

From a Psychiatric Hospitalization, Back to School - A Narrative Research

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AIM

The aim of this study was to describe the experience of 20 adolescents with schizophrenia (ages 13-18) recovering from a psychotic episode described the experiences of self in relation to their illness and the transition from hospitalization back to school.

INTRODUCTION

In the last decade, more and more studies give voice to the personal perspective of people who are coping with schizophrenia, but only few focus on adolescents. Even fewer studies, examine the delicate phase for these adolescents of the transition from hospitalization back to the community, using the qualitative method. Researchers have reported that: Adopting a narrative perspective in this way broadens our horizons concerning the range of factors that might influence a person's understanding of, and response to, the onset of a mental disorder. Building on the work of Estroff, Lysaker, and others, I employed narrative constructs in the analysis of interview data in which Adolescent recovering from a psychotic episode described the experiences of self in relation to their illness (Roe et al, 2002).

METHODS

A semi-structured interview was used in the study, based on the IPII- Indiana Psychiatric Illness Interview (Lysaker et al, 2002). The interviews focused on the experiences of the participants at the transitional phase from hospitalization back to a special education school, and to examine: Is it possible to reconcile the own subjective experiences of the participants, and to learn from them and improve the process of returning to school after hospitalization. The interviews were analyzed using the narrative approach, through categorical content analysis and analysis of form.



RESULTS

The results of the study revealed six major themes, which are: a) *life and death*- This theme is presented by the interviewees as a significant source of strength during rehabilitation and is an essential internal motivating force. Differently from this source of strength, the interviewees also spoke of the suicidal tendencies or the "death drive" which is a risk factor in the field of mental health. b) *support and family involvement and its absence*- The interviews presented a complex picture regarding the support of a close family member, on the one hand, support and assistance in the rehabilitation process were presented, while on the other hand some felt that the support was accompanied by family involvement that was sometimes harmful. Some of the interviewees also spoke of violence on their part towards the supportive family member. c) *satisfaction and dissatisfaction with the work of professionals* - Therapeutic support was perceived as a source of strength, but alongside satisfaction, some of the interviewees felt frustrated and expressed criticism towards the therapeutic staff. d) *medical balance and imbalance*- All interviewees noted that drug treatments are important and affect their quality of life. They emphasized the transition between pharmacological balance and imbalance, and the implications of pharmacological imbalances and e) *sense of coherence and the lack of a sense of coherence*- All interviewees emphasized uncertainty regarding recovery and the lack of control over their disease and their lives, as opposed to a sense of control over the rehabilitation process. They emphasized the importance of finding meaning, comprehension, and manageability over their illness.

CONCLUSION

The findings of this study deepen our understanding of the complex processes that occur during the transition from hospitalization back to school in adolescents who experience it. The movement between strength and vulnerability that is present in every theme can serve as a theoretical basis for developing a rehabilitation program.

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