articles or journals taken are as follows:

- 1. Published in English and Indonesian 2018-2023
- 2. The research population is health workers in the care of ODGJ
- 3. The report shows the role of health workers in treating ODGJ to recover patient.

5 Results

5.1 Study Selection

The results of the search that was carried out identified 1306 articles (Fig. 1). After identifying duplications, we screened 1304 articles and after checking the suitability of the title and inclusion criteria there were 1188 articles that did not match. We screened out inappropriate abstracts from the remaining 45 articles, of which there were 12 suitable articles. So, 12 articles were included in this review. Results are presented narratively from the findings.

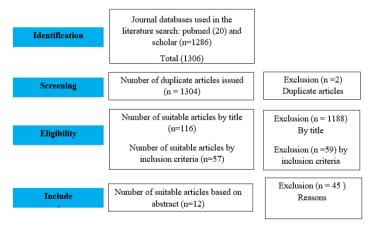


Fig. 1. Identification, screening, and selection process of articles

Table 1 displays the researcher's analyzed data structured according to the provided template, encompassing research type and design, population, research objectives, results, and research findings.

No	Au- thor	Aims	Study design	Key Finding
1.	[17]	The aim is to depict and contrast the attitudes to- ward mental illness among professionals em- ployed in various mental health facilities across Spain, Portugal, and Italy.	Quantitative Research	- Overall, mental health professionals tend to exhibit a favorable outlook toward mental illness, although a minority still harbor negative attitudes and feel compelled to continue working in the field.
2.	[18]	To examine the extent and nature of coercive prac- tices in mental health ser- vices and to consider the ethical and human rights challenges facing current clinical practice in this area	Literature review	 There are still some health workers who use coercion in the treatment of mental disorders Interventions need to be carried out to overcome coercion in mental health care because it can hinder recovery.
3.	[19]	To ascertain the views of service users, nurses and staff on acute inpatient wards regarding factors that facilitate or constitute barriers to collaborative, recovery-focused care	Quantita- tive Research (Cross sec- tional)	 The quality of good communication relationships influences recovery Collaborative actions between professional staff on a regular basis also have an impact on the recovery of ODGJ
4.	[20]	Reviewing digital health technology interventions, especially in mental health services, including barriers and facilitators in adopting and implement- ing digitally mediated in- terventions in service de- livery	Literature review	 The use of digital technology helps treat ODGJ in various treatments including recovery New ways of assessing digital health tools are required because advancements in digital technology are happening faster than these tools are being carefully studied/
5.	[21]	To explore health staff's views on the usefulness and appropriateness of us- ing digital tools within the healthcare pathway for people accessing mental health services	Qualita- tive research	 The work done by specialists in early intervention for mental health services using digital tools is considered satisfactory. The image shows a diagram about environmental recovery, but the text discusses the importance of organizational support for successful digital system implementation.
6.	[22]	Provides an overview of the approach to imple- menting division of tasks to provide mental health services.	Literature review	 Task sharing is effective as a way to provide services in a variety of settings across settings There are several ways to make sure that care tasks are divided up well among staff. These include making sure everyone feels supported (balanced care), working together effectively (relational care), having ongoing training and supervision, using treatments that can address a range of problems (transdiagnostic

 Table 1. Analysing of Literature Review

				interventions), and using new digital technologies.
7.	[23]	Provide information about learning and pro- vide cognitive behavioral therapy (ICBT) via the in- ternet and other mental health services as part of routine care.	Literature review	 Mental health services offered by Inner Balance provide not only treatment, but also information and assessment services. This internet-based service provides mental health benefits including recovery
8.	[24]	To obtain information about the implementation of mental health programs at the UPT Puskesmas Soasio, Tidore City in the context of recovering ODGJ	Qualita- tive research	 Mental health program with home visits once a month Human resources who play a role include program holders, doctors and involve cross-sector roles Provision of facilities and infrastructure in the form of ambulances and medicines, while the costs are covered by BOK funds
9.	[25]	To explore effective com- munication, how it relates and its impact on health	Qualita- tive research	- Face-to-face communication proves to be more effective in the patient's healing journey since during such interactions, the patient tends to be more focused, and the therapist finds it easier to perceive the nuances within the patient and comprehend the challenges they are facing.
10.	[26]	The aim of this research is to describe the efforts and obstacles of public health service counselors in car- ing for people with schiz- ophrenia in the commu- nity for people with seri- ous mental disorders	Qualita- tive research	 Health counselors' knowledge about treating mental disorders is not yet optimal There is a need for training for health counselors Administering medication according to prescription There is a need for community support in recovering from mental disorders
11.	[27]	How to care for schizo- phrenic patient at the Be- thesda Rehabilitation Home by home staff	Qualita- tive research	 The holistic service model was carried out and developed by the Bethesda Rehabilitation Home to support the recovery of patient The therapies carried out by the Bethesda Rehabilitation Home are: spiritual therapy, medical therapy, social therapy, counseling therapy, sports therapy and group therapy.
12.	[28]	To analyze the level of stigmatization of mental illness and recovery abili- ties among mental health nurses in the Italian De- partment of Mental Health	Quantita- tive Research (Cross sec- tional)	 Mental health nurses have a low stigma towards people with mental disorders Mental health nurses with higher education have less stigma and have a better understanding of patient' recovery

6 Discussion

The literature surrounding mental health recovery characterizes it as a multifaceted and individualized process that poses challenges in conceptualization. Overall, numerous large countries face difficulties in effectively implementing recovery-oriented policies as a central objective of mental health services. [29], but in practice it is not easy [30]. Therefore, support from health workers is needed to support recovery programs for people with mental disorders.

From the available literature, various themes emerged concerning the recovery from mental disorders, particularly in relation to healthcare professionals:

6.1 Knowledge of health workers

There are still several healthcare workers who possess limited knowledge about mental disorder recovery, despite many having a good understanding. To implement a recovery-focused care model, mental health professionals must possess the requisite knowledge, skills, and attitudes [12]. Mental health workers, including psychiatrists, psychologists, and nurses, often exhibit pessimism toward patient recovery from mental illness [31]. Various studies have identified deficiencies in knowledge and attitudes toward recovery among nurse [32].

The primary role of healthcare providers is to assist individuals in their recovery journey [14]. Education and training serve as effective means to enhance the knowledge and attitudes of healthcare workers. Nurses, comprising the largest segment of healthcare professionals, play a crucial role in adopting recovery-oriented mental health practices. Mental health professionals require support and education to develop the necessary skills for promoting a rehabilitative approach to care, with the ultimate aim of enhancing consumer outcomes [13].

6.2 Stigma of health workers

Stigma and discrimination carried out by mental health workers towards people with mental illness are obstacles in the recovery and development of patient care. Among health workers, several authors say that psychiatric nurses generally show a more positive attitude towards people with mental disorders than the general public [33] However, there is also research which states that there are still some nurses who have negative attitudes towards people with mental disorders[34]. In this case, the struggle against stigma (both external and self-stigma) is the basis of recovery-oriented mental health services [35]. Training for health workers regarding the stigma of mental disorders is very necessary to support the recovery process of patient.

6.3 Type of health service

Research conducted [22] trying to use the task sharing model in the context of recovery for people with mental disorders. The division of duties consists of various parties, including public health officers, lay health workers, midwives, nurses, health cadres and community leaders who contribute to mental health.

Holistic services are health services that strive for balance and enable patients to live a balanced life by paying attention to aspects of human life that influence each other, such as mental health. The holistic form of service provided [27] for people with mental disorders, namely a combination of various therapies such as spiritual therapy, psychopharmaceutical therapy, social therapy, counseling therapy, sports therapy and group therapy.

Therapeutic communication is a special form of communication used in the world of health to support and effectively overcome difficult problems related to health, including efforts to recover from mental disorders [36]. Optimal therapeutic communication from a health worker can influence the recovery of people with mental disorders.

Research conducted [37] using stories through digital media for stigma and recovery for people with mental disorders. Digital storytelling helps service users do the internal work of making meaning from the recovery experience of people with mental illness in order to remove stigma and increase people's ability to recover. Innovation and technological solutions continue to be considered in efforts to overcome problems in mental health. We are currently in the midst of a digital revolution. Mobile technology can be used as access to information and digital has changed the way we interact with services more effectively [38].

7 Conclusion

Recovery from mental disorders represents a healthcare service aimed at restoring patients to their optimal state. The principles of the Recovery model guide treatment by acknowledging that patients have multifaceted dimensions, allowing them to chart their own paths to recovery. Healthcare professionals can thus develop nursing interventions and activities that enhance the quality of life for individuals diagnosed with mental illness, thereby adapting conventional healthcare models.

The recovery of mental disorder patients, with a focus on healthcare workers, begins with these workers' understanding of mental disorder recovery. However, this understanding is often suboptimal, necessitating education and training for improvement. Additionally, some healthcare workers still harbor stigmas toward mental disorders, indicating the need for interventions to eradicate such biases. Furthermore, the services provided to patients involve collaborative task distribution among various elements, integrated and holistic patient care, appropriate therapeutic communication techniques, and the utilization of digital mediums to aid in mental disorder recovery.

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Reference

- 1. C. Le Boutillier *et al.*, "Staff understanding of recovery-orientated mental health practice: a systematic review and narrative synthesis," *Implement. Sci.*, vol. 10, no. 1, p. 87, Dec. **2015**, doi: 10.1186/s13012-015-0275-4.
- M. McKeown, F. Jones, P. Foy, K. Wright, T. Paxton, and M. Blackmon, "Looking back, looking forward: Recovery journeys in a high secure hospital," *Int J Ment Heal. Nurs*, vol. 25, no. 3, pp. 234–242, **2016**, doi: https://doi.org/10.1111/inm.12204.
- W. Rössler, "Psychiatric rehabilitation today: an overview.," *World Psychiatry*, vol. 5, no.
 pp. 151–7, Oct. 2006, [Online]. Available: http://www.ncbi.nlm.nih.gov/pubmed/17139342
- B. G. Frost *et al.*, "An Integrated Recovery-oriented Model (IRM) for mental health services: evolution and challenges.," *BMC Psychiatry*, vol. 17, no. 1, p. 22, Jan. 2017, doi: 10.1186/s12888-016-1164-3.
- R. Lestari, A. Yusuf, R. Hargono, and ..., "Review Sistematik: Model Pemulihan Penderita Gangguan Jiwa Berat Berbasis Komunitas," *Arter. J. Ilmu ...*, 2020, [Online]. Available: https://arteri.sinergis.org/index.php/arteri/article/view/44
- E. Badu, A. P. O'Brien, and R. Mitchell, "The Conceptualization of Mental Health Service Quality Assessment: Consumer Perspective," *Adm. Policy Ment. Heal. Ment. Heal. Serv. Res.*, vol. 46, no. 6, pp. 790–806, Nov. 2019, doi: 10.1007/s10488-019-00955-w.
- G. Thornicroft, "Stigma and discrimination limit access to mental health care," *Epidemiol. Psichiatr. Soc.*, vol. 17, no. 1, pp. 14–19, Mar. 2008, doi: 10.1017/S1121189X00002621.
- A. J. Gray, "Stigma in psychiatry," JRSM, vol. 95, no. 2, pp. 72–76, Feb. 2002, doi: 10.1258/jrsm.95.2.72.
- C. Nordt, W. Rossler, and C. Lauber, "Attitudes of Mental Health Professionals Toward People With Schizophrenia and Major Depression," *Schizophr. Bull.*, vol. 32, no. 4, pp. 709– 714, Oct. 2005, doi: 10.1093/schbul/sbj065.
- E. Lim, D. Wynaden, and K. Heslop, "Changing practice using recovery-focused care in acute mental health settings to reduce aggression: A qualitative study," *Int. J. Ment. Health Nurs.*, vol. 28, no. 1, pp. 237–246, Feb. 2019, doi: 10.1111/inm.12524.
- E. Lim, D. Wynaden, and K. Heslop, "Using Q-methodology to explore mental health nurses' knowledge and skills to use recovery-focused care to reduce aggression in acute mental health settings," *Int. J. Ment. Health Nurs.*, vol. 30, no. 2, pp. 413–426, Apr. 2021, doi: 10.1111/inm.12802.
- F. P. Walsh, P. Meskell, E. Burke, and M. Dowling, "Recovery-based Training in Mental Health: Effects on Staff Knowledge and Attitudes to Recovery," *Issues Ment. Health Nurs.*, vol. 38, no. 11, pp. 886–895, Nov. **2017**, doi: 10.1080/01612840.2017.1346014.
- P. del Vecchio, "Bringing Recovery to Practice: Improving Provider Competencies and Promoting Positive Outcomes," *Psychiatr. Serv.*, vol. 66, no. 7, pp. 750–752, Jul. 2015, doi: 10.1176/appi.ps.201400310.
- 14. G. Roberts and J. Boardman, "Becoming a recovery-oriented practitioner," *Adv. Psychiatr. Treat.*, vol. 20, no. 1, pp. 37–47, Jan. 2014, doi: 10.1192/apt.bp.112.010652.
- 15. Nursalam, Manajemen Keperawatan. Jakarta: Salemba Medika, 2015.

- 16. J. Creswell, *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*. Los Angeles: Sage publications, **2013**.
- F. Del Olmo-Romero *et al.*, "Mental health professionals' attitudes towards mental illness: professional and cultural factors in the INTER NOS study," *Eur. Arch. Psychiatry Clin. Neurosci.*, vol. 269, no. 3, pp. 325–339, Apr. 2019, doi: 10.1007/s00406-018-0867-5.
- S. P. Sashidharan, R. Mezzina, and D. Puras, "Reducing coercion in mental healthcare," *Epidemiol. Psychiatr. Sci.*, vol. 28, no. 6, pp. 605–612, Dec. 2019, doi: 10.1017/S2045796019000350.
- M. Coffey *et al.*, "Recovery-focused mental health care planning and co-ordination in acute inpatient mental health settings: a cross national comparative mixed methods study," *BMC Psychiatry*, vol. 19, no. 1, p. 115, Dec. **2019**, doi: 10.1186/s12888-019-2094-7.
- S. Bucci, M. Schwannauer, and N. Berry, "The digital revolution and its impact on mental health care," *Psychol. Psychother. Theory, Res. Pract.*, vol. 92, no. 2, pp. 277–297, Jun. 2019, doi: 10.1111/papt.12222.
- S. Bucci *et al.*, "They Are Not Hard-to-Reach Clients. We Have Just Got Hard-to-Reach Services.' Staff Views of Digital Health Tools in Specialist Mental Health Services.," *Front. Psychiatry*, vol. 10, May 2019, doi: 10.3389/fpsyt.2019.00344.
- 22. G. Raviola, J. A. Naslund, S. L. Smith, and V. Patel, "Innovative Models in Mental Health Delivery Systems: Task Sharing Care with Non-specialist Providers to Close the Mental Health Treatment Gap," *Curr. Psychiatry Rep.*, vol. 21, no. 6, p. 44, Jun. 2019, doi: 10.1007/s11920-019-1028-x.
- N. Titov, H. D. Hadjistavropoulos, O. Nielssen, D. C. Mohr, G. Andersson, and B. F. Dear, "From Research to Practice: Ten Lessons in Delivering Digital Mental Health Services," *J. Clin. Med.*, vol. 8, no. 8, p. 1239, Aug. 2019, doi: 10.3390/jcm8081239.
- 24. S. D. Arifin, D. Kurniawan, and E. Marwati, "Implementasi Program Kesehatan Jiwa Di Upt Puskesmas Soasio Kota Tidore Kepulauan," *J. Serambi Sehat*, vol. 13, no. 1, **2020**.
- C. W. Suseno, P. A. Andung, and F. T. Hana, "Komunikasi Terapeutik Petugas Kesehatan dengan Pasien RSJ Naimata Kupang," *J. Communio J. Jur. Ilmu Komun.*, vol. 9, no. 1, pp. 1533–1547, Jul. 2020, doi: 10.35508/jikom.v9i1.2312.
- R. E. Darmawan and S. Sudiro, "Upaya dan Kendala Konselor Puskesmas Dalam Perawatan Pasien Skizofrenia," *Interes. J. Ilmu Kesehat.*, vol. 9, no. 1, pp. 81–86, May 2020, doi: 10.37341/interest.v9i1.194.
- R. Barus and Adiet, "Pelayanan Holistik Pada Pasien Skizofrenia Di Panti Rehabilitasi Betesda Borobudur," *Shema*, vol. 1, no. 2, 2021, [Online]. Available: https://jurnal.sttiipurwokerto.ac.id/index.php/shema/article/view/12
- G. Napoli, S. Autuori, and K. S. Ephraim, "Attitudes of Italian mental health nurses towards mental illness and recovery: a cross-sectional study," *AIMS Public Heal.*, vol. 10, no. 2, pp. 333–347, 2023, doi: 10.3934/publichealth.2023025.
- K. Jørgensen, J. Praestegaard, and M. Holen, "The conditions of possibilities for recovery: A critical discourse analysis in a Danish psychiatric context," *J. Clin. Nurs.*, vol. 29, no. 15– 16, pp. 3012–3024, Aug. 2020, doi: 10.1111/jocn.15311.
- A. K. Waldemar, B. A. Esbensen, L. Korsbek, L. Petersen, and S. Arnfred, "Recoveryoriented practice: Participant observations of the interactions between patients and health professionals in mental health inpatient settings," *Int. J. Ment. Health Nurs.*, vol. 28, no. 1, pp. 318–329, Feb. 2019, doi: 10.1111/inm.12537.
- M. Luigi *et al.*, "Determinants of mental health professionals' attitudes towards recovery: A review," *Can. Med. Educ. J.*, May 2020, doi: 10.36834/cmej.61273.

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- B. McKenna, J. Oakes, N. Fourniotis, N. Toomey, and T. Furness, "Recovery-Oriented Mental Health Practice in a Community Care Unit: An Exploratory Study," *J. Forensic Nurs.*, vol. 12, no. 4, pp. 167–175, Oct. 2016, doi: 10.1097/JFN.00000000000127.
- J.-A. Giandinoto, J. Stephenson, and K.-L. Edward, "General hospital health professionals' attitudes and perceived dangerousness towards patients with comorbid mental and physical health conditions: Systematic review and meta-analysis.," *Int. J. Ment. Health Nurs.*, vol. 27, no. 3, pp. 942–955, Jun. 2018, doi: 10.1111/inm.12433.
- C. A. Ross and E. M. Goldner, "Stigma, negative attitudes and discrimination towards mental illness within the nursing profession: a review of the literature," *J. Psychiatr. Ment. Health Nurs.*, vol. 16, no. 6, pp. 558–567, Aug. 2009, doi: 10.1111/j.1365-2850.2009.01399.x.
- E. Avdibegović and M. Hasanović, "The Stigma of Mental Illness and Recovery.," *Psychiatr. Danub.*, vol. 29, no. Suppl 5, pp. 900–905, Dec. 2017, [Online]. Available: http://www.ncbi.nlm.nih.gov/pubmed/29283987
- [36] C. W. Suseno, P. A. Andung, and F. T. Hana, "Komunikasi Terapeutik Petugas Kesehatan dengan Pasien RSJ Naimata Kupang," *J. Communio*, vol. 9, no. 1, pp. 1533– 1547, 2020, doi: https://doi.org/10.35508/jikom.v9i1.2312.
- [37] S. J. Linz *et al.*, "Using digital storytelling to understand service users' mental health recovery and address stigma among nursing students," *Arch. Psychiatr. Nurs.*, vol. 40, pp. 77–83, Oct. 2022, doi: 10.1016/j.apnu.2022.04.006.
- [38] S. Bucci, M. Schwannauer, and N. Berry, "The digital revolution and its impact on mental health care," *Psychol. Psychother. Theory, Res. Pract.*, vol. 92, no. 2, pp. 277–297, Jun. 2019, doi: 10.1111/papt.12222.

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