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# Interdisciplinary capstone course: synthesising theory and practice through an innovative mental health clinical placement

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# Interdisciplinary capstone course: synthesising theory and practice through an innovative mental health clinical placement

## **Abstract**

Given that people with a mental illness have a range of biopsychosocial needs, care and treatment is complex and is best delivered by a multidisciplinary team. In order for future health professionals to learn skills to understand consumers from an individualised and holistic perspective, students from Nursing, Psychology, Exercise Physiology and Dietetics participated in a therapeutic Recovery Camp alongside 30 people with a mental illness. The camp aimed to envelope consumers and students within an experience of therapeutic recovery. This interdisciplinary capstone course was to achieve learning outcomes via immersion in various indoor and outdoor activities nested within a strengths-based five-day camp held in the Australian bush. Students from different disciplines learned from and educated each other. They applied skills learned in theory in what can only be described as an innovative practice setting. The setting formed a fundamental part of the therapeutic milieu and students learned that a 'clinic', 'unit,' or 'formal setting' isn't the only way care and treatment can be delivered to this marginalised and vulnerable group. This paper showcases how students from various disciplines worked with and learned from people with a mental illness.

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# Interdisciplinary Capstone Course: Synthesising theory and practice through an innovative mental health clinical placement

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**Abstract— Given that people with a mental illness have a range of biopsychosocial needs, care and treatment is complex and is best delivered by a multidisciplinary team. In order for future health professionals to learn skills to understand consumers from an individualised and holistic perspective, students from Nursing, Psychology, Exercise Physiology and Dietetics participated in a therapeutic Recovery Camp alongside 30 people with a mental illness. The camp aimed to envelope consumers and students within an experience of therapeutic recovery. This interdisciplinary capstone course was to achieve learning outcomes via immersion in various indoor and outdoor activities nested within a strengths-based five-day camp held in the Australian bush.**

**Students from different disciplines learned from and educated each other. They applied skills learned in theory in what can only be described as an innovative practice setting. The setting formed a fundamental part of the therapeutic milieu and students learned that a ‘clinic’, ‘unit,’ or ‘formal setting’ isn’t the only way care and treatment can be delivered to this marginalised and vulnerable group. This paper showcases how students from various disciplines worked with and learned from people with a mental illness.**

**Keywords – mental illness; interdisciplinary learning; capstone; Recovery Camp; clinical placement**

## I. INTRODUCTION

Results from the 2007 National Survey of Mental Health and Wellbeing suggest that an estimated 7.3 million Australians between the ages of 16 and 85 will experience mental illness within their lifetime [8]. Staggering statistics such as these, demonstrate how important it is that future health professionals learn about mental illness in their undergraduate training. Learning is a multi-faceted concept and primarily for future health professionals occurs in

classrooms and laboratories, but also through work integrated learning opportunities, such as clinical placements.

Further, studies have shown that mental health care delivered by multidisciplinary teams improves mental health outcomes [17] [19]; promotes individualized care [9]; and, supports a person’s positive experience of recovery [3].

The literature regarding factors that influence learning within the clinical environment is abundant, with much of it claiming that a positive clinical experience is vital to successful learning for students [4] [20]. That said, clinical placement opportunities are increasingly more difficult to find and procuring enough places is extremely challenging.

## II. THE INTERDISCIPLINARY TEAM

A team from the University of Wollongong and the University of Queensland, Australia, combined their talents, experience and expertise to offer a mental health clinical placement aimed at fully engaging students in a psychosocial model of mental health care. True to the ethos of interdisciplinary healthcare delivery, the team is also interdisciplinary. It consists of mental health nurse academics, a psychologist, a therapeutic recreation (TR) specialist, and an educationalist. Four different but complimentary members drawing on invaluable discipline expertise deliver all aspects of the Recovery Camp. This includes programming and structuring activities, recruiting all participants, running information evenings, fundraising, setting learning objectives, role modelling good clinical skills and behaviour, and assessing student’s clinical competence during the capstone course experience. It also includes all the logistics necessary to ensure smooth running of a clinical learning experience that involves over 60 people traveling on a coach to an out-of-town Australian bush setting. Add to this, organisational challenges related to shared cabin accommodation in bunk beds, insurance, meals, pick up and collection and team/group allocation.

The team also 'value adds' to this learning experience by formulating an appropriate research design and series of measures to capture student and consumer feedback and experiences. The plan to engage students in interdisciplinary learning was that they would participate in a 'residential' Recovery Camp for five days. Working within a multidisciplinary team requires some understanding of the roles of other professionals within a team [21]. For future health professionals, typical clinical placements are not often conducive in highlighting the importance of multidisciplinary mental health care to individualized care and recovery [11] [13].

Collaborating with consumers and a multi-disciplinary team was a key outcome of the Recovery Camp. With everyone on equal ground, interacting on a largely informal level, students were able to take time to appreciate the person-centred side of mental illness. They learnt how different health professionals approach mental health care from different angles. For many, this appeared to foster a shift in the 'lens' through which consumers were viewed.

### III. THROUGH THE LENS OF PSYCHOLOGY

The psychology participants described how this learning experience enhanced their abilities to talk to consumers appropriately and with empathy. This was achieved through seemingly informal interactions and encounters, but which were, in actual fact, opportunities to deeply engage with consumers on a personal and therapeutic level. This type of deep learning and exposure was said to not be undertaken during undergraduate studies in any depth. While the study of psychology provides an expansive insight into the human mind, Recovery Camp expanded understandings of the link between mental and physical issues, underscoring the importance of holistic care. Consumers were encouraged to approach psychology students and provide a "lived experience" perspective of their illness. One student said that:

*"Learning about their lived experience made me appreciate that it isn't something you can just read about in a textbook. It's much more significant straight from the source."*

Future psychologists asserted that learning in this way contributed towards a positive, strengths-based approach that they could translate into practice. They felt that their enhanced knowledge would ensure consumers in different settings receive care conducive to a personal recovery philosophy.

### IV. THROUGH THE LENS OF NURSING

Despite nurses being trained to view people they work with holistically [7], the discipline has a certain lens through which it views people. This lens is closely aligned with the medical model of care which sees recovery as a clinical outcome, as 'cure', rather than 'personal journey' that is described by people with lived experience. Importantly, Recovery Camp exposed nurses to an approach that is advocated in The

National Standards for Mental Health Services 2010, which identifies principles of recovery-oriented practice, inclusive of a right that "supports individuals to maintain and develop social, recreational, occupational and vocational activities which are meaningful to the individual" (p. 43) [6].

Recovery, as it is posited in mental health nursing, is not synonymous with cure but can be viewed in part as gaining a social identity through engagement in an active life. A positive social identity can facilitate moving people away from being viewed as 'mentally ill' [16] [1] and position them not as their illness or as 'others' but through the uniqueness of them as individuals. Nursing students suggested learning as a result of experiencing Recovery Camp enhanced their sense of viewing someone not as an illness. The Recovery Camp allowed 'barriers' to be broken down almost effortlessly, binding all participants in a shared experience. A nursing participant suggested that Recovery Camp enhanced the dignity of risk and that this "*enhances self-esteem and focuses on the positive benefits of life experience to provide greater fulfilment and focus not on what we can't do, but what we can.*" This illustrated the value of therapeutic recreation, in particular, as a 'vehicle' for interaction and an opportunity for relationship building. The focus was on the person, not the illness. This was achieved by promoting supportive engagement, team building, and inclusion, with emphasis on achievement and participation. Research has underscored the importance of social relationships in recovering from severe mental illness [22] [23]. From a nursing perspective, it was important for students to see that it isn't only medication compliance that should be a focus.

### V. THROUGH THE LENS OF DIETETICS

You are what you eat. This old adage applies to everyone, but complicating matters for people with mental illness is the metabolic changes that occur as a result of some medications. It is not uncommon for consumers to gain tens of pounds as a result of psychotropic drugs, and learning to manage what they eat has become an integral part of managing their illness. The dietetics students helped consumers understand this and also imparted nutritional information to other students. One student said, "*I just wasn't aware of the difficulties people with mental illness face with regard to nutrition. The medications they take really can have a negative impact and an appropriate and affordable diet can help with this*". All Recovery Camp attendees were broken into small groups and engaged in food information sessions. Everyone learned how to read and interpret food labels. A dietetics student brought 'nutritional information' she had cut from various 'recognizable and popular' food products. Each group evaluated the product and fed back their findings to the whole group. Emphasis was placed on salt, fats and sugars. Consumers were encouraged to be the group leader and anxiety around this role was managed by psychology and nursing students. This learning activity again emphasised that the person is a whole and all elements of a person's life need to be taken into consideration.

## VI. THROUGH THE LENS OF EXERCISE PHYSIOLOGY

An exercise physiologist facilitated learning groups related to physical activity and exercise. Again, conducted in small group settings, participants were led through an information session that helped them understand the importance of physical activity and the role it can play in managing mental illness. In addition, and complimenting the nutrition sessions, consumers could understand relationships between exercise and physical activity, and managing the metabolic symptoms that were a result of their medications. Many people with mental illness smoke and lead sedentary lifestyles. Through the lens of exercise physiology, participants came to understand the effects of smoking on their physical and mental health and also the negative effects of leading sedentary lifestyles.

## VII. THE ROLE THAT TR PLAYED IN INTERDISCIPLINARY LEARNING ABOUT MENTAL ILLNESS

Therapeutic recreation is a treatment service or program designed to restore, remediate and rehabilitate a person's level of functioning and independence in life activities, in order to promote health and wellness as well as reduce or eliminate the activity limitations and restrictions to participation in life situations caused by an illness or disabling condition [2]. Therapeutic recreation is a purposeful form of intervention to assist individuals with disabilities or illness to live a more healthy and satisfying life [15].

The literature, although not abundant in this area, is unanimous in the benefits of camping as therapy for both living with and recovering from mental illness. In their evaluation of an outdoor camp as 'adventure therapy' for individuals with mental illness, Cotton and Butselaar [5] found that participation in the program resulted in improvements in self-esteem, social connectedness and wellbeing. Recreation activities partaken by people with mental illness were, according to Fullagar [10], found to be associated with counter-depressive positive emotions, thereby facilitating recovery. Research by Snethen, McCormick and Van Puymbroeck, [8] found that engagement in TR activities for people living with schizophrenia was significantly associated with less negative emotions, however, no association was found between activity and positive emotions in this group.

## VIII. THE AUSTRALIAN EXPERIENCE

The role of the health professionals and health students was to provide health education, learn counselling techniques and see first-hand the benefits of a therapeutic recreation camp and its links to recovery. This embedded experience, where consumers were viewed through a strengths-based lens, facilitated discourse which challenged stigma and stereotypes around perceived limitations of people who have a mental illness. Cabin-based accommodation and shared meals

ensured that camp activities and experiences relied on and fostered the development of therapeutic and collaborative relationships for all who attended.

Attendees were males and females aged between 21 and 71 years of age and weighing between 110 lbs (50kgs) and 408 lbs (185 kgs). Mental health diagnoses included PTSD, schizophrenia, bipolar disorder, anxiety, major depression, addiction, eating disorder and personality disorder. Comorbid physical diagnoses included sleep apnoea, diabetes, irritable bowel syndrome, asthma, chronic fatigue, hypothyroid, back pain, poor mobility, CVA, hypertension, arthritis, renal/pancreatic transplant, hip replacement, skin cancer, arteriopathy with subcortical infarcts, cervical laminectomy, dyspnoea and spurs. These health issues reinforced to all students that individual holistic care is required, and the mind and body should not be compartmentalised.

The Recovery Camp provided attendees with numerous opportunities to collaborate and engage in a number of therapeutic recreation experiences that focused on each individual's strengths within a person-centred philosophy. Utilizing a strengths-based approach for assessment in therapeutic recreation emphasises the concept of flourishing through leisure [1]. This positive approach built strong alliances and partnerships which promoted an understanding of individual mental health recovery and facilitated an immersive learning experience for students. The Recovery Camp provided the opportunity to engage in physically and mentally challenging experiences like high ropes, rock climbing, a 18m giant swing and a 12m high flying fox, as well as a daily Tai Chai program with a particular focus on balance, an evening bush dance, tie dye, problem solving and team pursuits.

## IX. EVALUATING THE LEARNING EXPERIENCE

The contribution of therapeutic recreation activities to life satisfaction and an improvement in quality of life has been well documented [1] [5] [12] [18]. Students from different disciplines recognized the value of TR as a vehicle for engaging with people who have a mental illness and also how this vehicle can facilitate exposure to intervention strategies. Students came to view consumers through a collaborative lens and learned how each discipline does bring different approaches and might focus on different aspects of the person and their life but ultimately it is a holistic approach, only achieved through interdisciplinary collaboration that will achieve positive results.

## X. CONCLUSION

"Mental health care across Australia and internationally has moved toward a Recovery philosophy" (p. 1843) [14]. Recovery Camp sheds light on the efficacy of an immersive TR experience for people with a lived experience of mental illness, underscoring the practicality of this approach to

treatment and recovery. The knowledge derived by students as a result of this immersive experiential capstone placement, highlights aspects of wellbeing that are integral to recovery, including forming relationships, communication and challenging oneself. In terms of practice, these findings can be used to inform treatment of a range of mental illnesses, such that TR based programs may be considered for community re-integration of people with mental illness. Students appreciated that clinicians from all disciplines should encourage engagement in meaningful recreation activities and set mutual goals in this respect.

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