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Experience of Meaning in Everyday Occupations Among Unemployed People with Severe Mental Illness

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Abstract

The aim of this qualitative study was to examine the different facets of meaning that people who are severely mentally ill and unemployed may find in their everyday occupations. Twelve unemployed people with severe mental illness, six who attended day centres and six who did not, were interviewed regarding their experience of meaning in everyday occupations. The data was analysed with content analysis. The results showed that meaning was experienced when feeling competent and having a balance between different meaningful occupations that helped the informants control their mental illness. Themes of meaning were: being socially engaged, feeling competent and accepted by society, creating routines and being productive, being creative and seeking knowledge, and taking care of body and mind. Substitutes for paid work were found in occupations such as taking care of the household or being productive at a day centre. The results suggest that people with severe mental illness should be encouraged to play an active role in their rehabilitation process, and get support from the occupational therapist in addressing aspects such as forming a social network and daily routines, and finding a balance between work-like occupations and rest.

Key words: Occupational therapy, Mental health, Meaning, Community settings, Activities of daily living

Introduction

Although regulations in many countries state that local authorities are responsible for providing meaningful everyday occupations to people with severe mental illness who are unable to work, many of these people lack everyday occupations that they perceive as being meaningful (1). Research has shown that people with a mental illness usually perceive greater well-being when engaged in paid work (2-4). However, for various reasons this group often lacks the opportunity to be engaged in paid work (5), and thus needs to derive meaning from other types of everyday occupations. Therefore unemployed severe mentally ill people's everyday occupations need to be explored regarding their potential in terms of providing meaning.

The importance of meaning has been stressed throughout the history of occupational therapy (6-7). However, the concept of meaning is complex and can be understood from many different theoretical and cultural angles and the literature also provides various ways of explaining the concept. For example, authors have argued that occupations can create meaning when they fulfil a goal that is personally or culturally important (6,8), or when the person is motivated or has the will to perform the occupation (7). Hasselkus (9) proposed that meaning is more closely linked to how an occupation is perceived than to its aim and result. Hammell (10) supported this view and described meaning in terms of *doing*: engaging in purposeful activities; *being*: taking time to reflect; *belonging*: having social interaction; and *becoming*: picturing a future self. Persson, Erlandsson, Eklund and Iwarsson (11) state that meaning is linked with the value an individual derives from a certain occupation and presents three different types of so called occupational value; *concrete value* which may be a product or a newly acquired skill that brings satisfaction,

symbolic value which denotes a symbolic dimension that can be understood at a personal, cultural and universal level, and *self-reward value* which means immediate rewards to the person. Further, Csíkszentmihályi (12) stressed another aspect of meaning; the experience of flow, which is when the demands of an occupation are in perfect balance with the skills of the individual. In addition, Ikiugu (13) proposed that meaning can be seen from an existential point of view, where the will to create meaning in life determines the person's choice of occupations over time. Hence, the literature discusses and describes the concept of meaning in various ways, but the present study is based on the presumption that meaning is a subjective experience and can only be perceived by the person performing the occupation in that specific context (11).

Although knowledge regarding occupations that may bring meaning to the target group is important, studies on the subject are limited. Indeed, however, a few qualitative studies have been conducted on people without paid work and there are also some studies on persons who have mixed work conditions, that is; paid work or supported work. Hvalsoe and Josephsson (14) interviewed eight unemployed long-term mentally ill persons living in the community about the characteristics of the occupations they experienced as meaningful. The results showed three main constituents; a) engagement supporting restoration and engagement of the life-world towards normality b) engagement bringing intrinsic satisfaction and acknowledgement from others and c) engagement facilitating experience of positive feelings and a sense of well-being. The authors concluded that feelings of autonomy, social belonging, productivity, being competent, having control and taking time off were of importance in order to create meaning in occupation and that clinical occupational therapists should consider clients' need for productivity and

engagement in non stigmatized and social occupations and the need for personal satisfaction. A further study on the subject was conducted by Gahnström-Strandqvist, Liukko & Tham (15) who explored the meaning of working cooperatives for persons with long-term mental illness. These researchers interviewed eighteen mentally ill persons two to three times regarding their experience of meaning of working cooperatives. The results showed that the working cooperatives helped to normalize the participants' life-world, which derived meaning. This normalizing process within the working cooperative went over three phases; 1) from an unsatisfying context to an occupational context, 2) meeting human occupational and social needs including doing work task and being productive, being with others and being committed and belonging and experiencing a positive change of view of self 3) to stay or to leave. The results showed that the participants strove to make the working cooperative resemble an actual work-place and most of them had paid work as a future goal. At the cooperative the participants were given the opportunity to work at their own pace and with work-tasks that fitted the person's ability, which supported the development of competence and confidence. To belong in a working team or just being with others at the cooperative gave meaning in terms of social belonging. A quantitative study (16) explored meaning and quality of life, where "meaning" in occupations such as sleep, leisure, work, daily tasks and rest was ranked according to degree of perceived competence, importance and pleasure. The results showed that work was ranked the highest on importance and sleep was ranked the highest on competence and pleasure. Further, some researchers have approached meaning by addressing related constructs, such as valued occupations and occupational choices. Two related studies (17-18) investigated the value perceived by people attending mental

health day service settings. The findings showed that value was seen in terms of; generating motivation (having a sense of purpose, organizing time and being influenced by the environment), building competence (acquiring skills, coping with challenge and experiencing achievement) and developing self-identity (being driven to create, being useful and generated a sense of self). Occupational choice, seen as reflecting meaning, was in a qualitative study investigated among eight persons who were unemployed or had supported employment (19). The study showed that these people with severe mental illness struggled to engage in meaningful occupations in order to stay mentally well, and that social connection, health and occupations were inter-related. Rebeiro and colleagues (20) conducted a qualitative study which explored the meaning of occupational engagement in an outpatient group of eight women with mental illness. The social environment was found to be important and the participants experienced a process of affirmation, confirmation, actualization, and anticipation which collectively contributed to occupational engagement. Further, a recent qualitative study (21) explored the experience of meaning among 102 persons with severe mental illness who either had paid work, attended community based activity centres or had no regular structured activity. The data was gathered using an activity diary and an interview regarding aspects of meaning in daily occupations. The study informed that meaning was experienced when the participants felt connected with others and the world around them, experienced enjoyment and fun in life, were productive and had a sense of achievement, were occupied and had routines and projects in the stream of life and when the informants took care of themselves to maintain health. Other studies conducted on persons with mixed work conditions show that certain characteristics of work, such as having a salary and

paid vacation, gave meaning, and that work also gave a feeling of acceptance, belonging, competence and structure and that it strengthened the person's identity and contributed to better self-esteem (3, 22-23).

Meaningful daily occupation has been reported to be related to better quality of life for people with mental illness (24) and local authorities are responsible for providing meaningful everyday occupations to people with severe mental illness who are unable to work (1). However, despite the obvious importance of meaningful occupations for the target group, reports show that these tend not to experience meaning in their everyday life (1). Besides, they often lack engagement in paid work, otherwise in various ways shown to increase the perception of meaning (5). Research focusing on specifically on the meaning that unemployed people with a severe mental illness find in their everyday occupations is very scarce, and such knowledge is needed as a basis for developing adequate support and rehabilitation. Therefore, the aim of this study was to examine the different facets of meaning that people who are severely mentally ill and unemployed may find in their everyday occupations.

Methods

A qualitative approach was employed. Data was collected by interviews with questions generated from the existing literature, cited above, and the identified knowledge gap concerning how people with severe mental illness find meaning in non-work occupations. Qualitative thematic content analysis was employed (25).

Informants

The criteria for participation were having a severe mental illness, being aged between 18 and 65 years, and not being engaged in paid work. Paid work is here defined as an occupation required for subsistence and earning a living, i.e. paid employment (26). In this study a person is regarded as having a severe mental illness if he or she has a duration of psychiatric treatment of at least two years and have a dysfunction, based on the 'two dimensional definition' by Ruggeri, Leese, Thornicroft, Bisoffi and Tansella (27). The informants were selected from a psychiatric outpatient unit and two day centres, one providing a meeting place and the other offering work-like occupations. The outpatient unit offered activity groups, such as creative arts group or cooking groups. The meeting place oriented day centre mainly gave opportunities for social interaction, but also for engagement in occupations such as sewing and woodwork. The work-oriented day centre resembled a workplace, with people engaged in textile work, copying, a bike repairs and running a small café. In selecting the participants for the study, a varied level of engagement in different kinds of everyday occupations was desired among the informants in order to get a varied and rich picture of the meaning they find when engaged in their everyday occupations. The study was approved by the local Ethical Review Board and the principles of informed consent and voluntariness were applied. Initial contact was made with a staff member from each unit. He or she each selected three to four eligible people, who varied in age and gender, were seen as information rich cases and fulfilled the criteria. The contact person then gave written and oral information about the study and asked the eligible people if they would like to participate in the study. Upon agreement, they were asked to give their written consent. Prospective informants

were assured confidentiality and informed that they had the right to discontinue participation at any time. Twelve individuals were asked to participate, and all consented. Three were visitors of the meeting place oriented day centre, four went to the work-oriented day centre, and four were without community-based occupations but were connected to the outpatient unit. Of the informants who were not attending day centres, three attended one or more groups at the outpatient unit and one was engaged in voluntary work. The informants' ages varied from 25 to 62 years, with a mean age of 47.5 years. Four of the informants were living with a partner and/or children, and 6 of the 12 informants were women. According to their self-report, ten of the participants had schizophrenia or other psychosis and two had mood disorders.

The interview

A qualitative approach was employed and the interviews proceeded from semi-structured interview questions, focusing on the meaning the informants perceived when engaged in everyday occupations. The questions relied on themes considered relevant in order to understand the experience of meaning, such as the person's values, roles, skills, motivation and general life-story. As proposed by Kvale (28), the interviewer (EA) aimed to have a dialogue with the interviewee in order to create a relationship and come to a deeper understanding of the interviewee's life situation and the phenomena studied. The questions served to elicit the specific meanings daily occupations could have, starting with a broad question about the everyday occupations the person usually performed during a day and a week. The interviewer then proceeded to ask questions about the specific criteria in everyday occupations that gave meaning. In order to deepen the

conversation to better understand the interviewee's perspective, probing was used. A test interview was conducted with a healthy unemployed 65-year-old man, and the questions were subsequently revised between the authors to improve their specificity and to make them easier to understand.

Procedure

The informants were interviewed at the psychiatric outpatient unit or day centre they were attending. The interviewer started by introducing herself and by clarifying the aim of the study. The informant was advised that the interview would be tape-recorded. The interviews took approximately one hour each and were transcribed ad verbatim.

Data analysis

For this study the data was analysed using Burnard's thematic content analysis (24), partly inspired by Grounded Theory (29). Content analysis is used when the researcher is aiming to find patterns in a person's story and the method of analysis has a focus on describing, interpreting and understanding a person's story. Leedy and Ormrod (30) described content analysis as "a detailed and systematic examination of the contents of a particular body of materials for the purpose of identifying patterns, themes, or biases" (p.155). The first author (EA) had a pre-understanding of the target group after having worked for several years as an occupational therapist in mental health care, which could potentially influence the analysis. In order to avoid this risk the second author (CH), who had no experience of mental health care, served as a co-analysers (31). The thematic content analysis described by Burnard (24) is an analysis in several steps, and the

following were used in this study: Important statements were written down during the interviews and the transcripts were then read through by the first author several times in order to come immerse with the data. Thoughts and reflections that arose while reading the transcripts were noted. The transcripts were then read through again, concentrating on meaningful occupations in order to identity relevant statements in the text and exclude those that were not relevant to the study. The statements relevant to the study were 'openly coded', freely generating preliminary categories. The preliminary categories were then read through and grouped into larger entities to reduce the number of categories. Repetitious or similar headings were removed and a final list of categories was formed. Steps 1-5 were performed by the first author (EA). In the next step, random parts of the transcripts were read and analysed by the second author (CH) independently and without seeing the researcher's list, in order to increase the trustworthiness of the study. After this the analysis was subsequently refined in dialogue between all three authors. The complete transcripts were then read again, and compared with the categories that had emerged in order to ensure that no valuable information had been lost and that the categories cover all aspects of the data. With the list of categories each transcript was worked through and coded according to the categories headings. The statements relevant to the aim of the study were copied and pasted into a new document. Each statement was identified with an interview number, page number and row number so that it could be easily found in the original text. The pasted statements were grouped into the larger categories, at this stage called themes. Underlying sub-themes were also created. The results of the analysis were compiled, and quotes that exemplified the statements were used to illustrate the themes and sub-themes. During the compilation of the results, the

first author repeatedly consulted the original data. In the final phase the main theme was identified, based on the understanding of the result as a whole.

Results

The main theme was termed *Feeling competent and having a balance between different meaningful occupations helped having control over mental illness*. The informants expressed a desire to be seen as competent and to be accepted by society. A balance between different types of meaningful occupations was also stressed in order to avoid a relapse in their mental illness, since this, among other things, would mean loss of control and decreased independence and ability to be socially engaged. Under the main theme, four themes with related sub-themes were identified (Table I). Along with the description of the categories below, quotes from the informants are given, with a letter signifies each informant.

(Insert Table I here)

Being socially engaged and feeling competent and accepted by society

Being socially engaged meant having a social life and being part of, and accepted by, society so that life now resembled that of before the onset of mental illness. However, the opposite was common, and exclusion was experienced from both friends and family, at which time the informants felt stigmatised. The informants therefore struggled to experience fellowship and belonging and it mattered to them to feel needed, competent and appreciated by others.

Experiencing fellowship

The experience of fellowship was described as a feeling of mutual understanding between oneself and other persons who usually also had a mental illness, as described by one woman: *Here (at the day centre) we're all in the same boat in one way or another. Some might be a bit worse off than others, but we all have our illness and our problems and we're all on the same level (H)*. The informants felt that they could relax when socialising with people with the same kind of difficulties and one man explained that the people around him would *get how I function (K)*. One woman stated: *I feel that they are close friends. You can talk about everything. We're alike; we all spend our days at home, we all have our difficulties (F)*. This feeling of fellowship within day care groups or in a day centre was described as a substitute for the camaraderie among colleagues that comes with paid work. Fellowship was also experienced when being with family or close friends and when the informants felt connected to people who shared the same interest as them, such playing an instrument or acting.

Being important to, and needed by, others

Being able to help others and feeling important to, and needed by, others was seen as meaningful. Talking to friends about problems they had, or helping sick relatives or neighbours in practical ways, were seen as opportunities to help, and one man said: *It's a responsibility but it's also nice to be able to help. It's a nice feeling to be able to support someone. If one can help another person who has a problem, that's something, and it feels good (K)*. The feeling of being important to, and needed by, others was also

awakened when performing occupations such as taking care of a pet. The pet, whether it was a dog or a cat or another type of animal, would be dependent on the informant for food, walks, play activities and cuddling. The informants described the relationship with their pet as multifaceted, since they would both get company, immediate rewards in forms of appreciation, and a reason to go out for a walk. One woman said: *Well...I have felt better when having a cat at home, to take care of. I think it's important that you have such a task, which is valuable and meaningful (L).*

Feeling competent and getting praise from others

Attaining social approval and confirmation by others were deemed important in order to be accepted by society and gain a feeling of being competent. Ways of achieving this were to exhibit a good degree of knowledge in certain topics during a conversation with someone, or show good skills in different practical occupations. One informant said that it was *nice to get praise* when he demonstrated skills in different languages. A woman described her experience of being at the day centre and getting praise for her abilities:

There is a newspaper group here, they wanted to use my photos since they were so special. I felt so proud and everyone said "What lovely pictures"...so it's something that I can do (...) That felt great! Like I'm not totally brain dead (D). Being competent was also about having certain expertise and skills in different occupations that others would like to learn from. One informant commented on his ability to speak different languages: *I've studied German and French in school and it's fun when you get praise and people ask; "Where did you learn to speak languages so well?" (K).* Overall, being active, doing things that were accepted in society and not being a burden to society were

meaningful since this would give a feeling of societal acceptance and of not being seen as *a hay sack that can't be active (L)*, as one informant put it.

Creating routines and being productive

Having routines and a role that meant being productive created meaning, because it helped keep a balance between being active and resting, which in turn kept away boredom and distressing thoughts. The feeling of being productive was dependent on the opportunity the informants had to engage in work-like tasks at a day centre, at home or by taking care of children, other relatives or the person's dog or cat.

Creating daily and weekly routines

The informants who attended day centres usually had routines that largely resembled those of someone who had paid work, such as getting up at a certain time in the morning and having work-like occupations during the day, with breaks for lunch and coffee and so on. The informants without any connection to a day centre established their weekly routines by, for example, having a certain day of the week for doing home maintenance and having recurring daily occupations such as starting the day with a long walk. Having routines was described as *to get up and have something to tie up the day with*. To have routines was also seen as important in order to keep from a mental relapse. One woman said: *Well, I get sick (if I don't hold on to my routines), I know that. I can't sleep my days away (G)*. The informants' weekly routines usually included separating weekend routines from those of the weekdays. They described a sense of collective well-being when the weekend arrived, since people in general felt relieved because they had some time off.

During weekends the informants would sleep longer in the mornings, be more social and do relaxing things more frequently than during the week.

Having a productive and work-like role

The informants expressed sadness about their loss of the role and identity of someone engaged in paid work. However, many informants described previous stressful work situations as being the cause of their mental illness. Former work was replaced by other types of occupations that were regarded as productive and accepted by society, such as engaging in volunteer work, doing home maintenance work or taking care of relatives or pets. One informant said: *I experience that (taking care of the household) as something positive. (...) I see it as my task (F)*. The informants who attended day centres, and especially those who attended the work-oriented day centre, saw these as an actual workplace and referred to it as “work” when talking to other people. *It feels like a little company (D)* one woman stated regarding her view of, and engagement at, a day centre. Being at a day centre was reported as something positive and less stressful than the engagement in former competitive work. One woman said: *If I'd been working in a factory packing things, then maybe it would have been on piece rate, but it's not like that here. Someone has to do it. And I always say that "I'm working tomorrow." So, this is my work (H)*. The same woman also stated, about not having her former work: *I've got back what I lost here (at the day care centre)... I have something to do, I get away from home...so I don't miss anything (from work) (H)*.

Being creative and seeking knowledge

To be creative and to seek new experiences and knowledge created meaning. Picturing a future self as being good at something seemed to motivate creativity and knowledge seeking, as long as the occupations connected to this gave rewards in terms of a satisfactory result, newly acquired skills or mental well-being.

Learning and experiencing new things

To engage in occupations such as reading a new book, visiting the library, attending courses, having discussions with others about interesting topics and travelling were ways of learning and experiencing new things. The informants expressed a will to keep up to date with what happens in the world, and did so by reading the newspapers or listening to the news on the radio. Visiting a library provided good opportunities to keep up to date with world news, since the informants could choose between reading different newspapers and using the Internet. Most informants did not hesitate to learn challenging new things and to get new impressions when an opportunity was given. One informant said: *Well, there's always something new that has to be done at the day centre, and I think that's fun. If you're able to do it then you just want to keep on working. Then you don't want anybody else to take over!* (B) The informants talked about the future and had personal goals and dreams about, for example, becoming more educated or becoming a better golfer, photographer or cook. This seemed to motivate them to engage in occupations that made them come closer to fulfilling their personal goals.

Experiencing just the right challenge

The informants reported that if the performed occupation was in perfect balance with their skills, they experienced just the right challenge. The informants then experienced time flying by, and the occupation as a respite from worrying thoughts. One informant described playing golf: *It feels great. It's wonderful. It's a special feeling, you don't think of anything else, you just think of the strike (C)*. Another said: *It's like when I sit with my crossword or sewing, I forget, well it can be several hours before I think, "Oh my God I haven't smoked", because then I'm so into what I'm doing (B)*.

Being creative and achieving a nice result

Being creative and achieving a nice result, such as when doing occupations such as embroidery or baking, were seen as meaningful. One woman said: *I think it's valuable when I mend clothes, bake or so, when it's a bit artistic. You feel that you are creating something that's nice (L)*. Doing home maintenance, such as cleaning, doing laundry or reorganising the furniture at home also gave a feeling of having accomplished something nice.

Taking care of body and mind

The informants stated that it was meaningful to take care of themselves, by meeting basic needs, being physically active and by both keeping busy and taking rests. Knowledge of the importance of self-care, such as eating, sleeping and exercising regularly, was usually gained from their own experiences of how to avoid a relapse, but could also be obtained

through information from the psychiatric care. The informants stated that they took better care of themselves when they felt mentally well.

Taking care of one's body

Meaning occurred when the informants met basic needs such as eating and sleeping regularly, since this was important to be able to have control over mental illness. Doing occupations such as practicing physical sports was important as this gave a feeling of mental well-being and helped the informants to stay fit. Some informants also expressed problems with having been overweight. One informant said: *I think about staying slim and exercising. It's important to me, to feel good (K)*. Also to take care of the body by performing occupations such as taking long baths, shaving, or putting on make-up was perceived as meaningful and something “extra” for both mind and body. One man stated: *You're much more prosperous when you have showered, brushed your teeth and that (J)*.

Being diverted

The informants stated that anxiety and worrying thoughts could be controlled and pushed aside when being diverted by performing an occupation, and this was seen as meaningful. One woman said: *I like doing things with my hands. It's like you just think of what you're doing. You don't think of problems or so, but you divert your thoughts and concentrate on what you're doing (H)*. Another described taking long walks after arguing with a friend: *If I'm annoyed with someone it's good to do something that will divert you from the whole thing (K)*. Spending time with close friends or playing with a pet could also lead to diversion.

Enjoying rest and relaxation

The informants reported that they found meaning and recovered mentally through rest and relaxation, as one woman put it: *I charge my batteries (G)*. Rest was reported as necessary in order to be able to cope with the demands of daily life, like being productive or handling stressful situations. Being able to get enough rest was also something that the informants reported they had missed when they were engaged in competitive work, which at times had caused relapse. Rest and relaxation was not only defined as lying down, but also as performing relaxing occupations, such as listening to calm music, writing a diary or socialising with people they felt comfortable with. In addition, nature was reported to have a “healing force”. One woman said: *It is some kind of well-being and you just see the positive side of things, you just lie down on the lawn and look up into the trees, feel the warmth of the sun (H)*.

Discussion

Discussion of the results

According to the results of this study, meaning could be found in all kinds of everyday occupations. The most important aspect of meaning seemed to be having a balance between different types of occupations in order to control mental illness. The informants’ urge to control their mental illnesses may be related to the concept of self-mastery, defined as a feeling of actual power to bring about desired outcomes (32). Self-mastery has also shown to be an important factor for perceived health in the target group (33), as well as for well-being and quality of life (34). That having control gives meaning has

been reported by Hvalsoe and Josephsson (14) and meaning can also be connected to striving towards normality and staying mentally well, as reported in other studies (15, 21).

The experience of meaning was also largely influenced by the social context of the person, and feelings of competence and acceptance were important. The significance of social interaction for the experience of meaning has been widely reported (7,11), also for people with mental illness (35-36) and their experience of meaning (14-15, 19-21). The informants' view of meaning in social engagement was in agreement with Hammell's (10) description of belonging and with symbolic occupational value (11). The informants felt confident when being with people who were acceptant and with close friends or relatives. To socialise with people who also had a mental illness was unique and special, since it gave a particular feeling of connection and belonging. This shows the importance of creating meeting places, such as day centres, for the target group. Consumer led organisations can also provide meeting places and support and give opportunities for persons with a severe mental illness to take a role as a competent member of society. Of course, interacting with mentally well people was also seen as meaningful and often also desirable. However, it did not give meaning if the informants felt left out, which at times had been the case at former work settings. Avoiding stigma and enhancing social integration are some of the most important and complex aspects in the rehabilitation of this group, as shown in previous research (37-38).

To feel needed by, and important to, someone created meaning to the informants of this study. This could mean taking care of a relative or a friend, as well as a pet. The finding that being needed and getting acknowledgement from others give meaning has been

reported in several studies (14,20). That fact that pets may have a great impact on the experience of meaning and of being needed was also reported in a recent study by Erdner, and colleagues (39).

Creating routines and being productive gave the informants a feeling of autonomy and of being competent. This can be applied to work or work-related occupations and are examples of concrete occupational value, as defined by Persson et al (11). The experience of feeling competent and capable through work-like occupations has previously been stressed as important for well-being and for developing an identity (3), as well as for the experience of meaning (14-18,,20), Rebeiro and colleagues (40) have also shown that voluntarism, as a substitute to paid work, can create meaning since it is a valued and socially acceptable occupation which allows for the individual to be a productive member of society. The meaning of work may vary with the individuals' perception of their illness and self-concept. This study showed that engaging in competitive work could be seen as stressful, which indicates that paid work without support is not the only main road in achieving meaning. However, creating opportunities for supported work or engagement in work-related occupations at a day centre or in other venues are important, as they can provide structure in daily life and give a feeling of belonging, as well as a feeling of being accepted by society (3).

Being creative and seeking knowledge gave meaning, as shown in previous research (17-18). This facilitated a view of a positive future self, which is in line with Hammell's (10) term "becoming". The ability to view a positive future self also gave rise to a hope of recovery among the participants, described as a process of becoming empowered, hopeful and self-determined (41) and of developing of new meaning and purpose in life (42).

Thus, meaningful occupations are also an important key to recovery. Experiencing just the right challenge was also seen as meaningful. This could give the informants rest from worrying thoughts, which may be seen as a healing power (12). To do occupations at one's own pace has earlier been reported to promote meaning (15). Getting a nice result from an occupation and improving skills also gave meaning, which has been shown in previous studies (21) and also confirms the importance of perceiving a concrete occupational value (11).

Taking care of body and mind was much about staying mentally well. Getting too little rest was, in the participants' minds, associated with engagement in competitive work and had at times caused relapses. By resting, the participants regained energy after having performed productive occupations. This implies that in order to get rest, one has to have a productive occupation to rest from, in turn indicating that having routines that create a balance between restful and work-like activities is important. To take care of oneself in order to stay mentally well is an important aspect of the experience of meaning, as reported in several studies (16,19,21). This strategy of resting in different ways in order to stay mentally well resembled Hammell's (10) description of being and also seemed to be linked with a self-reward occupational value (11). Exercising in order to stay fit was also regarded as being meaningful. This confirms a recent study, showing that exercise could contribute to recovery by being a meaningful activity (43).

Discussion of the methodology

The informants were purposefully selected with the aim of getting a varied and rich picture of the meaning the informants' found when engaged in different types of daily

occupations and the final participants did vary regarding age, sex and whether or not they were connected to a day centre. In line with reasoning by Graneheim and Lundman (31) variation in these respects should have increased the credibility of the study. In order to improve the trustworthiness of the study, the interviewer (EA) used probing during the interview to validate the topics described by the interviewees. According to Burnard (44), the researchers' pre-understanding can, at times, influence the analysis of the data. As described in the methods part, measures were taken to counteract this. Discussions took place between the first author and a co-analysers regarding alternative categorisations, a method that can strengthen a study's credibility (31). These discussions continued until all three authors agreed that the solution that best fitted the data had been found. By selecting meaning units that were not too broad or narrow and by showing representative quotations from the transcribed text both the credibility and the transferability of the study was enhanced (31). Among the draw-backs of this study was that although there was a variation in age it was less than intended, and most of the participants were middle-aged. More young informants might have altered the picture of what characterised meaningful occupations in the target group. No member check was performed, this would have strengthened the credibility of the study since it would have given the participants an opportunity to comment on the authors' interpretations. The result of this study adds to the body of existing knowledge, but in order to further the understanding in the community and in society at large still more studies are needed to elucidate the experience of meaning in relation to daily occupations among people with severe mental illness.

Conclusion and clinical implications

The findings confirmed other studies on the subject and indicated that meaning was found when the informants engaged in occupations that gave a feeling of competence and of having a balance between meaningful occupations that helped them to control their mental illness. The fact that the informants could find meaning in various social and physical contexts indicates that rehabilitation for the target group may take many forms and should be individually adapted. Occupational therapists should support people with a severe mental illness in such a way that they can regain hope and have a possibility of picturing a positive future self, in line with the recovery vision (45). Also it is of importance to motivate and encourage the client to be active in his/her own rehabilitation process since this would enhance the person's feeling of being competent. It is also of importance that the occupational therapist, together with the client's unique experience, can form and provide tools for how to use meaningful occupations to control mental illness. Clients should get support from the occupational therapist in trying to establish a functional social network, creating daily and weekly routines, finding a balance between work-like and restful occupations and finding creative and challenging occupations that are motivating and on an appropriate skills level. The findings also indicated that paid work was not desired by everyone. However, since research in general indicates that work-like occupations are favoured and seen as meaningful by the target group, the potentials of rehabilitation strategies such as supported employment and work-oriented day centres in generating meaning should be investigated in future research.

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Table I. Compiled results in themes and sub-theme

Main theme	Themes	Sub-themes
Feeling competent and having a balance between different meaningful occupation helped having control over mental illness	Being socially engaged, feeling competent and accepted by society	Experiencing fellowship
		Being important to and needed by others
		Feeling competent and getting praise from others
	Creating routines and being productive	Creating daily and weekly routines
		Having a productive and work-like role
	Being creative and seeking knowledge	Learning and experiencing new things
		Experiencing just the right challenge
		Being creative and achieving a nice results
	Taking care of body and mind	Taking care of one's body
		Being diverted
		Enjoying rest and relaxation

