Benefits of a group singing activity on mentally ill individuals

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Plan

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- Study aims
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Introduction:
Recovery paradigm and mental health

- Gained in importance through the past decades
- Figured in mental health plans among the G8 countries, including Canada (Adams, 2006)
- Services promoting hope and self-growth
- Services users must sense that the services are shaped around their personal needs rather than having to fit into the existing system
- Compatible with the occupational therapy profession (Gruhl, 2005)

Introduction:
Community mental health

- Recovery paradigm is more relevant and more easily implemented in community-based services rather than in hospital services (Piat, Sabetti & Bloom, 2010)

- Persons living with mental illnesses should not be dependant to mental health services throughout their lives (Anthony, 2000)

- Occupational needs are not a priority in most community-based services (Krupa et al, 2009)

«Créer des liens par le chant»

- Individual and group singing lessons
- Lasts 8 months
- 15-20 participants every year
- Ends with a live music performance and a music CD recording

«Créer des liens par le chant»

- Voice teacher and coordinator
- Takes place in a music school, outside of traditional mental health services
- Promoted by the Schizophrenia society of Quebec *(société québécoise de la schizophrénie)*

Study aims

- Conduct a first exploration of the outcomes of an artistic community-based activity named *«créer des liens par le chant»* on its participants

- Identify the essential components that could explain the benefits

Method

- Exploratory evaluative design using qualitative descriptive methods
- Describing the outcomes of an intervention and understanding the process behind it (Contandriopoulos et al, 2000)
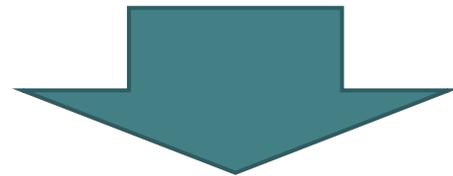
- Semi-structured group interview with the participants, the voice teacher and the coordinator + sociodemographic questionnaires

Method: Participants

18 participants recruited
Convenience sampling

4 participants left the activity before the end

1 participant was missing the day of the interview

Method: Participants

- 13 participants
- Females: 85%
- Age: 51,5 (10,0*)
- Years of schooling: 13,8 (3,4*)

*: Standard deviation

Self-reported psychiatric diagnosis

Anxiety disorders 54%

Mood disorders 46%

Schizophrenia/ psychotic disorders 23%

Personality disorders 7%
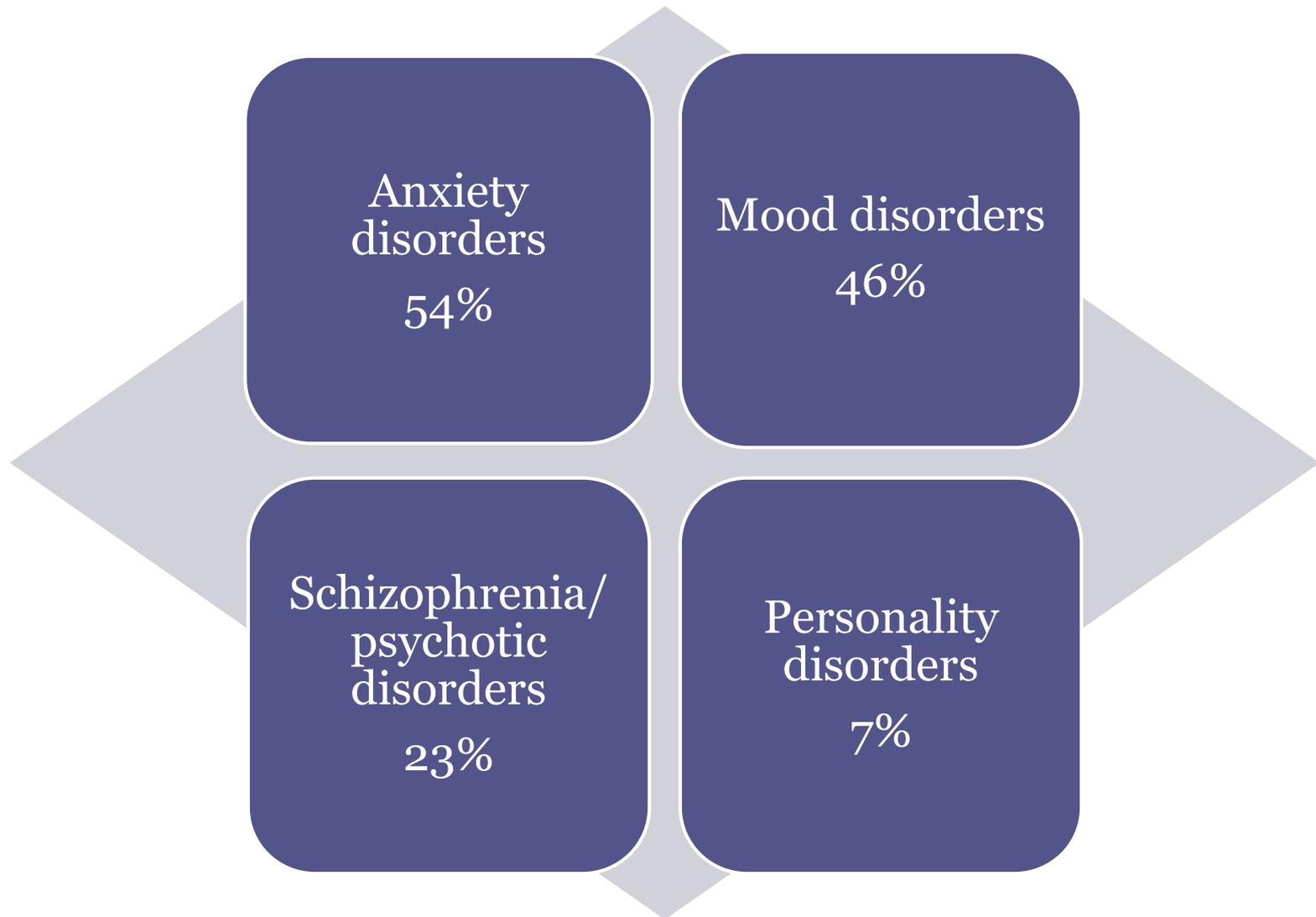
Method: data analysis

- Transcribed from an audiotape recording
- Analysed with the help of the QDA-Miner software
- Open, axial and selective coding
- Coded by the first author and validated by the first co-author using a check-coding process (Miles & Huberman, 1994)

Main constituent	Major theme	Subthemes
Benefits	Rediscovering one's identity and regaining self-confidence	▪ Rediscovering and redefining self in a positive way, gaining self-confidence ▪ Regaining hope, optimism about life, future ▪ Overcoming fears, outdoing self ▪ Learning to let go, being less self-critical ▪ Self-assertion, coming out of one's shell ▪ Experiencing success and accomplishing things that generates pride
	Resuming and engaging in meaningful projects and social roles	▪ Reclaiming life, taking care of self ▪ Finding a source of motivation, rediscovering personal interests and projects ▪ Resuming meaningful activities and social roles ▪ Organizing daily life
	Learning to collaborate with others and improving social skills	▪ Self-expression, opening up to others ▪ Cooperating and collaborating in a group despite differences.
	Improving physical and cognitive skills	▪ Training, stimulating cognitive skills ▪ Improving physical condition and posture

Rediscovering one's identity and regaining self-confidence

- *I have developed more confidence in myself... and also, it has released me on many aspects... such as accepting myself as a person.*
- *J'ai développé plus de confiance en moi... mais aussi ça m'a libéré sur pleins d'aspects... comme de m'accepter moi comme personne...*

Resuming and engaging in meaningful projects and social roles

- *I also made it to the show and through all of this, some things were triggered. Like drawing, I had a hard time drawing. Now, I don't know... things fell into place, I draw a lot more and I have projects that I want to do around drawing.*
- *Je suis aussi allé jusqu'au spectacle, puis à travers ça il y a des choses qui se sont déclenchées. Comme le dessin, j'avais de la misère avec le dessin. Maintenant, je ne sais pas. Il y a eu un déclic, je dessine beaucoup plus et j'ai des projets que je veux faire au niveau du dessin.*

Learning to collaborate with others and improving social skills

- *I think that each and everyone of us has brought positiveness to others. Sometimes, we were in conflict but it thought us how to outdo ourselves, to solve those conflicts.*
- *Moi je pense que chacun et chacune a apporté aux autres du positif (…) Desfois on avait des conflits mais justement, ça nous apprend à nous dépasser, à les régler ces conflits-là.*

Improving physical and cognitive skills

- *I had no memory at all... And I was afraid to forget my lyrics and... I tried to learn them , I knew them for five minutes... but now the problem is gone. I got back to cooking, my husband was cooking because I had no coordination, I wasn't coordinated enough... It was burning, I was afraid to set things on fire... but now it's over... It's a new life that's starting.*

- *Moi je n'avais pas de mémoire du tout... pis j'avais peur d'oublier mes mots, d'oublier mes mots puis... j'essayais de les apprendre, je les savais 5 minutes... pis là pas de problème (...) j'ai recommencé à faire de la popotte, c'est mon mari qui popottait parce que j'avais pas assez de coordination, j'étais pas assez coordonnée... ça brûlait, j'avais peur de mettre le feu... mais là c'est fini tout ça... C'est une autre vie qui commence*

		Subthemes
Essential components	The components of the activity	- The teacher's exercises and activities for stress relief - The use of singing as an activity to express emotions and stimulate cognitive functions - The high expectations for the participants
	The facilitating environmental settings	- A normalising environment outside of traditional mental health services - The high expectations and the support available for the participants - Absence of stigma

Teacher's exercises

- *I was walking… I had my head down all of the time, completely folded into myself while walking. And then… one day I saw myself through a shop window and I told myself: oh god, I am completely folded… but I wasn't able to do it by myself. Singing helped a lot because we needed to stand straight, we had exercises for the neck.*

- *Je marchais… j'avais tout le temps la tête très basse, complètement repliée sur moi-même en marchant. Et puis… un jour je me suis vue dans une vitrine et je me suis dit : mon dieu que je suis dont courbée… mais j'arrivais pas à le faire par moi-même. Le chant m'a beaucoup aidé parce qu'il fallait se tenir droit, on a eu des exercices pour le cou*

# The high expectations for the participants

- *They didn't downgrade their expectations (…) It's not because we had mental health problems that they… I mean… You can do it… trust us, and you will learn your lyrics and you will be able to make the show. This was really important.*

- *Ils n'ont pas nivelé vers le bas (…) C'est pas parce qu'on avait des problèmes de santé mentale qu'ils nous ont… en voulant dire… vous êtes capable… faites-nous confiance, pis vous allez apprendre vos textes pis vous allez être capable de faire le spectacle.*

The absence of stigma

- *We didn't know each other's diagnosis. I really liked it. After all, we were persons. We were a group.*
- *On ne connaissait pas le diagnostic de personne. Moi j'ai beaucoup aimé ça. Dans le fond, on était des personnes. On était un groupe*

The support available

- *[Coordinator]:* Some were waiting in front of my office, because they had to say something. Not tomorrow or not in maybe 3 months when my psychiatrist will want to meet me or my social worker or whoever. Someone was there on the spot. Because singing moves you. Being in a group moves you. Having somebody on place, for me, it's essential.

- *[COORDONNATRICE] Il y en avait en attente à mon bureau, parce qu'ils avaient besoin de dire quelque chose. Pas demain et pas peut-être dans 3 mois quand mon psychiatre va vouloir m'accueillir ou ma T.S. ou peu importe. Il y avait quelqu'un sur place. Parce que ça brasse de chanter. Ça brasse d'être en groupe. Alors d'avoir quelqu'un sur place, pour moi, c'est primordial*
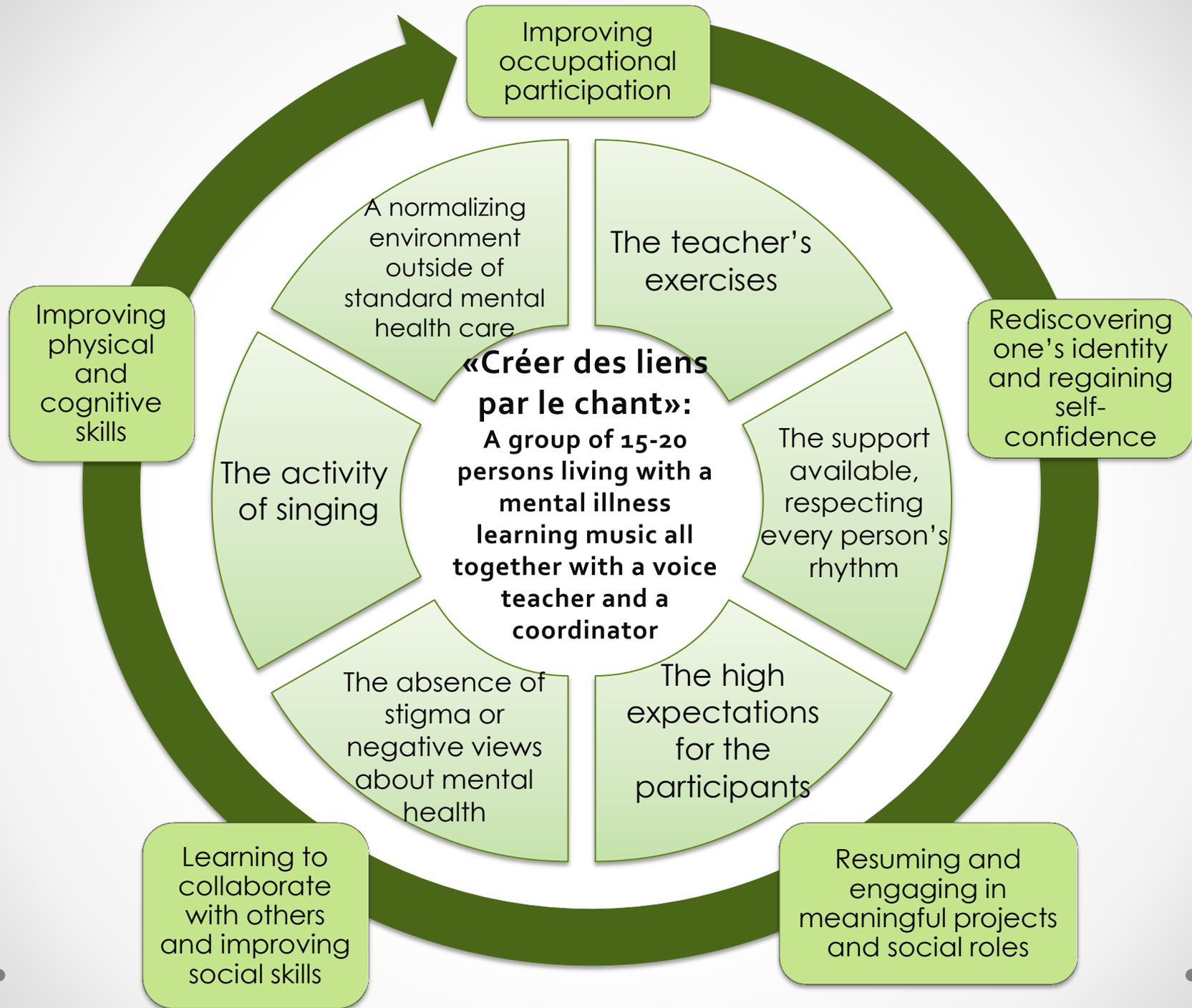
Discussion

- Benefits and essential components share many similarities with the CHIME recovery framework

- C: Connectedness
- H: Hope and optimism about the future
- I: Identity
- M: Meaning in life
- E: Empowerment

Discussion : «Créer des liens par la chant»

- Has a motivating power just like any meaningful occupation and can help build competence and self-identity
- Allows personal growth and self-expression through a non-threatening medium (Griffiths & Corr, 2007)
- Improved occupational participation

The high expectations, the absence of stigma...

- Used the participants' skills to their full potential, allowing full involvment in the activity
- Improved self-esteem, confidence in social interactions and hope

Implications for OTs

- Knowledge of occupation and client-centered practice
- Participants reported that they had the desire to join the community and to distance themselves from traditional mental health settings they had already experienced
- Opportunities such as «Créer des liens par le chant» remain rare and little known

Limitations of the study

- Convenience sampling that does not necessarily represent the whole population using psychiatric services
- The sustainability of the benefits remain unknown
- A mixed design using qualitative and quantitative information gathering before and after the activity could have given supplementary validity to our findings

Conclusion

- As persons with mental illness living in the community are given more **opportunities** to participate in such artistic activities in a **normalising context**, they will be able to discover their own true potential and value participation in occupations within the mainstream community.

References

- Adams, N., A. Compagni, et al. (2006). International pathways to mental health system transformation: strategies and challenges California, California Institute for mental health

- Contandriopoulos, A.-P., F. Champagne, et al. (2000). "Evaluation in the health sector: a conceptual framework." Revue d'épidémiologie et de santé publique **48**: 517-539.

- Griffiths, S. and S. Corr (2007). "The use of creative activities with people with mental health problems: a survey of occupational therapists." British journal of occupational therapy **70**(3): 107-114.

- Gruhl, K. L. (2005). "Reflections on ... the recovery paradigm: should occupational therapists be interested?" Canadian journal of occupational therapy. Revue canadienne d'ergotherapie **72**(2): 96-102.

- Krupa, T., E. Fossey, et al. (2009). "Doing daily life: how occupational therapy can inform psychiatric rehabilitation practice." Psychiatric rehabilitation journal **32**(3): 155-161.

- Miles, M. B. and A. M. Huberman (1994). Qualitative data analysis : an expanded sourcebook. Thousand Oaks, Sage Publications.

- Piat, M., J. Sabetti, et al. (2010). "The transformation of mental health services to a recovery-orientated system of care: Canadian decision maker perspectives." The International journal of social psychiatry **56**(2): 168-177.

Questions?

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