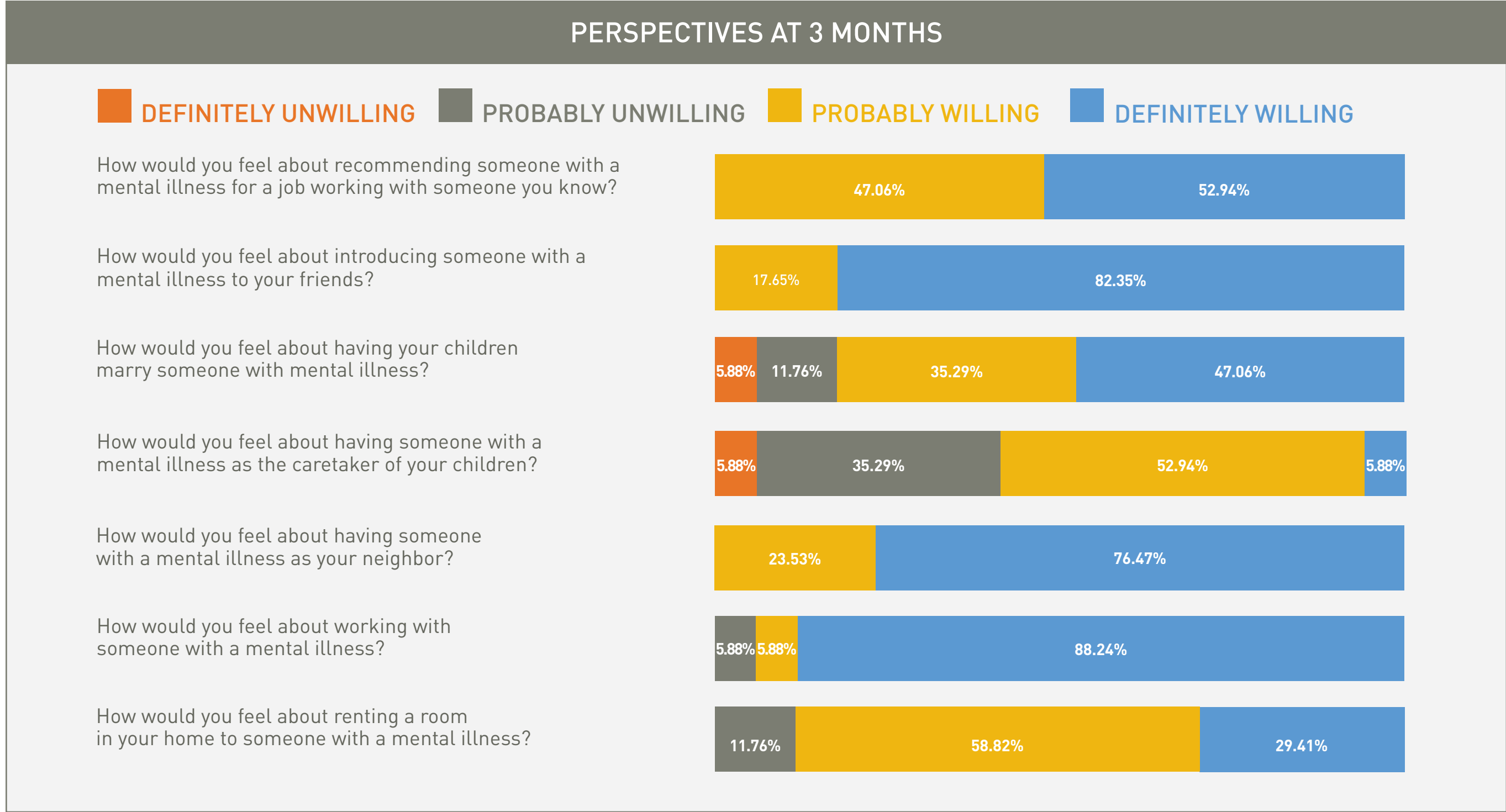
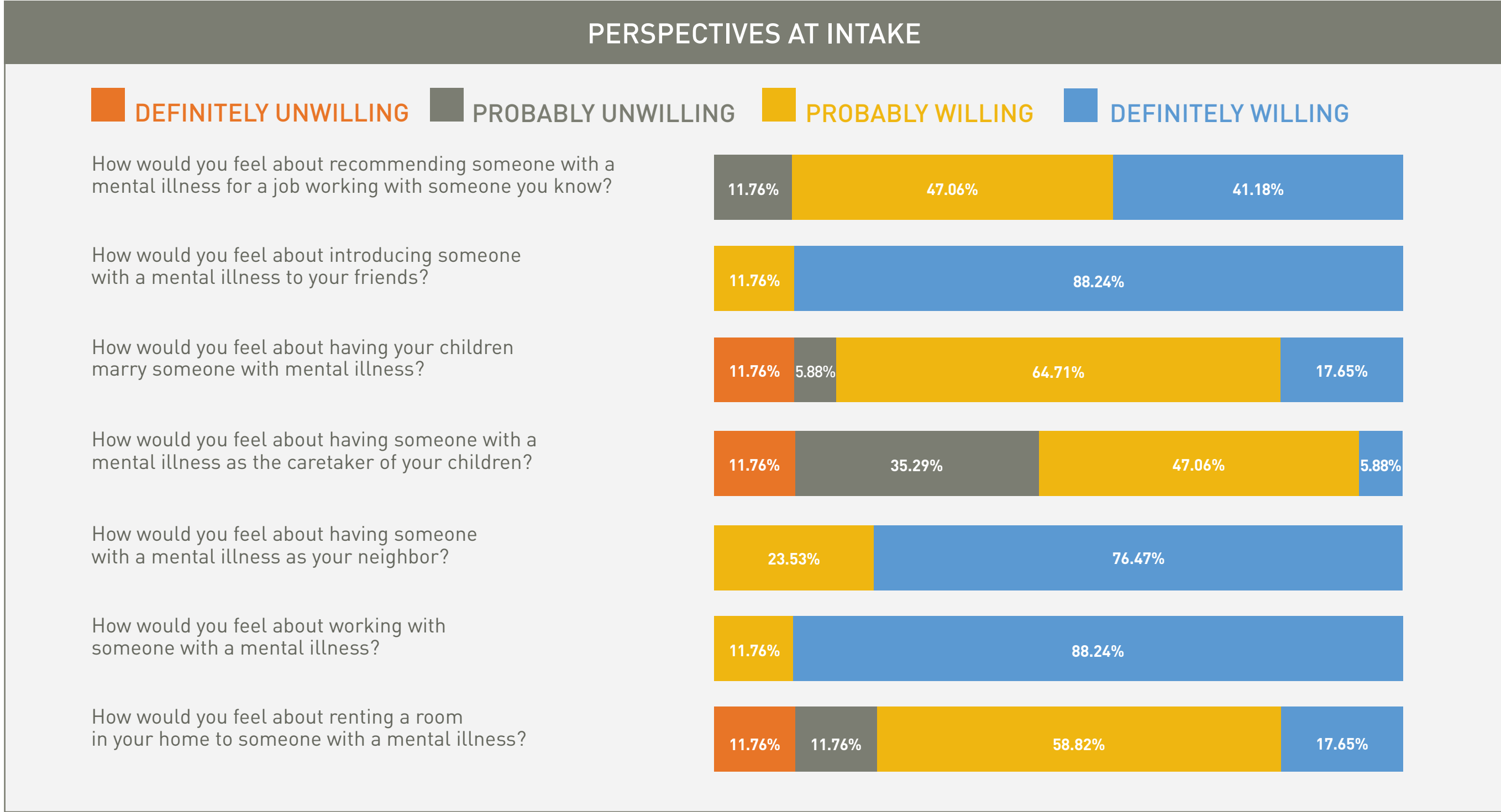


TOUCHING LIVES: CHANGING PUBLIC PERSPECTIVES OF MENTAL ILLNESS THROUGH A VOLUNTEER-IN-PARTNERSHIP PROGRAM

AUTHORS : CHESLEY WALSH, KARL LOOPER, MARIANNE CÔTÉ-OLIJNYK, MELISSA PARK

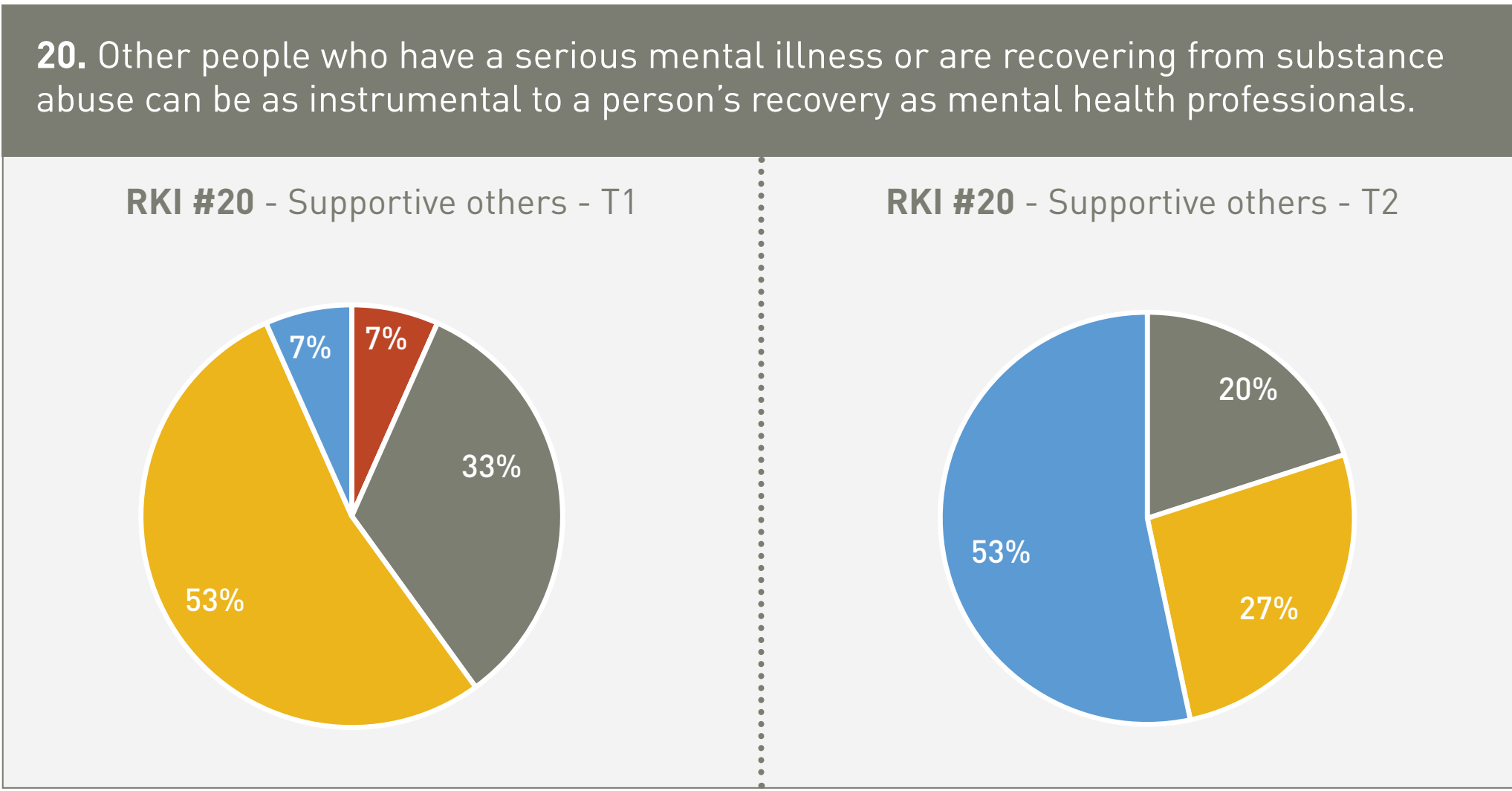
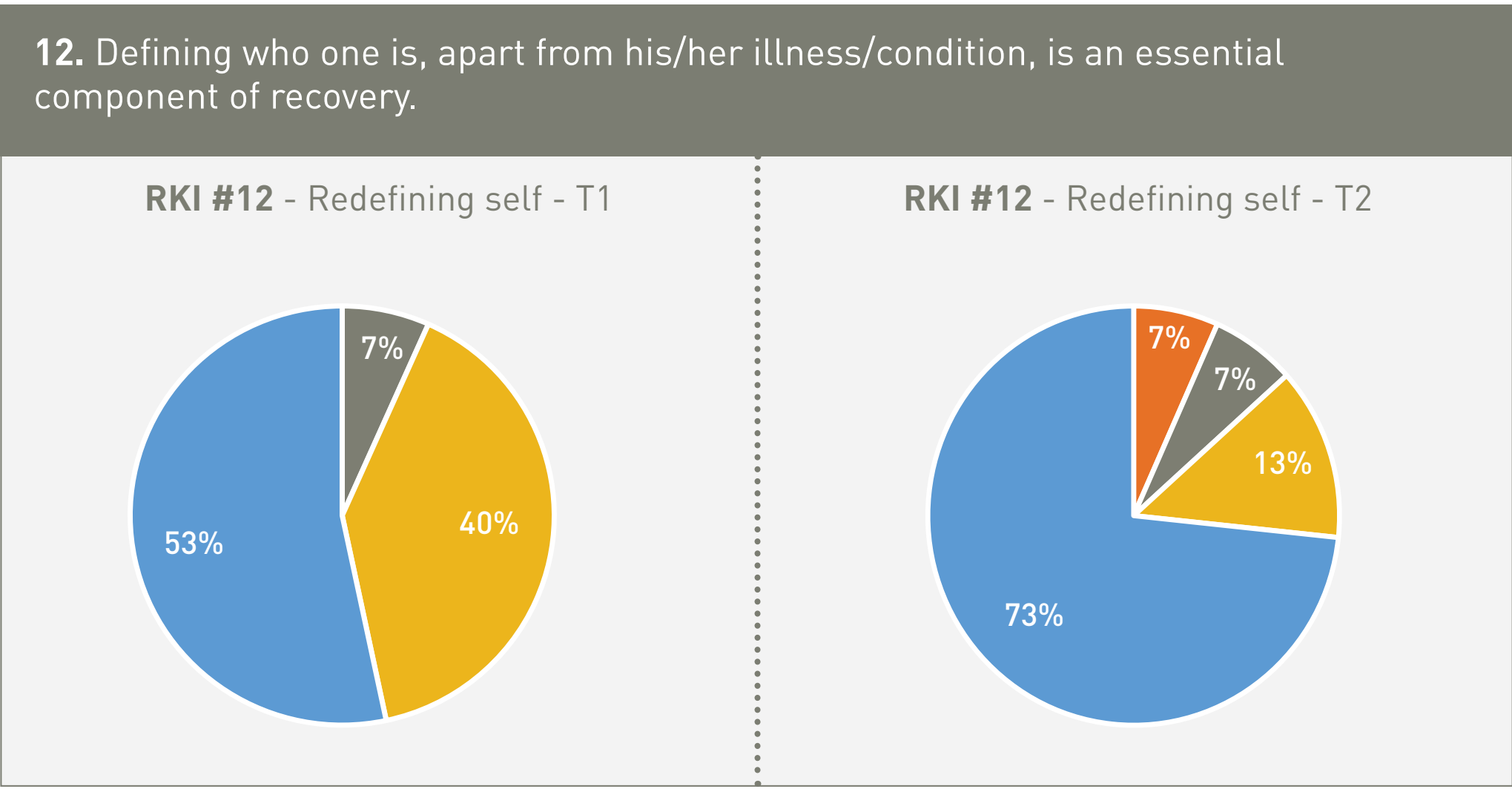
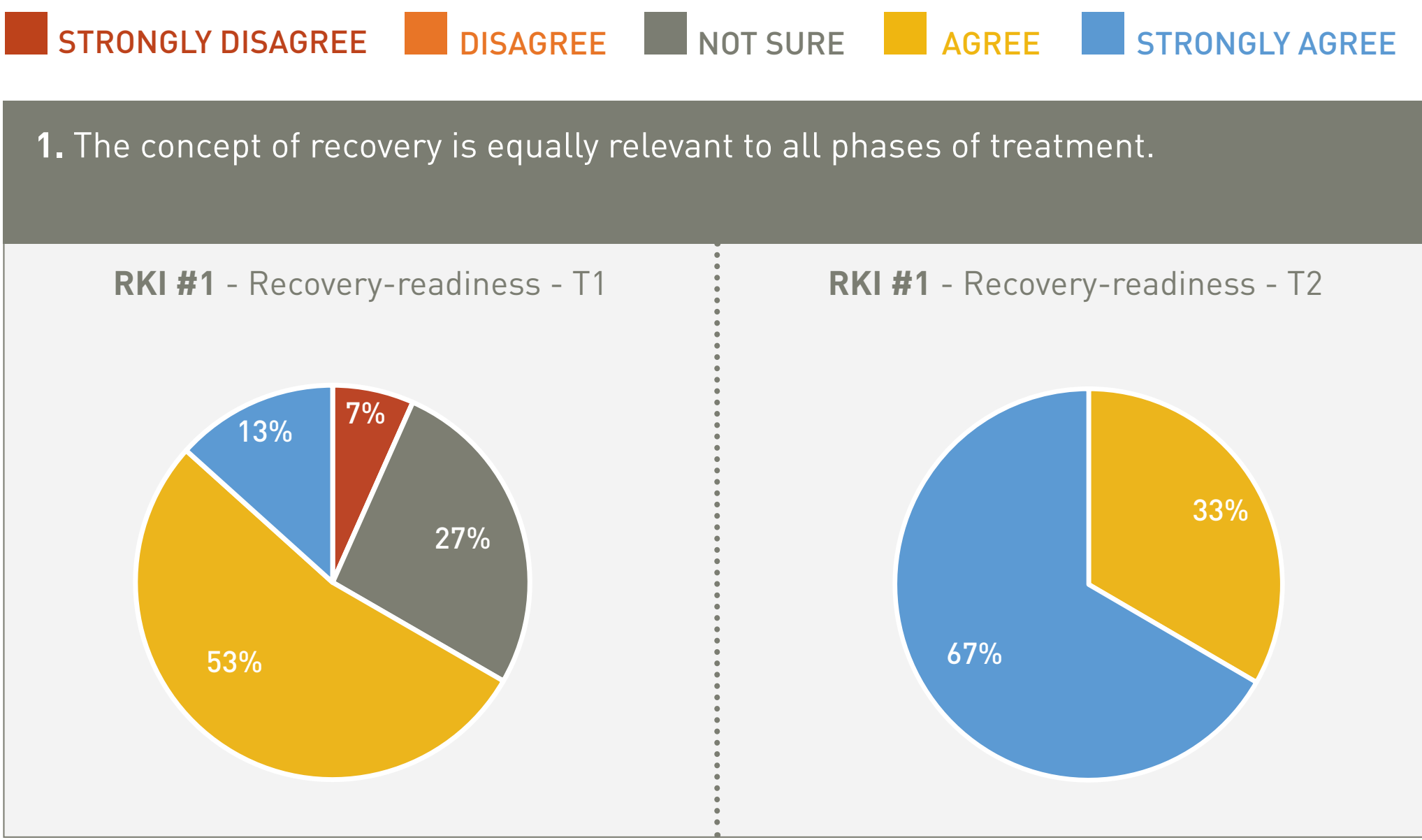
“Like any stereotype I might have of anyone with mental disability now is completely shattered because, like I said, once you start getting into convo, you realize they’re normal people, and they have normal interests, and they care about things, you know what I mean? Umm, and I think I was always open-minded before, but to actually be there now, it’s like first-hand experience of seeing it, you know?” - Christophe

VOLUNTEER PERSPECTIVES SOCIAL DISTANCE SCALE (numbers are for 17 participants)



“It felt good for me. I felt like what I was doing was actually important. Like I know it’s important but, in that moment, I felt that it was important. I thought I was making a difference.” - Maya

RECOVERY KNOWLEDGE INVENTORY (numbers are for 15 participants) (T1: Intake T2: 3-Month)



“It’s not about the drawings, it’s really about the connection. The drawing is just a piece of what connects you. It could be anything. Or sharing their stories. Or sharing their experiences. Or sharing their sorrows.” - Doris

BACKGROUND

Literature suggested that face-to-face contact decreases stigmatizing beliefs about mental illness. A Recovery-in-Action initiative of a participatory project^[1], the Volunteers-in-Partnership (ViP) program was designed to provide opportunities for “someone to talk to” and “something to do.” Thus, our **research question** was two-fold:

1. Did the newly established ViP meet its objectives?
2. What was the impact of volunteering on knowledge and attitudes about recovery and [stigmatizing] attitudes on mental illness?

Feb 2017-Jan 2019

METHODS

PARTICIPANTS & INTERVIEWS:
17 Participants (SDS, interviews) , 16 participants (RKI)

DATA COLLECTION:
Audit trail of types and amounts of activities:

- Volunteer Log Sheet (volunteer activities, number of patients encountered, feedback);
- Information-Resource kiosk logbook;
- Minutes from the Patient-led Advisory Committee meetings.

Changes in knowledge and attitudes on mental illness and stigma and recovery at pre-, 3-month, and exit:

- Social Distance Scale^[2]
- Recovery Knowledge Inventory^[3]
- Interviews (15-60 minutes)

DATA ANALYSIS:
Basic statistical analysis of instruments and thematic & narrative analysis of de-identified interviews (pre-, 3-month) by three researchers.

RESULTS

- Activities that met objectives included: board games, accompaniment off unit, dance, music, yoga, and movie nights (41 volunteers = 1,560 patient encounters over 1,000 cumulative hours);
- The concept of “Touch” (e.g. feeling touched, touching others) emerged from the analysis of volunteer narratives as what mattered most to both volunteers and patients (e.g. being recognized, feeling valued and being empowered), which supports the sustainability of the program;
- Pre-/post measures suggest shifts in perceptions about mental illness (SDS), and changes in beliefs about recovery (RKI).

CONCLUSION: In consultation with in-patient professionals, volunteers provided over 1000 cumulative hours of “**someone to talk to**” and “**something to do**” in the in-patient unit over the course of two years. The volunteers described experiences of contact and touch as significant factors, which appear to lead to project sustainability and growth.

CREDENTIALS:
Chesley Walsh, volunteer coordinator, Jewish General Hospital • Karl Looper, MD, Associate Professor, McGill University
Marianne Côté-Oligny, Medical student, McGill University • Melissa Park, PhD, Associate Professor,
School of Physical and Occupational Therapy, McGill University • Addtothenoise: Design.

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