

Meaningful Collaborations in Social Work

An ethnographic inquiry into perceptions of meaning in
life in social psychiatric practice.

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Abstract

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The connection between psychological well-being and the pursuit of meaning in life (MIL) has been theorized and researched numerous times. Yet, little empirical research has been done on its application in the domain of social work as an actor in the field of mental health. The aim of the present qualitative study was to investigate the influence of social work collaborations on service users' meaning in life in social psychiatry. To approach the subject and build an empirical bridge between social work and MIL, an ethnographic fieldwork has been conducted in two social psychiatry facilities in Aalborg (DK). One of them was private, the other organized by the municipality. The findings of the thematic analysis suggest that positive social work influences on MIL can be found within its effort to reduce the negative effects of social exclusion that participants reported to be subjected to. Three main types of collaborations that contribute to these meaning-enhancing effects were differentiated and categorized into professional relationships, meaningful communities and meaningful occupation. Summed up, social work was found to facilitate possibilities for service users to perceive MIL in social psychiatry by combatting social exclusion, despite the empirical differences between a state-governed and a private organization that are apparent in their practice approach.

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1. Introduction

The search for meaning has always been and continues to be an important factor of human flourishing in the modern society as social change poses new challenges to it. Meaning is acquired as a result of the relationship between individuals and culture and is therefore impacted by cultural changes (Crescioni & Baumeister, 2013). One of the first authors to approach this topic scientifically was Victor Frankl by the end of the second world war, who developed his theoretical stance on meaninglessness as the main challenge to psychological well-being (Frankl, 1964). This idea emerged in times of great uncertainty, where the impact of the war left the world in a fragile condition. A psychological foundation for the quest for meaning was his contribution as a means to alleviate some of its negative consequences for the individual. A few decades after the war had ended, it was the phenomenological and existentialist movement that revolutionized this debate in the realm of philosophy. Its advocates claimed meaninglessness or the absurdity to be the natural state of life that has to be accepted as a fact of being. However, instead of promoting existential angst, philosophers such as Heidegger, Sartre and Kierkegaard interpreted this natural state as the unique opportunity for freedom and oriented their efforts towards communicating through their work, that each and every individual is obliged to find a meaningful life on its own (Bakewell, 2016).

Today, well-being and human flourishing are still inevitably connected to the search for meaning in life (MIL). Victor Frankl has been the first to theorize the human urge to find meaning in modern science and to relate it to mental health. It turned out that this linkage is not only heuristically of value but also empirically testable. The search for meaning does not mean to argue philosophically whether life has a purpose and how one should live in this regard, but it poses instead a personal quest to find sources of meaning that allow to perceive one's life as meaningful. This notion has been receiving renewed attention throughout the last three decades, trying to understand the role that MIL plays in achieving psychological well-being and an overall good life. The emergence of positive psychology, a relatively young subdiscipline that focusses on improving quality of life instead of fixing what does not (Seligman, 2000), was especially involved in the scientific investigation of these phenomena and contributed to a broad array of theoretical approaches towards MIL. Empirical evidence from this domain seems to support its correlation to well-being and can even suggest ways for improvement. At the same time, research has also investigated the negative consequences of meaninglessness and its deteriorating effect on psychological well-being (Steger, 2012).

Mental Illness is one of the great challenges to well-being that western society is facing today. This is evident in the ever-increasing rates of depressive and anxiety disorders, which are associated with comorbidity and higher suicide rates as well (Lauber, 2010). Research of the last decades has established strong connections between the subjective perception of MIL and mental health. Briefly summarized, low perceptions of MIL have not only been found to reduce well-being in general but are also correlated with psychopathology, depression and suicide risk (Crumbaugh & Maholick, 1964; Mascaro & Rosen, 2005; Marco et al., 2017). On the other end of the spectrum, an increased perception of life as meaningful supports physical health and well-being (Reker et al., 1987). Besides the logopedic tradition in psychotherapy founded by Frankl, clinical psychology has included clinical applications of positive psychology and meaning in life research into the literature (Ruini, 2017; Russo-Netzer et al., 2016).

The social work profession is dedicated to the promotion of well-being and support of marginalized groups and in this way a stable component of mental health interventions in Europe. People struggling with mental illness are often associated with marginalization and the need for support in social welfare states (Metteri et al, 2005). This link is the fundament for the intent of this study within the discipline social work, that aims at investigating the influence that social work collaborations have on the perception of MIL in service users. It is a qualitative exploratory project that intends to illuminate whether and how social work practice is connected to service users' perceived MIL in the field of mental health and can promote well-being through this perspective. To accomplish this, an ethnographic fieldwork in social psychiatry was initiated, interviewing and observing collaborations between professionals and service users in two facilities within the city of Aalborg (DK) over a total period of three months.

1.1 Background of the Study

Within the broad field of social work and mental health, the present study investigates social work collaborations in the field of social psychiatry in Denmark. Social psychiatry is an approach to rehabilitation and recovery that is carried out in the community instead of behind the walls of psychiatric wards. Its focus is the social and the interplay with the life of people struggling with mental illness. Ventriglio et al. (2016) state that contrary to the traditional model of psychiatry, where mental illness is seen as abnormal behaviour in need of treatment, today it needs to be seen as social, due to the growing evidence on external factors influencing mental illness. The social environment is inseparable from the development of mental health, which

underlines the importance of social interventions. Coming to the setting of this study, the Danish welfare state has changed the landscape of psychiatry significantly throughout the preceding thirty years (Bauer et al., 2012). While the prevalence rates for mental illness were continuously rising, especially within the domain of common mental disorders (CMDs), the treatment agenda has changed from inpatient-based concepts to an outpatient orientation, thus, promoting the establishment of social psychiatry and interventions carried out in the community. The increased rate of CMDs is a trend seen all over Europe and visible in diagnostic categories such as anxiety and depression. At the same time the diagnostic field has broadened, showing statistically significant accumulations of new categories such as ADHD and eating disorders.

1.2 The Empirical Field

For the purpose of this study, two social psychiatric facilities in Aalborg have been selected for an ethnographic fieldwork. The first one called “Kraftværket”, is a facility run by the municipality, that is oriented towards educational and social programs as a means to involve people into meaningful activities. It works on the basis of referrals from social workers of the municipality that implement Kraftværkets services into a structured support plan. The facility offers different activities throughout the whole week for referred members and facilitates open hours for social gathering as well. In total 5 employees are working with the people coming to the program on a daily basis, supported by two additional employees running a “sports and culture” program mostly outside of the facility.

The second facility for the empirical study is the “Kildehuset”, which is a Fountainhouse initiated through the international Clubhouse organization. This private initiative is a membership model, where people can involve themselves into a work routine within the clubhouse, running the kitchen, the office or the household work as a community project. The clubhouse is free of charge and people are obliged to take care of the house themselves with the support of four employees assisting in the organization of the daily structure and financial matters. Nonetheless, the employees offer individual support of various forms as well, if the members wish to engage in them. Besides the work-ordered day in the clubhouse, the facility organizes transitional workplaces in the community, where people can be employed in part-time according to their abilities and get adequate payment.

1.3 Research Question and Objectives

With the intersection of MIL research and social psychiatry as a field of social work, the research question was designed as follows:

How do social work collaborations influence service users' meaning in life in social psychiatry?

This being the main interest, the project was planned in an exploratory manor, trying to investigate whether social work in co-production with service users can touch upon areas of psychological well-being that are associated with a meaningful life. Collaborations in this definition are seen as every kind of professional process in between employees and service users that occurs within the facilities. This particular term was chosen to underline the openness towards different modes of social work practice that could be observed and to underline its co-productive nature. The present study adopts a qualitative approach towards the perception of meaning to gain an in-depth look at the individual conceptualizations of MIL. It was not meant to be an evaluation of cause and effect, which might be coming to mind when reading “influence”, but more so an open-ended inquiry, aiming to find connections between social work practice collaborations and service users psychological state of well-being expressed through the sense of meaningfulness. A secondary aim connected to the premise of social work research was to learn from the experiences made in these two settings of social psychiatry and to generate useful knowledge as a bridge between the psychological perspective of MIL and social work research.

1.4 Scope and Limitations

This qualitative inquiry has to be seen as an exploratory research that tries to illuminate certain aspects of social work practice in social psychiatry that overlap with the concept of MIL. The scope includes professionals and service users from the aforementioned organisations in northern Denmark. Age and gender were very diverse, ranging from youths to pensioners in their late sixties. The study is limited to a small group of interview participants, comprising seven interviews in total, which are supported by observations and conversations from the fieldwork that are captured in fieldnotes. Seen in this light, the strength of this study is that it

can highlight elements of practice in social psychiatry that are perceived to influence MIL and in doing so, contribute to a theoretical perspective on MIL in the social work discipline. That being said, there is a number of things that this study cannot do. First, it cannot contribute to explanations of cause and effect or general evaluations of social work interventions measurable effect on service users perceived MIL. This clarification is important, since it presents the study as what it actually is: a qualitative exploration of MIL. No measurement instrument has been used to quantify perceived meaning in life and the findings are therefore based on qualitative interpretation. Second, the data collection does not include every service user and practitioner, but only those who were willing to participate in the project. Therefore, results are limited to this group and might only apply to a certain population within social psychiatry. Lastly, the language barrier needs to be stressed, since conversations and interviews have been conducted in English, which was not my nor the participants first language. This issue has not posed significant challenges to the research process itself, but it could still have led to errors during data gathering and analysis.

2. Literature Review

With regards to the research question, this literature review aims to give an introduction into the relevant scientific topics and concepts that are at the core of this study. Therefore, the chapter is divided into the two main areas of *meaning in life* and *social work collaborations in social psychiatry*. Due to the scope of this thesis, the review will be focusing on a broad overview and theoretical positioning of each of the topics, before a selected account of current research will be presented to illuminate the intersection between the themes that construct the empirical interest of this study. First, attention will be drawn towards the concept “meaning in life”, clarifying the psychological domain of research that it draws upon and how it is positioned in this paper as an interest for the discipline of social work. Simultaneously, the state of the art regarding MIL-research will be summarized and connected to the context of mental health. Second, the field of social psychiatry will be approached through an overview of the state of mental health in Europe and subsequently led into a discussion of the concept of social psychiatry. Lastly, this discussion will be extended through an in-depth look at social work and mental illness in the context of the current developments in the Danish welfare state. This literature review is by no means extensive, but rather tries to present a logical introduction to the scientific fields of this study, supported by a selective account of research approaching its empirical interest.

2.1 Meaning in Life

Many publications in the field of positive psychology start their introduction to meaning in life with the work of the psychologist Victor Frankl and describe his ideas as the origin of the scientific debate around meaning in life. His excessive work on logotherapy, a psychotherapeutic system that sees lack of meaning in life as the main source of stress and anxiety, was the first approach that actually centred this concept on scientific ground (Frankl, 1964) His unique view on mental disorders and their cure through meaning enhancing practices, led to a psychological movement that is used in therapeutic settings up to this day. To start understanding the concept of meaning in life, one can begin with the broader concept of well-being. Well-being is “a positive and sustainable condition that allows individuals, groups or nations to thrive and flourish” (Huppert et al., 2005). Furthermore, it is traditionally seen as

consisting of a hedonic and eudaemonic component. Hedonic well-being refers to the experience of pleasure and a temporary emotionally happy state of mind, while the eudaemonic component refers to being involved in something larger than yourself. It is this component, which is associated with meaning in life.

Seligman extends this division of well-being by differentiating three types of life pursuits, namely the pleasant life, the good life and the meaningful life (Seligman et al., 2005). The pleasant life mirrors the idea of the hedonic route to well-being, while the meaningful life covers the attributes of the eudaemonic idea. The good life as a third type, creates well-being through the personal pursuit of gratification. Contrary to the limited effects of pleasure, this process requires complete involvement and a long-term commitment based on individual skills. It is strongly connected to the concept of “Flow”, investigated by Csikszentmihalyi (1990) and does not necessarily have to refer to something larger than yourself. The important analytical step within this theoretical perspective is that, in order to live a “full life” with a high degree of subjective well-being or life satisfaction, one needs to utilize all three types of life routes (Seligman et al., 2005). Moreover, the pursuit of pleasure seems to provide the lowest level of contribution, meaning that gratification and meaningfulness are more important and profound when trying to enhance well-being. Baumeister et al. (2013) contributed to this position, by establishing important differences between happiness and meaningfulness and pointing out that meaning integrates past, present and future perspectives, while pleasure is only limited to the present, hence, the assumption is made that meaning might be of greater interest for well-being. The development of positive psychology, which aims at generating or increasing well-being, gave significant attention to the concept of meaning in life. A great amount of research has been established to this day, pointing at ways to increase well-being of individuals, societies and understanding sources and processes of meaning in life of human beings (Snyder & Lopez, 2005). In fact, it is here that the social work profession aligns with this goal as well, which can be seen in its current global definition by the IFSW, where it says that “underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance *wellbeing*” (IFSW, July 2014). Theoretical and empirical implementations of the MIL concept are rather small in the academical domain of social work and therefore this paper is trying to contribute to building a bridge towards this subject. The next chapters will give a more in-depth view on current research and conceptualisations of MIL as a means to grounding the term scientifically.

2.1.1 Conceptualisations of Meaning in Life

As stated before, perceiving MIL is an important factor of well-being and similarly of optimal psychological functioning (Lambert et al., 2013). While this fact is supported by a vast amount of research, experts in the field went even further and tried to answer the question of where and how MIL can be experienced and derived. In this regard, a comprehensive definition of meaning in life first needs to account for all its different dimensions (Martela & Steger, 2016). One such approach is found in the work of Schnell (2009), who defines MIL as an “appraisal of one’s life as coherent, significant, directed and belonging” (p.487). Furthermore, Viktor Frankl was an advocate of the argument that humans inherit a “will to meaning”, which is an inner urge to facilitate meaningful thought and action. He pointed out that meaning is created mainly in interaction with the environment (“Man’s search for meaning”, 1964) and as more recent research is coming along, this statement seems to hold true. The perception of MIL is seen today as an interpretive act on the basis of interactions between individuals and the culture they live in (Crescioni & Baumeister, 2013). In Baumeister’s extensive work “Meanings of Life” (1991), he empirically investigated the so-called “four needs for meaning” on the basis of social interaction and differentiated four components that are necessary for the perception of a meaningful life. These are, in a non-specific order, *self-efficacy*, *self-worth*, *purpose* and *value*. The subjective fulfilment of these aspects is seen as essential to MIL and a lack thereof is associated with various negative outcomes inhibiting well-being. Examples of these are stress (Mascaro & Rosen, 2006), depression (Mascaro & Rosen, 2005) and even psychopathology (Marco et al., 2017). Looking at this body of research, MIL as a component of well-being seems to provide a valuable psychological resource for resilience, since higher levels of meaning also lead to more effective coping mechanisms (Park & George, 2013).

In addition to the four needs for meaning, social relationships and belonging are another important variable for the perception of MIL. The positive effects that social relationships have on well-being were investigated very early on (for example: Klinger, 1977), but the question remained, what exactly it is about relationships that provides meaning for people. Lambert et al. (2013) investigated this essence of relations and its contribution to perceived meaning and found the *sense of belonging* to be the central element. Belonging in this study can be described as being a part of a group or another community, where one subjectively feels to fit in. This new understanding means that it is now evident that not all kinds of relationships are contributing equally to MIL but those who provide a feeling of connectedness and “fitting in” especially do (Lambert et al., 2013). Furthermore, relationships in this sense don’t have to be

purely positive or closely binding, but first and foremost need to fulfil the requirements of belongingness. Perceiving meaning in life is therefore not only dependent on the fulfilment of the four needs for meaning but is also facilitated through certain kinds of social interactions.

2.1.2 MIL and Mental Health

The concept of MIL is deeply entrenched within the research domain of mental health. It has been shown before, how MIL intersects with mental health theoretically on the basis of wellbeing and subsequently this section will now draw on a few selected studies supporting this position with empirical evidence. The large variety of publications in this regard will be reduced to two studies in particular that reflect the current state of MIL-research in the domain of psychopathology, which makes it relevant for social psychiatry. The basis for this is the scientific consensus on the linkage between low perceptions of MIL and psychopathology in general. An early account of this recognition is the 'Purpose in Life Test' (PIL) by Crumbaugh & Maholick (1969), which points towards the possibility of a diagnosable disorder when experiencing low levels of purpose as a dimension of MIL. However, more recent researchers have criticized this approach for its ambiguous structure that seems to include multiple concepts besides purpose into its measurement, such as life satisfaction, and is therefore not exclusive to the assessment of MIL (Mascaro & Rosen, 2006). Despite this problem of reliability, more recent research has advanced its way of inquiry and the connections of MIL to mental health have been widely accepted (Wong & Fry, 1998). Mascaro & Rosen (2006) have taken this notion as a point of departure for their non-clinical study on MIL as a variable for resilience against stress and depression. Since stress functions as an indicator for psychopathological symptoms, the concept of hope was employed as a way to test their hypothesis against a positive item resulting from perceptions of MIL. The findings of their quantitative inquiry suggest that high levels of MIL are positively correlated with hope and negatively with depression, which leads to the conclusion that MIL is an important factor in resilience against psychopathology. This study was deemed congruent with the greater body of literature on MIL and mental health by the authors.

A very recent study by Marco et al. (2017) has investigated the association between eating disorders and low perceptions of meaning in life in a clinical sample. This study is especially interesting, since it evaluated the differences in MIL perception compared to a non-clinical sample as well as interindividual differences in intensity of psychopathology and suicide

ideation. What the authors found was that congruent with literature on psychopathology in clinical and non-clinical samples, participants struggling with eating disorder had significantly lower measurements of MIL (in this case the PIL-test, Crumbaugh & Maholick, 1969). Furthermore, lower MIL correlated with higher intensity of eating disorder symptoms and was even associated with suicide ideation, thus, the implication is that MIL could be a predictor for mental illness and psychopathology.

The two studies that have been presented briefly are just examples from the wide variety of literature supporting the linkage between MIL and mental health (see for example Wong & Fry, 1998). Not only can the subjective perception of MIL be associated with psychopathology in clinical samples, but it also relates to stress as an indicator for the state of mental health in non-clinical samples. The implications of this mostly quantitatively designed body of research, is that the construct of MIL bears potential as a perspective in the treatment of mental illness (Mascaro & Rosen, 2006, Marco et al., 2017). As MIL is a global concept, taking into account the general existential meaning-making of the person, treatment options might benefit from reflecting this by adopting principles of meaning-focused interventions to increase general well-being instead of only reducing specific symptoms. Regarding social psychiatry, this notion is especially relevant as it might assign a special role to it, when considering that MIL is derived in social interaction as discussed previously.

2.1.3 MIL and Social Work

Since this thesis revolves around meaning in life from a social work perspective, it is important to describe where these two domains overlap and how the study is eventually positioned between them. It was earlier stated that social work as a profession by definition strives to enhance well-being (IFSW, 2014). Taking this as a first connection between the two entities, more theoretical applications can be found within the current literature. The MIL concept applied in this study was drawn from the discipline of psychology and is in this tradition mostly found in clinical research (Russo-Netzer et al., 2016; Proctor, 2017). In this domain it is mostly theories of positive psychology concerning MIL that transfer over to clinical social work practice. One example for this would be the adaptation of narrative theory in clinical and therapeutic social work settings, where the ideas of ultimate meaning and spirituality are explored together with patients in order to enhance MIL by building a coherent personal

narrative (McTighe, 2018). Other types of interventions have been published elsewhere (Proctor, 2017).

When looking into the literature of social work theory, one can find that MIL or the concept of meaning in general is usually linked to religiousness and spirituality. Besides specific publications on these two topics, the well-established strengths perspective, as one of the greater theoretical frameworks in the discipline, categorizes spirituality as a resource of psycho-social strength (Saleebey, 2014). The strengths-based approach is a theoretical framework developed in the 80s, which intends to break with pathology-oriented practice by turning towards identification of resources in the lives of service users (Sullivan, 2012). Originating from case management, it requires professionals to “view situations from an entirely different lens” (Sullivan, 2012, p. 180) and to work with and enhance individual strengths instead of purely focussing on individual problems. Spirituality as one of these strengths can be defined in many ways and is often theoretically subsumed under religion completely, neglecting the component of personal, non-spiritual meaning (Mascaro & Rosen, 2006). While this is a significant overlap between social work and MIL research, it is questionable whether subordinating MIL under spirituality and religion, in the way that it refers to a higher entity, does realize its full potential in more secular countries as well (Pedersen et al., 2019). Using the words of Stillman et al. (2009, p. 686), a meaningful life refers to the “way in which people make sense of their existence” and this is associated with many other experiences than the connection to higher entities, such as enjoyment of work (Bonebright, Clay & Ankenmann, 2000) or the sense of belonging in a certain group (Lambert et al., 2013).

The paragraphs above presented theoretical utilizations of the concept of meaning in the social work literature. Finding adoptions of it in empirical research on the other hand is rather rare and only a few recent publications were found to fulfil this criterium. One example of this is a quantitative study by Lin & Shek (2019), where they investigated implications for social work derived from the influence of MIL on adolescents’ hedonic well-being and risk behaviour. The connection between MIL and the strengths approach as mentioned before was used as the theoretical base of the paper and the authors found significant evidence for the positive influence of MIL on youth development leading into adulthood and on recovery potential of clients with mental health related problems. Based on this data, the Lin & Shek recommend the incorporation of spirituality into social work curricula due to its positive potential in social work practice. The argument here is that, if the social work profession can help increase MIL, it likely contributes to better psychological functioning in the future.

2.2 Mental Health Practice

Both facilities that are units for data gathering in this study are part of the mental health support system in Denmark. Furthermore, they are categorized as social psychiatry, meaning that they work with the “social” part of mental illness outside of hospital care (Leff, 2010; Bauer, 2012). The next paragraphs will elaborate on the necessary background regarding mental health/illness and social psychiatry as a means to further contextualize the research question. An overview of important developments regarding mental health in Europe and mental health practice will be given and subsequently led into a brief summary of social psychiatry. Eventually, the context of the Danish welfare state will be illuminated as the background for current social work and social psychiatry practice.

2.2.1 Mental Health and Mental Illness

Mental Health is arguably one of the biggest challenges that the contemporary European society has to face. Rates of depression and anxiety have been rising significantly throughout the last decades and the prevalence of neuropsychiatric disorders was following very closely. Support systems are scarcely provided, and most treatment-needs stay uncovered and disappear in the treatment gap that even highly developed countries of the European Union leave behind. Predictions of the near future don't see an end coming to this development but contrastingly identify potential for this problem to grow in the coming years (WHO European Ministerial Conference on Mental Health, 2005). This is the context that social work is embedded in when one is talking about mental health services and social psychiatry in particular.

The biggest contributors to the mental health situation are the “Common Mental Disorders” (CMDs), which include depression, anxiety, phobias and obsessive-compulsive disorders. Out of these, depression seems to be the highest-ranking cause of disease in the future (WHO, 2001). However, also so-called “severe” disorders, a term that refers to psychosis-like experiences such as schizophrenia, have seen a rise throughout the recent years. Mental illness is as prevalent as never before and in 2005 the WHO stated that out of

“870 million people living in the European Region, any one time about 100 million people are estimated to suffer from anxiety and depression; over 21 million to suffer from alcohol use disorders; over 7 million from Alzheimer's disease and other

dementias; about 4 million from schizophrenia; 4 million from bipolar affective disorder; and 4 million from panic disorders” (WHO, 2005, p. 1).

Many components are playing a role in the explanation of this development. Part of it can be attributed to the societal change that occurred since the post-war history of the continent (Ruggeri & Bertani, 2010). Europe has been in a constant phase of transition, influencing the way of living for many people on a grand scale. Be it the post-war rebuilding of central Europe, the rise and fall of the Soviet Union and also the migratory movements from east to west that occurred through this whole period (Rutz, 2006). The environment in Europe has changed and so have mental burdens. The way in which people conduct their lives, plan and think about the future in the midst of the newly evolved society is different from everything that has been before. Psychological stress through social exclusion, the question of identity and deficits in perception of meaning and coherence as a result, are partly responsible for these developments (Ruggeri & Bertani, 2010; Rutz, 2006). Factors playing into the lack of meaning are losses on an existential level, such as employment, social connections and shared values. That being said, awareness also does play a role in this context. The people most vulnerable to mental illness can be found within the groups of children and adolescents. Moreover, most disabling diseases have their origin in childhood and develop into adulthood. Prevalence rates within adults didn't increase much throughout the recent years (Richter et al., 2019). While self-report rates of depression were increasing, psychiatric problems did not (WHO, 2005), which is an indicator for rising awareness of psychological problems to contribute to the high prevalence rates but also for a potentially great number of untreated cases.

Looking at these developments certainly strengthens the position of social work and other professions in the field of mental health, but it is also necessary to see them critically in the light of their historical and scientific contextualization. The complexity of this starts with the question of how to define mental illness. Mental health is usually defined as the absence of mental illness, meaning the absence of pathology. Pathology comprises physical, behavioural, emotional and cognitive symptoms that are categorized in psychiatric classifications, such as the DSM or the ICD, to name the most influential manuals in the field (Rogge, 2011). What this means is that mental illness refers to patterns of human appearance that are commonly agreed upon as deviating from the norm and therefore require treatment and labelling. In order to further categorize pathologies, it needs be clarified what actually counts as deviating, which is the core of the scientific debate between the model of disorder and a model of distress.

Advocates of the disorder model see mental health as a matter of presence or absence of diagnosed symptoms. In opposition to this, the distress model criticizes this way of “pathologizing” and suggests a continuum approach being applied to the perception of a mental burden (Rogge, 2011). As Rutz (2006) points out, this debate is an ongoing issue in the realm of social psychiatry, where “biological positivistic and humanistic hermeneutic scientific theory” (Rutz, 2006, p.95) are confronting each other. In its essence it is the incompatible nature of biological and social definitions of mental illness that creates tensions between scholars and professionals in mental health practice. Looking at the historical development of psychiatry, the biological perspective has been predominant within the field for a long time, creating an environment where medical treatment and genetic reductionism guided the responses to the mental health problem. The social perspective has tried to balance these efforts by focussing on the *social* components, which can create psychological distress as well as worsen or improve peoples’ lives under these circumstances. Research in this domain has uncovered a lot of explanatory potential particularly in terms of CMDs but is still underrepresented in the field (Rutz, 2006). Mental health is a significant issue for social work in Europe, which gets especially clear through above aforementioned treatment gap. An EU survey from 2003 (WHO, 2005) revealed that between 44% to 70% of people with mental health issues don’t receive treatment in developed countries, which is associated with poor political infrastructure and problems of socio-economic status.

2.2.2 Social Psychiatry

Mental disorders are influenced by biological processes as well as the social environment. It has been established that both aspects play a significant role in the understanding of mental illness and respectively both should have their place in a holistic treatment approach. However, as Bebbington (2010, p. 13) writes, “[..] mental illness is by no means totally social, [but] it is essentially social” and this is the place where social psychiatry enters the field. Social psychiatry doesn’t have a clear definition and differs in its practical application but a general description of it is “concerned with the effects of the social environment on the mental health of the individual, and with the effects of the mentally ill person on his/ her social environment” (Leff, 2010, p. 5). Therefore, institutions of this nature in theory emphasise the social over the biological in treatment and support processes. However, the dominance of the biological discourse in psychiatry has also affected the practice of social psychiatry in various ways since

its establishment in the 50's. As a result, today's context still needs to balance the two components by using biological research to further understand mental illness without being completely dominated by it (Leff, 2010).

Social psychiatry utilizes social interventions to promote rehabilitation and recovery of service users. This kind of approach differs from biophysical and psychological interventions as it is carried out in the community with a holistic focus on multiple components of the person's lifeworld (Warner, 2010). During the past decades, principles to guide these processes have emerged through continuously rising attention towards mental illness. Those ideas are in their essence aspects of a humanistic worldview that were shaped particularly in the service user/consumer movements of the 1980's. They stand for an idealistic version of social psychiatry, giving a basis for work in the purely social domain without the influence of biological and psychological approaches. The current reality of their establishment will be further discussed in a later section on the state of the Danish welfare system, but for now principles of social interventions that emerged throughout the 20th century are summarized by Warner (2010) as based on empowerment, the setting of the community, therapeutic optimism and advocacy for human rights. Having these aspects at the heart of social interventions, treatment in this sense is carried out in a local setting, not in a hospital, with less emphasis on the use of medication and instead a focus on empowering people to get integrated into their social environment as much as possible. This idea is essential as it makes the necessary difference to the medical rehabilitation behind the doors of psychiatric wards and hospitals. Furthermore, it is an aim to aid the service users' rehabilitation by supporting them in coming back to normalized structures such as work and family life. Empowerment in this sector not only refers to the regaining of capabilities but also to the service user – professional relationship, which is supposed to be as equal as possible. The notion of therapeutic optimism strengthens this process by turning away from a problem-centred perspective and towards the possibility of living a life with mental illness successfully. Lastly, on a community level it is also called for the strengthening of human rights, since people that struggle with mental illness by definition belong to a marginalized group of people. Inclusion through raising awareness, education and the fight for the people's voice are inevitably connected to the aim of recovery (Warner, 2010).

Eventually the model of social rehabilitation has emerged to confront the paternalistic structures established through the dominance of the biological approach and in-hospital treatment. In Denmark in particular, this led to the process of de-institutionalization and the change from inpatient to outpatient treatment, promoting the establishment of community-psychiatric approaches (Bauer, 2012; Hansen, 2008). On the one hand, this can be seen as an

accomplishment of the liberation movements from the 1980's, but on the other hand, it is also related to the emerging neo-liberal welfare paradigm that has influenced the reality of social psychiatry and its rehabilitation principles (Ringø & Høgsbro, 2017). Those structural changes and their effects on social work practice in the field of mental illness are the focus of the next section.

2.2.3 Social Work and Social Psychiatry in the Danish Welfare State

Social services in the mental health sector are inevitably influenced by the dominant understanding of mental illness that the current welfare state adopts. Hence, the developments of welfare in Denmark are a necessary context to describe when it comes to research in social psychiatry. In the last few decades, social welfare has made a turn towards individualized services, oriented along the values of independence, personal responsibility and measurability. These developments can be subsumed under the neo-liberal paradigm (Ringø & Høgsbro, 2017). The previously discussed notion of empowerment, which was established in the 80s as a means of reducing power asymmetries through social change, was directly affected by this change and altered in its agenda. The new discourse understands empowerment as the promotion of self-reliance and individualization instead of the democratic emphasis on shared power (Andersen, 2018). Put differently, the neo-liberal policy framework has transformed the empowerment perspective of freedom through liberation into freedom through independence from social support. This does not mean that all psychiatric practice is completely governed by this discourse, but it has to be acknowledged as the dominant tendency in social welfare today. One outcome of this new agenda was the de-institutionalization of social services in the mental health sector that hugely influenced the landscape of psychiatry. This development was basically a means of achieving decentralized services oriented towards individual needs and local communities (Ringø & Høgsbro, 2017), resulting in increased outpatient treatment (Bauer, 2012). Critics argue that it simultaneously produced a dominating focus on individual responsibility (Ringø & Høgsbro, 2017).

Another aspect of the new paradigm concerning mental health practice is the focus on measurability. One of the most dominant tools in the mental health domain in this regard is the categorization of psychopathology through manuals such as the DSM-V or ICD-10. As pointed out before, the DSM-V is a categorization of symptoms into patterns of disease that inform decisions of professionals in the field. The dilemma within this context is again based on the

tension between social and biological factors, as it doesn't account for the unique background of life-worlds but instead focusses on the black and white disorder model (Ringø & Høgsbro, 2017). These characteristics make it an efficient contribution to the neo-liberal frame, since it enables the system to measure levels of functionality and prescribe treatment and social services accordingly. Besides its stigmatizing effect, which runs contradictory to the original principles of social psychiatry, the perspective on mental illness that is created in the process is often criticized as superficial (Ringø, 2012). It rejects what Ringø (2012) calls the depth-ontological view on human beings and therefore avoids looking at the interplay of underlying structures including the social dimension. It acts instead based on post-ontological evaluations, looking at the visible and one-dimensional appearance of mental illness on the surface.

Lastly, neo-liberal welfare also influences the way in which professionals design intervention processes. Congruent with the focus on responsibility and individualization, practice in the field of mental health employs psycho-educative practice (Ringø, 2013). This framework orients practice towards supporting service users in coping with their mental illness and training them in self-regulation. The desired outcome of this is that service users are better equipped to fit into the society and achieve a level of active participation. This educative method aligns with the individualized focus of social services that aims at independence and tends to neglect other underlying structures of service users' lives (Ringø, 2013).

3. Methodology

The first half of this chapter describes the philosophical and methodological structure guiding the present study. It will begin with a general overview of the research design, presenting its components and the process of its development. During this, a special emphasis will be placed on the philosophical/epistemological standpoint and its reflection within the adopted methods of inquiry. Second, the process of data collection will be described in detail and eventually linked to the method of data analysis. Subsequently, the second half of the chapter is dedicated towards methodical reflections in order to make the research process more transparent and comprehensible. It will provide a deeper insight into the thought process behind personal positioning, the qualitative empirical approach towards the concept of meaning in life and lastly ethical considerations when doing research with people in social psychiatry.

3.1 Research Design and Methodological Considerations

The initial research interest of this thesis was centred around the influence of social work collaborations on meaning in life of service users, without further clarification of a specific target group, since possibilities for access to the field in Denmark were not foreseeable at first. Throughout the time spent in Aalborg and especially an internship organized by the university, it was possible to gain an insight into the work of a social psychiatric facility and furthermore, to connect this to a small-scale research project. The project work, which was completely concerned with a different topic, eventually sparked an interest in the field of social psychiatry for this thesis, due to the interviews and observations that were strongly resonating with aspects of meaning in life. From this point on, a first field access was created and therefore the research question was finally narrowed down to social psychiatry in the municipality of Aalborg. In this context it was then decided to use the already collected data as a starting point for further investigations in the same facility, using a longitudinal approach to the new research question. As the results of the beforementioned small-scale project were getting visible, it also became clear that social psychiatry interventions in Denmark can take on very different forms when it comes to the organization and orientation of social services. To account for this, it seemed appropriate to include a broader range of perspectives into the study by accessing a second field within the frame of social psychiatry, that would potentially deepen the understanding of the phenomenon, increase the degree of diversity and overall strengthen the base of the study (Shaw

& Holland, 2014, p. 12). This second access was found in the “Kildehuset” in Aalborg, which represents an independent Fountainhouse facility organized through the Clubhouse International Organisation.

The general nature of this study can be described as an ethnographic fieldwork within the domain of qualitative social work research. According to Denzin and Lincoln (2011), “[...] qualitative research involves an interpretive, naturalistic approach to the world. This means that qualitative researchers study things in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them” (p. 3). The natural setting in this research project is defined as social work practice in social psychiatric facilities in Denmark. In accordance with this quote by Denzin & Lincoln (2011) the framework of this project adopts an interpretive approach in a constructionist tradition. The knowledge that is derived from this inquiry is therefore seen as a contextual understanding of reality, based on subjective meaning-making and its social reproduction (Spencer, Pryce & Walsh, 2014, p. 85-86; Shaw & Holland, 2014, p. 6). Thus, truth is acknowledged as a matter of subjective experience (Harrison, 2014). The epistemological standpoint follows the notion of social construction by emphasizing the collaborative nature of research, where it “[is] seen as being actively constructed by the researcher and participant, who exert mutual influence on one another”. Furthermore, “[...] the dynamic interaction between the researcher and participant is viewed as central to capturing the inherently contextualized experience of the participant” (Spencer, Pryce & Walsh, 2014, p. 83). In this sense, the researcher is gathering relevant data as a result of a co-productive process, revealing information about collaborations between service users and practitioners in the social psychiatric facilities. Another critical element in the production of data is the researchers own subjectivity that also influences the inductive nature of data analysis. Preconceived thoughts are acknowledged and seen as an inevitable part of interpretive processes (Harrison, 2014). Instead of being bracketed, they are part of the social construction of data and need to be made transparent wherever possible to adhere to the idea of ‘good’ research.

Having two facilities as units for the data collection, I decided to use an ethnographic approach to the fieldwork, relying on participant observation supported by informal interviewing and individual semi-structured interviews. This approach seemed suitable, since the project was planned as an exploratory inquiry into the influence of social work collaborations on meaning in life of service users in selected social psychiatric facilities. Therefore, it is supposed to deepen the understanding of work practices and their effects in a specific setting. Originating from anthropology, the ethnographic methodology has a long tradition in social sciences and

experienced increasing attention in social work research during the last decades (Jones & Watt, 2010). Applied to the context of the study, it seeks “first-hand experience and exploration of a particular social or cultural setting on the basis of (although not exclusively by) participant observation” (Shaw and Holland, 2014, p. 182). An ethnography is not a research tool but a methodology, which implies a certain mode of inquiry and a certain kind of data handling (Harrison, 2014). While the mode has been described above, the approach to the data can be understood through the work of Geertz (1973), who describes the favourable outcome of such a project as a “thick description”, which is the result of an interpretive effort. It means to avoid producing rather dissolute writings, but instead to develop and share an in-depth understanding of the social setting one is emerged in (Shaw & Holland, 2014). When looking at the present study and its depth, it needs to be taken into account that due to the scope of this thesis the ethnographic fieldwork was limited to a duration of approximately three months.

Participant observation and informal interviewing as the main methods of inquiry were found suitable for the field of social psychiatry, due to the unique life situations that people in this area are facing. This process was not only chosen based on ethical considerations (see section 3.4.3) but also presented itself as a much more effective way of sparking interesting conversations with the service users than formal interviews. This reflection is based on the comparison between the semi-structured interviews from October, which were relatively short and consisting of brief answers, and the newer data from February and March, which were overall richer in detail. In using this method, barriers such as the problem of anxiety in formal interview situations have been avoided. Wherever possible, interviews have been recorded and conducted in semi-structured fashion, which was eventually mostly done with employees and social workers. Informal interviews were captured in fieldnotes. Following Delamont (2004), participant observation is a traditional part of ethnographical research and characterised by a combination of observation and interviewing. Its intent is to study the experiences and the overall life that the people are living, to the degree that the researcher can “feelingly” conceptualize what he or she observes. “This is done by living with the people being studied, watching them work and play, thinking carefully about what is seen, interpreting it and talking to the actors to check the emerging interpretations” (Delamont, 2004, p. 206). In this regard it needs to be said that the actual character of this participation is more so an interaction with people while they are living their everyday life than an attempt to live it with them. For the facility Kraftværket this means that I usually acted as an observer during the activities and involved myself actively in conversations afterwards. At the Fountainhouse I had a more active

role of participation, while always making sure to keep my focus on observing instead of taking on tasks.

The so gathered data was collected in very detailed fieldnotes. As Shaw & Holland (2014) point out, this is usually the main method for data generation in ethnographies and was implemented as such. Fieldnotes were usually done either during the fieldwork as small notes or as a recap at the end of the day. Furthermore, they were organized into observational and analytical notes (Schatzman and Strauss, 1973), in order to separate written quotes and observations from thoughts relevant to analysis and discussion of data. The content of informal interviews was usually written immediately afterwards to allow for richer detail and had the form of verbatim quotes as well as general themes. In addition, I kept a field journal, where I briefly summarized the daily happenings. Fieldnotes are a very common method in ethnographic research. They are generally an interpretation of reality facilitated by the self of the researcher, which ties back to the philosophical underpinnings of an interpretive framework (Shaw & Holland, 2014). In this way they are very valuable in producing what Geertz (1973) calls a “thick description” but are also a selective account, as it is not possible to write without interpretation (Shaw & Holland, 2014).

Complementary to participant observation and informal conversations, formal interviews with service users as well as social workers were used to add guided conversations with the option of verbatim recording to the data material. Those individual, semi-structured interviews have only been done at Kraftværket, utilizing different interview guides for professionals and service users (Appendix 3,4). In this way, the research intention was specifically guided towards the conceptualizations of meaning in life and social work and it was attempted to increase the overall quality of the project through the use of multiple qualitative methods (Shaw & Holland, 2014, p. 94).

3.2 Data Collection

As stated before, several methods of data collection have been used within this study. First, already existing interviews based on a semi-structured interview guide from the preceding small-scale research have been re-utilized due to their very valuable content concerning the new research interest. Those have been accessible in form of written transcripts. Second, the main part of the data was generated from participant observations and informal conversations

captured in fieldnotes. Third, additional informal conversations with two employees at the Fountainhouse have been audiotaped and transcribed verbatim.

3.2.1 Data Sources

The first set of data was generated from participant observations and semi-structured interviews done throughout the month of October 2019 in the facility “Kraftværket. In total, five interviews have been conducted in collaboration with two employees and three service users. Starting with the official semester of the master’s thesis, the same methods with the main focus now being participant observation have been used in both, “Kraftværket” and the newly accessed facility “Kildehuset”. From the end of February until the third week of March 2020, approximately one day per week has been spent in the former and two days in the latter facility. The overall timespan used to conduct the ethnographic fieldwork therefore was about three months in total. Throughout this time two informal conversations have been recorded with employees of the Kildehuset, while extensive fieldnotes were gathered describing the verbal accounts of many service users in the field.

3.2.2 Sample and Data Gathering

Interviews and participant observations were conducted individually inside the facilities Kraftværket and Kildehuset, which are both situated in Aalborg. The former is part of the municipalities department for “handicapped and elderly people”, while the latter is a private organization that only gets funding for rent and salaries from the state department. Contact to Kraftværket was established through the University and later carried on as my own responsibility. The facility Kildehuset was contacted by me via email.

Social Worker & Employee Interviews

As mentioned before, in total two interviews and two informal conversations have been recorded with employees in the field. These were scheduled wherever they seemed to fit into the daily activities of the institutions and conducted either in a semi-structured manor or as a scheduled meeting. Out of the four participants, two have been educated social workers, while the others had a teaching background and worked in the same position besides having

administrative leading tasks. The interviews lasted approximately an hour and were either led by the interview guide or structured by a few initial questions and then carried on according to my own and the participants interests. This led to a fluent conversation with a lot of ad-hoc questions lasting approximately an hour each.

Overview:

Interviewee (Pseudonym)	Form
Barbara, Leader of the Kildehuset	Informal conversation
Ronja, Social Worker at Kildehuset	Informal conversation
Sebastian, Social Worker at Kraftværket	Semi-structured
Jürgen, Teacher at Kraftværket	Semi-structured

Service User Interviews

Three semi-structured interviews with service users in the same fashion as described above have been conducted in the facility Kraftværket. They lasted each between 20 and 40 minutes. Contact in this case has been established beforehand through the employees, who tried to find people that were willing to participate and have also spent a longer time in the facility. Due to ethical and practical considerations mentioned previously, formal interviews weren't conducted at the Kildehuset. Therefore, verbal accounts of service users concerning the same phenomenon at the Kildehuset were summarized in detailed fieldnotes.

Fieldnotes

As mentioned above, fieldnotes were the key to the collection of service users' perspectives. They didn't only contain my perspectives on observations, but also detailed written accounts of narratives and information given by the service users in both facilities throughout March 2020. Those accounts were combined with my own interpretations and subsumed on pages dedicated to the specific persons. Additionally, a journal keeping track of every single day spent in the institutions and analytical fieldnotes were kept separate as a method of reflection.

3.3 Data Analysis

The data analysis is like every other element of the methodology shaped by the philosophical standpoint of the researcher (Braun & Clarke, 2006). As Shaw & Holland (2014) point out, qualitative methods do not gather data from the field that is then to be evaluated by a rigid analysis strategy, but, on the contrary, the data is first and foremost produced by the intervention of the researcher. Moreover, data analysis in the context of an interpretive framework is essentially an interpretation of reality, following the notion that objective truth can never be attained. The process of constructing this interpretation lies at the heart of the qualitative method and is the place where the data comes to life. While traditional quantitative aspects of quality assurance cannot be applied in this study, there are alternative criteria that guide qualitative research. The three major components that are necessary to include in this regard are reflexivity, triangulation and transferability (Treharne & Riggs, 2014). Looking at other researchers adopting an interpretive frame, Lincoln and Guba (1985) integrate reflexivity and transferability into the concept of trustworthiness as the major criterium. While triangulation has been discussed earlier through the variety of data units, the importance of reflexivity gets evident in the process of data analysis. Especially in an ethnographic fieldwork, where the fieldnotes already are a product of the researcher's perspective on observations, transparency of thought in the ongoing process is necessary. In this sense quality is assured by clarifying the way in which the interpretation has taken on its form. To account for this criterium, a complete section on methodological reflections will follow below.

Additionally, the aspect of transferability needs to be explained, as it doesn't mean to strictly generalize from the study's findings on to the rest of the empirical world, but to be able to position it within the bigger picture. The question that needs to be focused on in this regard, is whether the findings are authentic and would resonate with other people from the field reading it (Treharne & Riggs, 2014).

Coming to terms with the actual method of data analysis, a thematic analysis was chosen based on its flexibility towards epistemological considerations and various kinds of data. This is especially useful when identifying patterns or themes across different kinds data (Braun & Clarke, 2006). While there are many scholars presenting different ways of using thematic analysis methods, Braun & Clarke (2006) suggest a six-step analytical procedure, which has been adopted in this study. The process included the analysis of the total data set comprised of interviews and fieldnotes covering conversations and observations. The six steps within the reflexive TA are summarized as follows: (1) *Familiarizing yourself with the data*; (2)

Generating initial codes; (3) Searching for themes; (4) Reviewing themes; (5) Defining and naming themes; (6) Producing the report (Braun & Clarke, 2006, p. 87).

Due to the mentioned flexibility it is important to clarify the exact methodological choices that I have made in order to promote transparency, which is what the term reflexive in the methods name stands for. Those decisions were guided by the interpretive framework described in the beginning of this chapter and an inductive approach. This means that in the analysis it was generally looked at the data concerned with meaning in life (in form of its three meanings, see 3.4.2) as a whole rather than a specific aspect of it and from there codes and themes were developed without a theoretical lens. In this way, the data itself revealed what was most meaningful about social work collaborations in social psychiatry and not a certain theoretical system. Four themes have emerged that consist of further subcategories comprising all codes found relevant to meaning in life in the data. Those themes have been coded on a conceptual basis, meaning that they are reflecting the data not on a semantic but on a latent, interpretive level. The theoretical background used for the discussion of the findings was to a great degree approached after the data analysis to avoid generating more preconceptions and adhere to inductivity.

3.4 Methodological Reflections

As a guide for quality in this study, the concept of trustworthiness comprising the elements of reflexivity and transferability has been identified as essential. This section is dedicated to the establishment of transparency regarding the thought process behind this project, which in return gives an account of the my own reflexivity. The following reflections concern the areas of personal positioning, the scientific application of the concept meaning in life and ethical considerations.

3.4.1 Pre-understanding of the field

To contribute to transparency in this study and reflect on possible biases, this section is dedicated to my pre-understanding of the field and my “discursive situatedness in the social world” (Fremlova, 2018, p. 101). Culturally, I consider myself (as a German) not significantly different from the Danish people. In my view there are a lot of overlaps between our welfare

systems and as European neighbours we share similar social problems. This means that I'm familiar with the social environment, which could potentially be a disadvantage in the sense of being too used to it when studying the social world. I'm a trained social worker without much work experience, since I'm only 23 and started my master's degree right after finishing my bachelor. Furthermore, I don't have specific experience in social psychiatry, which means that I would consider myself less biased when it comes to the observation of this practice field. On the other hand, this could also mean that I might miss important dimensions of practice in my investigation that I have not yet experienced. Lastly, coming from a social work perspective, I do share the opinion that the profession is a valuable source of social life and has great impact on peoples' well-being. This attitude, probably mixed enthusiasm towards practice, might influence the way in which I interpret data, resulting in a view more focussed on beneficial than negative aspects of social work.

3.4.2 Investigating “Meaning in life”

One of the most challenging parts of this project has been to reflect on the process of how to investigate the concept meaning in life in an inductive and qualitative fashion. Meaning itself is a social and cultural product that reflects one's individual experience of meaningfulness (Crescioni & Baumeister, 2013). In this sense it is an interpretation of actions and experiences that leads to meaningfulness, which is a vague concept for an empirical approach, since basically everything can be of meaning. MIL does not only refer to meaning of any kind but the existential dimension of it. Looking at the field of psychology, where the application of this concept in research has been studied in-depth, the definitional ambiguity and variety has led to a great confusion about what the construct meaning in life actually consists of (Martela & Steger, 2016). This can be seen in the great amount of different psychological scales and general research applications that are utilized to assess MIL. Moreover, researching meaning itself without further dimensions has been criticised as a reductionist approach, neglecting the different components that the concept is built upon. Martela & Steger (2016) state that MIL research “aims to look at the subjective experiences of human beings and asks what makes them experience meaningfulness in their lives” (p. 532). However, the answers to this can be manifold, as for example the SoMe-Questionnaire presented in the literature review with over 26 items showed (Schnell, 2009).

To design this study, the following question needed to be resolved: What does research ask for when investigating MIL? A broad answer to this is: Everything within the relationship of culture and individuals that can possibly lead to existential meaning (Crescioni & Baumeister, 2013). To get more specific, I used the comprehensive article by Martela & Steger (2016), where the authors differentiate three essential meanings of MIL that psychology research seems to agree upon. These are coherence, significance and purpose. All of these concepts are dimensions of MIL that in totality build a comprehensive approach to its investigation. The data analysis of this project will therefore focus on data concerned with MIL along these three core concepts. To clarify these terms further, coherence refers to MIL as the feeling that one's life makes sense in itself, which incorporates a cognitive component of understanding one's life (Reker & Wong, 1988). In addition to this, significance, according to Martela & Steger (2016), is identified as feeling that one's life is of value and importance, embodying less of a cognitive but more sensual experience of existential meaningfulness. Lastly, purpose means the ability to connect the current situation of one's life with meaningful goals going into the future. To prevent the discussion section of this paper from ambiguities, I'm going to refer to purpose as the perception of directedness in accordance with the definition of MIL by Schnell (2009). The reason behind this is that Baumeister (1991) has used the exact term purpose as part of his theory on the four needs for meaning, which will be part of the theoretic contextualization. With this trinity of dimensions as a basis, the coding process during the thematic analysis focusses on identifying data concerned with perceptions of meaningful lives along the concepts of coherence, significance and directedness and includes a connection to the influence of social work collaborations.

3.4.3 Ethical Considerations

As ethics are an inevitably important part of qualitative research, this entire section will be dedicated to a few specific ethical issues concerning investigations in social work and social psychiatry that shaped the outline of this project. First and foremost, I did not have to apply at a board of ethics or data security for the conduction of my project. However, other considerations needed to be made in advance to adhere to general ethical guidelines for research and to protect the people involved. Social work is a profession that by definition deals with marginalized groups of people and therefore, in some way, all its service users have an element of vulnerability in common (Shaw and Holland, 2014). Ethics are first and foremost

implemented to protect the participants of a study and others who could be affected by it from harm. To ensure that this is sufficiently done in my direct contact with service users, I reflected upon the six key principles of research ethics by the ECSR that Shaw and Holland (2014) suggested as an appropriate guideline and designed my process of data collection accordingly.

- 1. Research should be designed, reviewed and undertaken to ensure integrity, quality and transparency.
- 2. Research staff and participants must normally be informed fully about the purpose, methods and intended possible uses of the research, what their participation in the research entails and what risks, if any, are involved.
- 3. The confidentiality of information supplied by research participants and the anonymity of respondents must be respected.
- 4. Research participants must take part voluntarily, free from any coercion.
- 5. Harm to research participants must be avoided in all instances.
- 6. The independence of research must be clear, and any conflicts of interest or partiality must be explicit.

Shaw and Holland (2014, p. 102): Adapted from ESRC (2010: 3)

Bearing this in mind, I decided to use participant observation as my main approach to the fieldwork, since it gave me the best possible access to the field of social psychiatry in my opinion. Many service users in this field struggle with depression, anxiety and other symptoms that build an obstacle to their potential for socializing. Because of this, formal interviews did not seem appropriate to me as they could lead to greater stress for some of the participants. Instead, the informal conversations were a successful way of getting closer to the people without causing distress, which was reflected in the greater amount of detail that I got from informal conversations compared to interviews. It is important to mention that informed consent for my actions was given at all times, my role as a researcher was disclosed every day of my fieldwork and I always asked the service users whether I was allowed to participate in more private settings. Fortunately, I was always warmly welcomed and never ran into any obstacles that prevented me from getting access to information. All formal interviews have been conducted with written and verbal consent, while the informal interviews were always initiated after receiving verbal consent.

4. Findings and Discussion

Four key themes emerged during the inductive thematic analysis (Braun & Clarke, 2006) that reveal answers to the research question of how social work collaborations in social psychiatry influence service users' MIL. These four themes are *professional collaborations vs. lost connections*, *professional relationship*, *meaningful community* and *meaningful occupation*. They have been identified by coding and thematically grouping data concerned with meaningfulness along the dimensions of coherence, significance, and directedness, which were discussed as an appropriate approach to the investigation of perceived MIL in chapter 3 (Methodology). The key themes therefore reflect meaningfulness in the context of collaborations investigated in the two social psychiatric facilities Kraftværket and the Fountainhouse. The first theme "*Professional Collaborations vs. Lost Connections*" was identified in the analysis as a general mechanism that describes the central finding of social work collaborations acting to enhance meaning in life by combatting the negative effects of social exclusion. It focusses mainly on the *lost connections* within the social spheres and describes their diminishing effect on perceived MIL. The other key themes are three different kinds of *professional collaborations* that have been found essential to the meaning enhancing qualities of social work in this study. In this sense, the first theme explains the finding of MIL being diminished through social exclusion, while the other three elaborate on how social work enhances MIL in three distinct types of collaboration.

4.1 Professional Collaborations vs. Lost Connections

The theme "*Professional Collaborations vs. Lost Connections*" emerged with three subthemes, *private relationships*, *community participation* and *goals*. It expresses the finding that social work collaborations were found to enhance meaning in life by working against the depriving effects of losing social connections. As this mechanism of losing connections was found to be happening in thematically different areas of the service users' lives, the subthemes emerged to embody those areas and differentiate them from each other. The dominant challenge in the data to service users' perceived MIL was their exclusion from social life, which was seen in the loss of friends and family, stable networks, opportunities for contribution and life goals. The way this was analysed, was by grouping codes according to the opposites of significance,

directedness and coherence, leading to codes about absence of value, aimlessness and uncertainty (Martela & Steger, 2016).

For many, the loss of family relationships has been a struggle coming with the onset of mental illness. *“Sometimes...lot of our members has family but doesn’t have any contact with them any longer, because it’s just messed up. It has been too tough.”* (Barbara, line 22-24). Furthermore, often times there hasn’t been a replacement of those relationships until the people came to the social psychiatry facility. *“So, you know that you have...a lot of our members are saying that this is like having an extra family. Or this is having the family I don’t have anymore.”* (Barbara, line 13-14). One of the social workers pointed out how the clubhouse can take over this role of a replacement in different ways and alleviate the negative consequences of losing those connections that lead to perceptions of insignificance and aimlessness:

“They are losing connection and the clubhouse is some kind of replacement for that. It’s a place where you can return to, you can have meaningful tasks. You can have a daily life with structure, something that matters. It matters if you are here, if you are not here.” (Barbara, line 28-30)

This quote clarifies the elements of life that service users were perceived to be missing related to a meaningful life. The expression *“It matters if you are here”* is essential to this interpretation, as it reflects how people on the one hand build relationships that make them perceive significance and on the other hand how the opportunity to matter in a community context, here the work-ordered day, is given. Seen this way, the loss of connections and its alleviation through social work emerged in the analysis as having direct influence on service users’ MIL. Furthermore, it was found within private relationships as well as the larger frame of the community. Additionally, observations and conversations in the field showed that service users were largely disconnected from goals and life aspirations, as a reflection of aimlessness. They either did not have goals for themselves anymore or did not know how to approach them:

“Or for example M., he said in his assessment that he just wants to have a girlfriend and a car, but it’s hard for him.” (Fieldnotes: Sebastian talking about service user Martin)

The basis for this emergent theme was that people were either reporting about losing the connection to sources of meaning that make them feel significance, coherence and directedness or talked about finding those within the offers of social psychiatry.

The efforts of social work in the field were strongly connected to the loss of connections. In fact, most forms of collaboration that have been observed were either directed towards combatting its negative effects or at least partly did this as a side-effect. “*Professional collaborations*” was chosen to name this theme, due to the fact that many different kinds of work processes between practitioners and service users were observed. It describes the influence of social work that took place on the same three levels differentiated in the subthemes and aimed at alleviating the consequences of *lost connections*. As mentioned in the quote above, the social psychiatry facilities were seen as a replacement for the missing components associated with meaning in life and simultaneously as trying to restore peoples’ access to them. Social workers in this regard were aiming to bridge the gap between the service users and the social demands they could not fulfil:

“I think by of course by using this place as a training field. To try to...but still we have to be eh...If I wanna change, I have to be aware of where my difficulties is and I’ll have to [have] someone [...] to point it out for me because [...] every people will have difficulties by having eh being focusing enough on things ehm so [...] What I’m bad at or not doing very well, I will compensate in that but if I have to...maybe I will be able to compensate for that. (Sebastian, line 388-394)

The social worker in this quote was expressing how his work is meant to be a training field for the service users to practice socializing and other necessary skills, which eventually should help them to cope with demands of the society. Examples of the collaborations that were established to accomplish this were one-on-one relationships with service users, the establishment of regular groups and a community and personal support in meeting the work as well as living requirements of the society. These different modes of collaborations are covered in the three key themes following hereafter.

4.1.1 Theoretical Connections to Social Exclusion and Meaning in Life

Before we get into the subthemes elaborating on the different levels of social life, where professional collaborations were found to be combatting lost connections, a theoretical background needs to be discussed to get from a mere descriptive to an analytical perspective. To this end, I have chosen the theoretical concept of social exclusion to further understand the data-driven theme *lost connections*. It accounts for the fact that people have lost the connection to resources of social life and its shared belief systems on different levels, which in return diminishes the perception of life quality (Taket et al., 2009). Looking at the literature on social exclusion, Taket et al. (2009) point out that it is a contested concept with a variety of definitions and applications in the literature. However, broader definitions like the one below present a wider perspective to look at the finding in this chapter from a theoretical standpoint.

“Social exclusion is a complex and multidimensional process. It involves the lack or denial of resources, rights, goods and services and the inability to participate in the normal relationships and activities, available to the majority of people in society, whether in economic, social, cultural or political arenas. It affects both the quality of life of individuals and the equity and cohesion of society as a whole”
(Levitas et al, 2007, p. 9).

Building on this, Taket et al. (2009) developed a model of social exclusion that includes a wide variety of current research results and definitions to account for as many of its aspects as possible. Three different levels of exclusive relations are differentiated in this model, which are all interrelated. Those are the individual, the community and the societal sphere. Moreover, in close relation to the quote above, the model describes social exclusion as affecting different dimensions of life, such as employment, education, health and welfare etc. What social exclusion does, is to “prevent people from participating in the mainstream activities of society and accessing the standards of living enjoyed by the rest of society” (Taket et al., 2009, p. 10). The lost connections in this study can be seen as examples of this, since participants in the field have reported about service users’ exclusion from having valuable private relationships, participation in their community and fulfilling shared goals of the mainstream society such as regular employment.

On society:

“[...]and maybe that’s what happening when these people eh our people is our citizens are going out in the normal society. Then [the bad behaviours] are popping up and the normal society would not say ok, I will help you to train. They say ok, I don’t want you here, you can’t be here.” (Sebastian, line 397-400)

Prevention from access to those “standards of living enjoyed by the rest of society” and reduced quality of life build the bridge from social exclusion to the literature on MIL. Seen from this angle, standards include social sources of meaning that are accessible to the mainstream and strengthen quality of life. Social exclusion restricts access to those sources and has therefore a diminishing effect on the perception of MIL. A scientific account for this can be found within the research of Baumeister (1991) and Stillman et al. (2009). Besides others, Baumeister (1991) stated that MIL is generally derived from social interaction, which he then conceptualises through the four needs of meaning as described in the literature review of this paper. An exclusion from social interaction should in return diminish peoples’ perception of a meaningful life, which was the hypothesis of a 2009 study by Stillman et al. The researchers investigated the diminishment of meaning in four different settings and came to the conclusion that social exclusion is affecting the perception of MIL negatively on a global scale along all four needs. Therefore, the four needs for meaning present a valuable perspective to analyse the influence of social exclusion on MIL, which will be applied to the discussion in the upcoming sections. They basically function as a theoretical fundament to the perceptions of significance, coherence and directedness investigated in this study. Additionally, the need for relationships and belonging needs to be added to the framework, since it reflects the pursuit of social interaction in favour of satisfying the essential needs (Baumeister, 2005). Those four needs for purpose, efficacy, value and self-worth, supplemented by belonging and connected to the social exclusion model by Taket et al. (2009) will be the theoretical lens for the in-depth description of the three data-driven subthemes *private relationships*, *community participation* and *goals*.

4.1.2 Private Relationships

The subtheme *private relationships* describes the loss of connections concerning close relationships and family, which was found to have a negative effect on perceptions of significance as a component of MIL. Integrated into the social exclusion model by Taket et al.

(2009), this finding would be positioned within the sphere of individual experience. Social workers were reporting that the one thing that almost all members new to the Fountain House were wishing for in their first assessment, was to get to know people:

“Because if they say well, I would like to be a really good painter and I would like to knit...I would say: I think I know a place where you can do that but here we are more work oriented. But most of them say that they would like to know people.”
(Ronja, line 374-376)

Therefore, the pursuit of social interaction beyond superficial contact was the most meaningful goal for some. Many people were living alone and/or lost contact to family and friends with the beginning of their mental health struggle, which led to the highly prevalent result of social isolation and loneliness within this group of people (Elisha, Castle & Hocking, 2006). Professionals such as Barbara said that it is often due to the complications that come with mental illness and the fact that a person suddenly changes character in a way that other people are not able to cope with:

“If you are a parent, you are really worried for your child, if you are trying to help and well, you can say the illness has taken over the person, the person you knew once. Sometimes if a person gets very psychotic, it’s kind of another person and perhaps the psychotic person works against what’s against what’s actually good for them. So, it can be really tough and cause a lot of conflicts. Sometimes...lot of our members has family but doesn’t have any contact with them any longer, because it’s just messed up. It has been too tough.” (Barbara, line 18-24)

From additional conversations recorded in fieldnotes, it was evident that the loss of family often has not been compensated through new relationships. This individual exclusion left people without the resource to feel significance to somebody in a nuclear family frame. Furthermore, it diminishes opportunities to fulfil the needs for meaning as described by Baumeister (1991). Besides this, people also lose connections to social activities and simultaneously avoid them to escape uncomfortable situations caused by their personal mental health struggle. Rita for example talked about this vicious circle of getting excluded and self-exclusion by losing the ability to socialize as social gatherings get too difficult to bear. *“Rita told me how much he*

struggles with getting out into the public, which is part of his illness. It's much easier to just stay at home, because nothing good awaits him outside." (Fieldnotes, talk with Rita).

Another example of these individual experiences from the fieldwork was the regular participation in the open Sunday meetings of the Fountainhouse. Here, the setup was nothing more than an open door, a living room and the plan to eat a meal together. This is something that looks like a normal weekend at home to everybody else, but people are coming regularly on this day, even when they have families at home, to be together and sit in silence, read newspapers or play card games. It felt *„pretty much like a normal Sunday afternoon with „friends” with a little less communication“* (Description and quote based on fieldwork journal, 08.03.20).

A quite similar setting occurs in the facility Kraftværket, where those types of get-togethers are facilitated as well. The social workers' opinions on this go hand in hand with reports of the service users, pointing out that many people have lost personal connections or were never able to build them in the first place and find these now in the offers of social work in social psychiatry. The fact that people are voluntarily showing up on this day, besides having family, supports the idea that it is meaningful for them to be together with the people in this place. One of the interviewees at Kraftværket expressed this by saying that *“togetherness”* is the most meaningful thing for him in the context of the institution's work (Interview Michael, line 316). The relationships built within the facilities present a chance to strengthen the individual's perception of MIL by feeling belonging and significance on a personal level, which seems to be realized by many of the service users: *“...a lot of our members are saying that this is like having an extra family. Or this is having the family I don't have anymore.”* (Interview Barbara, line 13-14).

Following Taket et al. (2009), the experience of exclusion at the individual level is derived from the absence of resources to act out agency (social capital). In their view, this is dominantly a matter of the excluding factor, in this case mental illness, being an obstacle to education, work and financial independence. While these dimensions will be part of the next subtheme, the important factor described here was the exclusion from private relationships, which the authors consider in the concept of social connectedness. Social inclusion in their view does not necessarily presuppose connectedness but it is a phenomenon going alongside it. However, social connectedness in this study was found to be essential to the perception of exclusion and MIL. The sense of self-worth, which is one of the four needs for meaning (Baumeister, 1991), is similarly essential to the understanding of MIL diminishment in this context. Feelings of self-

worth were found to be inhibited by the restricted access to social interactions (Stillman et al., 2009), since positive self-worth is established in relation to social settings. Being excluded from people takes away the possibility to experience and reflect a status of self-worth and leads to feeling the opposite, i.e. insignificance and unworthiness. In this sense, negative self-worth correlates with loneliness, which, as implied earlier, was found to be one of the major contributors to reduced meaning in life in social psychiatry. A direct example from the interview with a social worker, where the conversation concerned a personal story I heard from a service user, is this:

“But they still feel lonely and the weekends can be very long. You know everybody else says: Hey weekend! We have plans, we are meeting our friends, we are going to the cinema, we are going to a party. And they are going home and wait for Monday.” (Barbara., line 138-140)

The reduction of self-worth aligns with the interpretation of lost connections at the private level, where friends, family and the social network disappeared for many people as a response to their mental health struggle. Additionally, this disappearance reduced the private sources available to feel significance to, which diminishes the need for belonging identified by Baumeister as facilitating MIL (Baumeister, 2005; Lambert et al., 2013).

4.1.3 Community

The theme of lost connections has not only been found on the private level, but also within the access to the larger social environment. For many, mental illness presented an obstacle to independent living, as it took away the opportunity to start or continue a regular job or prevented people from specialized education. Therefore, a lot of the participating service users were not able to support themselves financially and got dependent on social welfare. This was not only stated by the professionals but it was also evident through the strong orientation towards work in both psychiatric facilities:

“And then we are talking about (points at the Fountainhouse magazine) what we are doing for the people to actually get to work here. Like ehm how many have been actually trying to work this year or have been trying to get some educational

experience. And it's like 70 members of all of our members have been trying."
(Ronja, line 53-56)

Besides this, many people expressed the wish for support in starting an educational training or finding a manageable job. The reason for this was not only to be financially independent, but to get the feeling of contributing to the community. It was a recurring topic in interviews with service users such as Michael, where he articulated a strong intent for contribution: *"I feel like the main goal is... I'm getting older... I hope to get a job outside sometime. And I get a pension now and I can live on that but it's just sort of to make the contribution..."* (Michael, line 397-398). This finding led to the interpretation that contribution to the community in form of work is a meaningful goal for many service users that rarely gets achieved. The fact that a disconnection exists between service users and this source of meaning results in a diminishment of MIL, since people cannot find directedness and significance in the goal of contribution.

While meaningful work has been shown to increase one's perception of life as having a purpose (Bonebright, Clay and Ankenmann, 2000), the focus of this finding more so lies on the aspect of feeling less significant through not contributing to something larger than oneself. This notion correlates with the meaning of self-transcendence, which is for example one of the major concepts used to quantitatively measure the state of MIL in the Sources of Meaning-Questionnaire by Schnell (2009). Based on previous empirical findings, Schnell (2009) used this concept as one dimension to assess one's perception of life between meaningfulness and crisis of meaning. A low score on perceptions of responsibility "for (worldly) affairs beyond one's immediate concerns" (p. 488) was associated with lower subjective MIL, hence, proving the importance of contribution in relation to MIL.

A second aspect of exclusion that applies more generally to the integration into a community can be found in a quote by Sebastian, who pointed out how most people find value at Kraftværket because *"the citizens themselves are just wanting to be part of something. Be a part of a social group or something, being socialized"* (line 352-353). This statement reflects, how the service users' perception of being significant in relation to others is inhibited, since they are striving to be part of a group or network. The negative influence of social exclusion on MIL in this regard can be contextualized through the "sense of belonging" (Lambert et al., 2013). When it comes to relationships of any kind, the feeling of fitting in, i.e. the sense of belonging, has been identified as the key contributor to the perception of MIL. Therefore, the positioning of oneself within a community frame is an essential aspect of perceiving life as meaningful. Social exclusion prevents people from this resource and therefore leads to a

diminishing effect on MIL (Stillman et al., 2009). Social Psychiatry in this context was found to provide a community and an engaging daily structure that service users were able to involve themselves in. Barbara described the Fountainhouse as “*a place where you can return to, you can have meaningful tasks. You can have a daily life with structure, something that matters. It matters if you are here, if you are not here*” (Barbara, line 28-30). In this way, the facilities Kraftværket and the clubhouse worked against the diminishing effects of social exclusion from the community.

Seen from the theoretical perspective of social exclusion service users have lost access to the mainstream community as a resource of MIL. Taket et al. (2009) differentiate theoretically between being excluded within a community and being excluded as a community from the wider society. Mental illness in this case was the factor that restrained people from community participation, which the authors mention as a common example of being perceived as outside societal norms. Exclusion on this level appears as a matter of resources, limited opportunities and labelling as a group. Although a great gap exists between the social capital of service users in social psychiatry and the mainstream society, they are categorized as being excluded within a community, since they are not living as an alternative community or neighbourhood outside of it.

However, the awareness of being an “outsider” in the community was found to be inherent in the service users’ reports. Service users in the study expressed a clear separation between themselves and the rest of the society and mentioned social psychiatry as rare meeting places of equality for them. Gabi in this regard expressed the belief that “*all the people here are human beings, whatever they have to, and, [...] it’s a place for all of us and them*” (Gabi, line 43-44). As seen in this quote, Gabi is aware of the separating differences between people with mental illness and the mainstream society. The fact that she has to find a place like social psychiatry to experience equality of human beings contributes to her perceived exclusion from the community. One component of MIL that is especially affected by this recognition of being an outsider is the need for self-worth (Baumeister 1991). Being excluded from social interaction on the basis of one’s own character traits reduces the perception of being valued and results in feelings of unworthiness and being undesirable. This process eventually negatively influences the subjective perception of MIL (Stillman et al., 2009).

4.1.4 Goals

The last dimension where service users in this study have been found to lose connection to is the access to goals and life objectives. This finding is strongly based on data associated with the dimension of directedness. Many service users in the study reported in their assessments with social workers and also in informal conversations during the study about their life goals, the difficulties in pursuing them and directedness in their daily life.

Regarding life goals, the majority of those expressed by service users was not specifically related to mental illness but reflected wishes and aspirations that seemed rather “normal” to the social workers. Sebastian expressed this when he said that *“most of them just want to be normal. For example, Marcel, he just wants to have a girlfriend and a car.”* (Fieldnotes, Talk with Sebastian). Certainly, mental illness as an obstacle to these goals is reflected here but service users’ intentions are not particularly directed towards coping with it. The goal formulations above in connection with finding friends and employment as reported before were amongst the most often mentioned aspirations in this study. They seem like goals of the mainstream society, as they are not characterized by mental illness, but with the difference that most people in social psychiatry have problems fulfilling them due to their mental health struggles. The connection to these life goals has been lost for many participants that were met in the field.

One example for this is Marcel, who is at Kraftværket for less than a year. As mentioned above, his goals are related to finding a partner, having a car and maybe a job. As he is in his mid-thirties now, he has not been able to fulfil any of these goals yet because of his mental health struggle. During the fieldwork I talked with him several times and besides this obstacle, he is fluent in English, has a Highschool-degree and is capable of living alone (Description based on fieldnotes). This observation led to the interpretation, that exclusion from life goals is strongly related to the onset of mental illness and diminishes directedness due to its negative influence on Marcel’s life goals.

Looking at it through the theoretical lens of social exclusion, the individual experience of not being able to achieve certain life goals resembles an exclusion from important resources of the mainstream society. This is an interesting aspect for its linkage with the four needs for meaning. Generally speaking, personal life goals are a resource that the mainstream society uses to perceive MIL (Emmons, 2005). Being excluded from them, means to be prevented from significant elements of building purpose in life. The need for purpose describes the human intention of connecting present activities with future outcomes. It means gaining satisfaction through working towards goals and desires and eventually fulfilling them (Baumeister, 1991).

The experience of failing to reach goals and not knowing how to approach them in the first place, which is why many service users are looking for support by the employees in social psychiatry, leads to a reduction in desire and a diminishment of purpose, which then effects one's perception of MIL.

A second example for exclusion from goals was found within the daily structure. As mentioned by many participants of the work-ordered day in the Fountainhouse, the state of being busy with something i.e. being occupied was seen as a desirable and normal state of life that needs to be accomplished. One member in the Fountainhouse expressed this when she was referring to Kraftværket as *"a place where the people are only drinking coffee and talk. But here we are working!"* (Fieldnotes, Talk with Helena). She was praising the work at the Clubhouse as more meaningful, arguing that it fulfils the belief or goal of being busy and accomplishing something in the daily life. Without the involvement into social psychiatry, for many an occupation like work or daily activities wouldn't be possible. Therefore, outside of those facilities, it is difficult for many to achieve this goal without being part of a community.

Occupation has been shown as an element of meaningfulness especially in the mental health sector (Eklund et al., 2012). While Eklunds study does not go into detail for why this is the case, a possible explanation can be found again within the need for purpose as explained above. Social work comes into play within this theme as the data showed that efforts in the field were related to reconnecting people with future perspectives and constructing meaningful tasks for the present as for example stated by Barbara in this quote: *"It's a place where you can return to, you can have meaningful tasks. You can have a daily life with structure, something that matters. It matters if you are here, if you are not here."* (Barbara, line 28-30).

The so far discussed theme *professional collaborations vs. lost connections* focussed dominantly on clarifying how social exclusion has been found to diminish service users MIL in social psychiatry. A second aim was to argue for the role of social work combatting these tendencies. The following three themes will continue with the latter, by focussing on three different types of social work collaborations that have been found as meaning enhancing in the fieldwork. These are professional relationships, meaningful communities and meaningful occupations.

4.2 Professional Relationship

The theme *professional relationship* comprises the part of the data set where collaborations with service users in a one-on-one context were found to counteract the negative consequences of social exclusion on MIL. It looks at the personal relationship between professionals and service users and how this was perceived as promoting meaningfulness. The theme is divided into the subthemes *care* and *control and individualization*.

4.2.1 Care

The first subtheme that was found to illuminate the meaningfulness of the *professional relationship* is *care*. Social work definitions of the care concept left aside, what is meant by this is the fact that service users expressed in different ways how personal relations with practitioners made them feel valued, significant, capable and helped exceed their own boundaries. In my interpretation this is a meaning-enhancing quality of professional collaborations facilitated through the way in which practitioners care for the service users. In this regard, Gabi, who is a participant at Kraftværket, stated that the attitude that the professionals have towards her was in a positive way different from what she was used to in the mainstream society. This turned into the reason for why she started to come to Kraftværket with her husband almost every day of the week to be part of it. In her interview she referred to the values of equality and acceptance as human beings to explain this caring attitude: “*all the people here are human beings, whatever they have to, and, [...] it’s a place for all of us and them*” (Gabi, line 43-44). Furthermore, she described how the personal relationship with the practitioners is valuable for her as a resource:

G.: Have I not good day I can speak with them

Interviewer: And they listen whatever it is? that you are talking about?

G.: Yes, they are always ready to listen.

Interviewer: Yes, that’s good

G.: And gives me good advices.

(Gabi, line 93-97)

These two quotes together show how Gabi gained meaning in the sense of significance from the way in which relationships were established by the professionals, as they led her to experience of being valued at Kraftværket.

Members at the Fountainhouse had similar stories to tell about the meaningfulness of care and added the dimension of motivation to it, which was identified through looking at codes of directedness. Hermann explained, how his personal relationship to a social worker was the reason he started to take on bigger tasks and responsibilities step by step. It functioned as a motivation or “*kick in the ass*” when he was too overwhelmed by anxiety. This relationship developed so far as that it was the drive for him to participate in uncomfortable social settings and activities, which he claimed he would otherwise have never done. It was also this connection that brought him back to the routine in the facility in times where mental health struggles were becoming overwhelming (Description from Fieldnotes).

This is not the only example, as there are more reports about people coming to the facility because of their relationship to certain employees. It was interpreted that the important element of these connections was that somebody took *care* of somebody else by being there for them with a valuing attitude. Ronja expressed this in her interview, when she described her approach towards individual counselling: “[social workers would ask:] *What kind of issues do you work with yourself right now and do you need our help, or don’t you want us to interfere or anything, you decide.*” (Ronja, line 146-147)

As explained before in the theme lost connections, the absence of personal relationships is a reality for many people in the study that struggle with mental illness, which is congruent with other research publications (Elisha, Castle and Hocking, 2006). The caring relationships with professionals in the facilities were found to be enhancing meaning in life due to their potential to minimize perceptions of loneliness and insignificance and to allow for and support new perspectives and directions in life. The nature of the service user-practitioner relationship has always been a debated topic within the social work literature (Hood et al., 2019). Some authors see it as essential to personal change and it has been shown that a better relationship between professionals and service users leads to better outcomes in regard to the aspired goal (Murphy et al., 2013). The domain of relationship-based practice bears a variety of different theoretical approaches that could potentially inform social work practice and the findings related to the professional attitude align to some degree with what would be described as a person-centred approach. Central to this idea is the humanistic Rogerian philosophy that values equal relationships based on unconditional positive regard and empathy as a means to self-actualization, which is the inner urge for positive growth. Nowadays it is commonly seen in

social work, that professionals adopt the principles of this approach as framework for their own role in relationships with service users (Murphy et al., 2013). Care as presented in this theme correlates with the importance of person-centred values, since service users were pointing out those very features as making them feel significant. In this way, the findings build a theoretical bridge between relationship-based social work and significance as a dimension of MIL.

The most dominant needs for meaning that were targeted through these collaborations in the study were the needs for self-worth, value and purpose. Self-worth and value are especially related to the caring attitude found in the theme, which gave people the feeling of being valuable “*human beings*” as mentioned above. Furthermore, professional relationships were seen as a basis to spark motivation or desire to take part in activities and set up goals for the near future. This observation bears aspects of directedness and can be interpreted theoretically as social work supporting purpose. An example for this was brought up by Hermann:

“Hermann told me, how Ronja motivated her continuously to get out into the public, which was what she always wanted to do but struggled with. It was a gentle push as she said, that led her to slowly train to go out and stay longer every time.”
(Fieldnotes from talk with Hermann)

However, two caveats need to be considered here. First, professional relationships in the field were not meant to be private relationships, meaning that they were not friendships that could for example replace the lost connections in the individual sphere. As the social worker Barbara pointed out, they are more of collegial nature and therefore do not cross the border to the private life:

“And this is not our job as staff, because we are colleagues. You don’t hug your colleagues every day, no. So, we have to keep the balance about being, have good personal, collegial relationships but not making anyone dependent on private stuff.” (Barbara, line 391-394)

Secondly, the relationships at Kraftværket are established through a referral system from the municipality, which means that in contrast to the Fountainhouse they are not voluntary. How much this influences the quality of professional relationships and the regular goal assessments was not part of the data, but, as will be elaborated on in the next section, relationship-based

social work in settings of state-led institutions contradict humanistic principles to some degree due to the missing voluntariness (Murphy et al., 2013).

4.2.2 Individualization and Control

The second subtheme of personal collaboration is the interplay of *individualization* and *control*, which has been found to illuminate a difference between the settings of the Fountainhouse and Kraftværket in regard to meaningful collaborations. Social workers at the Fountainhouse were pointing out that every aspect of the service users' engagement in the facility is voluntary. Their practice is oriented towards "*where the service users want to go*", which is meant to create a voluntary environment. The reasoning behind this was captured by the social worker Ronja in this sentence: "*Don't tell anybody what to do, because you have no clue*". What the professionals focus on, is to individualize every process towards the person they are working with. In this way, every service user can seek as much support from the employees as wanted or needed, which was reported to differ from person to person. The following description illuminating this, stems from a conversation with a social worker at the Fountainhouse and was captured in fieldnotes:

"If somebody doesn't want any meetings with the employees, that's fine, he or she can just be at the Fountainhouse. If somebody needs a few days of support to get introduced with some kind of work or rather needs three months and weekly meetings, then this would be provided as well. The collaboration is whatever the service users want it to be, which is possible since there are no state obligations that require certain measurable outcomes. Everything is meant to be voluntary and individual."

The essential element of the recovery process as expressed by Ronja, is that the service users need to be in control of it to be successful. Hence, every supportive measure needs to be individualized. Without getting into discursive analysis, recovery was the term that the employees in both investigated facilities used to describe the service users' path to a life less negatively affected by mental illness. The main reason, why this way of practicing was found to be enhancing meaning in life, is its connection to directedness. Individualization and control in the professional relationship were meant by the social workers to support service users in

creating and achieving goals that they have not been able to reach before. As Barbara said, the Fountainhouse is about “*finding what matters to you*”. This personal support adapted to the individual was reported by the social workers as strengthening the service users’ capability to see new directions and to approach meaningful goals.

Coming back to the person-centred approach to relationship-based social work, its most important aspect is being a means in itself without any further utilisation (Murphy et al., 2013). Self-actualisation, meaning the inner urge for development, is seen as a tendency that activates itself if the environmental factors are optimal. Hence, the relationship is not meant to a tool to achieve something else when seen from a humanistic perspective. Leaving the decisions about what to do and how much to contribute to the Fountainhouse in the hands of the members shows great similarities to this type of relationship-based approach. Moreover, as presented above, it seems to be very meaningful for service users as well as employees.

However, following Murphy et al. (2013) it might only be possible because of the Fountainhouse being a private organization without strict state obligations. The Fountainhouse differs from Kraftværket because of its adoption of voluntariness, as it is a component that the latter can’t provide. Most people come to Kraftværket as referred by the municipality, which makes part of their activities an involuntary setting. Murphy et al. (2013) argue that a person-centred approach is incompatible with contemporary social work, since it is by nature state focused. In their argument, neo-liberal welfare developments form the way in which facilities are established to achieve desirable outcomes and therefore a service-user-practitioner relationship is usually used as a means to achieve agency and financial independence. If the relationship is used as a tool, it is not a means in itself and can’t lead to self-actualization. In this sense, the context at Kraftværket is very different. This gets especially clear when looking at the voluntary afternoon and weekend meetups of the facility that attract a lot more people compared to the weekly courses. This observation could support the idea that something about voluntariness and control is meaningful for the service users.

4.3 Meaningful Community

The *meaningful community* is another kind of social work collaboration that emerged in the data as enhancing meaning in life. It is built upon observations and reports about the group settings in both psychiatric facilities that have been interpreted as confronting the diminishing effects of social exclusion on MIL by giving people a community to feel belonging to. These settings were promoting significance and directedness for the service users based on equality and compassion. Furthermore, they were addressing the gap of social exclusion on the community level as elaborated on in the theme professional collaborations vs. lost connections. The literature defines different variants of the term ‘community’ that are overlapping with each other. Since the groups of people in this study do not represent a region or neighbourhood, a narrower definition would apply and define them as communities of interest, united by the common characteristic of mental health struggles. The establishment and work with communities in this regard relates to the theoretical discourse of community social work, which acts as support for groups that have a certain social disadvantage in common (Pavelová, 2014). The theme emerged as describing a professionally organized community, in which people that did not manage to fit in elsewhere because of their mental health struggle found meaning in relations and a place to belong. At Kraftværket it was usually more so a by-product of their work that focused mainly on educational settings, but in recent years the institutional focus has been changed towards facilitating social gatherings, hence, new possibilities for group processes emerged. In contrast to this, the whole concept of the Fountainhouse revolves around establishing a community of members that take responsibility for their clubhouse and engage in a common routine on the basis of meaningful work. The theme is divided into the subthemes *equality and compassion* and *belonging*.

4.3.1 Equality and Compassion

Equality and *compassion* have been important values in reports and observations that influenced peoples’ perceptions of significance and directedness in their lives. Equality comes into play as a basic value for the service users, which made them feel to be connected to each other and to be of significance as a person in this connection. As an example, one of the service users at the Fountainhouse said that “*we are all equal here, we all have broken heads*” and meant this in a positive way, explaining that everybody is the same and it is ok to be like that.

Many people were referring to mental illness as a connecting factor during the fieldwork and expressed their appreciation to have found a place where it is no factor of separation anymore. The social psychiatric facilities were seen as alternatives to the mostly unsuccessful relationship with the mainstream society, where in contrast equality of human beings gave people the chance to be together and to be part of a larger social network. The service user Gabi strengthened this interpretation through two important points when looking at her previously analysed quote in relation to the community: *“Because all the people here are human beings, whatever they have to, [...], it is a place for all of us and them. And there’s a good atmosphere here.”* First, she explains that at Kraftværket in particular, all the people are seen as human beings, which clarifies that this view is not usual outside of the facility. Second, she refers to the place as *for us and them*, which appears to be a differentiation between the group of people with mental illness and the mainstream society. Gabi’s statement illuminates, how social psychiatry as a place of equality gives people significance and directedness as a place to belong and come back to.

The experience of exclusion due to being different as stated above, ties back to the nature of community social work described by Pavelová (2014). Social work in this regard is especially concerned with the support of groups suffering from social disadvantage, which can be seen here in form of mental illness. Furthermore, parts of its aim are often defined as strengthening those communities by mobilizing resources and eventually bringing about social change. This theoretical notion underlines the role of the facilitating social workers as an essential element of the theme *meaningful community*. Rodriguez & Ferreira (2018) point out, that professionals in this domain “intervene by activating resources and connecting people with the different programs available in order to fight against social exclusion” (p. 864). Hence, the establishment of a social network, such as the membership of the Fountainhouse and partly the regular groups meeting at Kraftværket can be categorized as such an intervention. It is directed towards creating an open environment on the basis of equality for people that are excluded through mental illness, which seems to have a positive influence on perceptions of MIL in this study. A unique feature of the Fountainhouse in this regard, is the equality in between employees and members which does not exist in the same way at Kraftværket. Members have the power to decide on every single matter concerning the clubhouse and its tasks and therefore not only feel more responsibility towards it but also experience to be of equal value. This was for example expressed in one conversation, where the service user Britta misunderstood a question that I asked her as “for how long *will* you come to this place?” (instead of *are you coming already*) and answered: *“For as long as I’m employed.”*

The attitude of being equal and having the same “*broken heads*” did not only lead to perceptions of significance as described in the quote, but also to a special kind of *compassion* in both facilities. People can relate to each other’s struggles and experience more regards and patience as a result. This is again something they did not experience outside of social psychiatry and therefore presents an alternative to the mainstream society, which made people feel valued. Many service users need extra support to accomplish tasks and the demands for this differ from person to person, but since people can relate to each other on the basis of equality, they don’t feel this to be an obstacle for participation. The social worker Barbara expressed this when I asked her about the most important aspects of her work:

“There is a lot of room for compassion here. [...] Even though you don’t like noise and you don’t like big rooms and others can’t take the silence and they have to shout a lot but they make room for each other all the time. Everyone knows that everyone has something to fight for or with.” (Ronja, line 314-318)

The aim of community social work is to create and replace social connections to the social sphere that have been lost or never existed (Rodriguez & Ferreira, 2018). The authors argue that this is a matter of connecting people as well as communities with the social environment. The integration into communities, such as the ones investigated in this study, is a means of connecting people with the social. It bears many benefits, which has been outlined throughout this chapter, and builds a source of meaning for the participants.

However, the second essential part of community work is the connection between communities and the societal level, which was less evident, since a differentiation between “*them and us*” was still prevalent for most people. Especially the social workers at Kraftværket argued that this is the most difficult task, since people and groups are developing well inside the facility but cannot transfer this to the outside:

“[...] if you see them here they are very good at this because it’s an environment where its eh where it’s possible to be social without having very much social abilities but eh but in ..I know and we can see they’re not making any social eh networking themselves.” (Sebastian, line 354-357)

Following Rodriguez & Ferreira (2018, referring to Robertis, 2003), the only way to achieve this connection is for social work to establish connections between people and systems of the society, so that new bonds can prevail. The findings of the present study suggest that this task poses more difficulties for the professionals in the field than the establishment of meaningful communities within the facilities.

4.3.2 Belonging

The most recurring observation in the context of meaningful communities was the feeling of significance and directedness through belonging to the community. It was not only the place that presented an opportunity for this by being open for everybody at any time, but also the connection that was built with other people. This did not necessarily have to be close relationships, which were a rather rare outcome, but it was mostly a matter of having similar life situations and being a part of something larger.

The Fountainhouse with its work-ordered day integrates people into a common interest, where it is all about keeping the house in order, making decision and plans together and to work for each other by cooking meals and keeping the clubhouse in good condition. The shared goals that are constructed through this are what keeps the people motivated to contribute and is somewhat unique for them, as most people are not part of a community outside of the facilities. Belonging was expressed as the feeling to be a part of the community at the Fountainhouse or Kraftværket: *“The citizens themselves are just wanting to be part of something. Be a part of a social group or something, being socialized.”* (Interview Sebastian, line 352-353). Furthermore, the company of other people strengthened this feeling. For some this even went as far as using each other for hugs and physical affection: *“We see mostly some female members use each other for a hug. Oh, I need a hug, will you give me a hug. And they all need hugs...”* (interview Barbara, line 389-390).

The participation in the shared goals of the community have been interpreted as creating directedness since they are leading peoples' lives towards regular participation. For some people like Rita, being a part of this became the essential routine of their daily life: *“Rita said that she doesn't know what to do on the weekends and is just waiting for Monday to come, so that she can come back here and work. It's a routine that works for her”* (Fieldnotes, talk with Rita). The idea of shared goals to contribute to MIL was mostly found at the Fountainhouse. However, Kraftværket accomplishes a meaningful community through the aspects of

compassion and equality, which lead to a group of people that constantly spends their everyday life in the facility. Spending time together like this can also be interpreted as a shared goal. The meaning enhancing quality of the communities in this study can be understood through the sense of belonging. This concept has been shown to be the essential element of relationships contributing to meaning in life (Lambert et al., 2013) and is defined as a “secure sense of fitting in” (p. 1418). It is a differentiation from intimacy and closeness as other qualities of relationships, since meaning seems to be promoted through feeling to be a part of something. In my interpretation, this is what Michael meant by “*togetherness*”, when he was pointing out the most important quality of Kraftværket in his opinion. Social work intervening at the community level as described by Rodriguez & Ferreira (2018) is meant to combat social exclusion in a systemic perspective focussing on inclusion and the rest of the environment. However, the findings in this study showed community social work to have a positive effect on the psychology of the individual as well. The sense of belonging as a product of organizing and planning a community with its members (Pavelová, 2014) is the important aspect here, that makes it possible to link social work collaborations and meaning in life empirically and theoretically.

4.4 Meaningful Occupation

Lastly, the Fountainhouse as well as Kraftværket offer a daily program throughout the week, which was seen as meaningful in many ways for the service users. The former adopts the so-called “work-ordered” day as a central routine to get members to work inside the clubhouse, while the latter offers a course and free time activity structure. The theme meaningful occupation comprises the different elements of these two types of collaborations that facilitate perceptions of significance, coherence and directedness for the participants. It was constructed with the subthemes *structure* and *personal growth* as these two factors were found to be the essential aspects that made an occupation existentially meaningful for the service users.

4.4.1 Structure

For many service users in the Fountainhouse the notion of work or different occupations as being a central structure in their lives was a common topic. It has been outlined earlier, how people developed routines based on the facility’s working regime and how for some the weekends without this occupation seem aimless and basically a time “*to wait for Monday*”. The social worker Barbara supported this observation from the field with the following statement:

“But they still feel lonely and the weekends can be very long. You know everybody else says: Hey weekend! We have plans, we are meeting our friends, we are going to the cinema, we are going to a party. And they are going home and wait for Monday.” (Barbara, line 138-140)

This quote, supported by observations, led to the interpretation that work and participation in meaningful activities makes people feel significance and directedness through a structure that they can involve themselves in. People describe weekends as time to wait, since they do not have an agenda for themselves. Some even reported this to be the time when feelings of loneliness and general negative thoughts re-enter their minds when they are with themselves. This notion has been captured in fieldnotes, as it was reported by service users in the Fountainhouse only. In contrast, an occupation during the week fills out the days for most people and facilitates a life structure as well as distraction. For people at the Fountainhouse, this means the work-ordered day, which starts at 9am in the morning and continues until 3pm

in the afternoon. Members engage in tasks throughout this whole time and have coffee as well as lunch breaks in between. At Kraftværket it refers to courses that are being organized, concerning mindfulness, communication or group activities. These also start early morning and, on some days, last until dinner in the evening. People in both facilities often said that these social activities are the only ones that they participate in.

The health-enhancing benefits of meaningful occupations for people struggling with mental illness have been investigated numerous times (Ianelli & Wilding, 2007). In fact, the profession of occupational therapy in this domain is dedicated to supporting people to engage in an occupation as a way of recovery. An occupation itself can have many forms and is generally dependent on the individual's interest. However, a differentiation can be made towards "productive occupations", which means occupations that contribute in some way to the community (Law, Polatajko, Baptiste and Townsend, 1997). This notion ties back to the social exclusion that has been found to happen on the community level in this study. People were unable to feel that they contribute to something and expressed the wish to do so. The work-ordered day as facilitated through social work can be seen as an opportunity for productive occupation, since it fulfils the need to contribute to the community. In this case it means contribution to the specific community established at the Fountainhouse as well as partly the mainstream community through transitional workplaces. Social work acts again as a facilitator to connect people with directedness through contribution as a source of meaning.

The situation at Kraftværket is different in that it presents an occupation for people, but not necessarily a productive one in this theoretical sense. The interviews from the field point to the fact that socializing seems to be the main value of their structured day and people still wish for a productive occupation in addition: *"I feel like the main goal is... I'm getting older... I hope to get a job outside sometime. And I get a pension now and I can live on that but it's just sort of to make the contribution..."* (Michael, line 397-398).

Efforts of the social workers to facilitate meaningful occupations are more so directed towards people working with themselves as a means to cope with their mental illness, which would be reflecting psycho-educative practice as presented in the literature review (Ringø & Høgsbro, 2017). Given that social exclusion has been found to be diminishing MIL in this study, it aligns with the fact that togetherness (i.e. socializing) was mentioned as more valuable than educational courses by the service users:

“Interviewer: OK. Hmm. If you would like have to or maybe do that (enough?) If you would have to say one thing, why you would like to come here what would that be?”

Michael: Togetherness.”

(Michael, line 314-316)

4.4.2 Personal Growth

Personal development initiated through the offers of social psychiatry was found to be another contributor to meaning in life. One particular sentence that the social workers mentioned in this regard at the Fountainhouse, was: *“we know that work works”*, which they meant in the context of personal development and growth. During the fieldwork a lot of observations included seeing the pride that people felt when they accomplished work tasks. Focussing on one specific story, Rita, whose interview was captured in fieldnotes, told me how she was hesitating in the beginning to even come to the Fountainhouse for an hour a week and how this attitude changed over time, up to the point that she now feels comfortable having part-time jobs organized by the facility. In the beginning, she said, she did not feel comfortable anywhere else than at home, but after she kept going out to the Fountainhouse for a couple of months, she actually claimed this to be a second place in her environment where she was not anxious anymore. She started to take on more tasks as time went by and eventually made her way to her first part-time job outside of the facility. Today she works in three different places and derives a lot of meaning for her daily life from being involved in this. When she told me about her gradual development, she was proud about it and felt that it made sense as part of her life. In this way personal development was interpreted as meaningful, since she sees her progress as coherent and directed towards a purpose.

In the case of Rita, social work facilitated an opportunity for her to develop herself in a direction that she aspires and to claim employment as a resource of meaning in her life. While the importance of productive occupations has been pointed out above, there are two other theoretical connections that can be made here. The first one ties back to social exclusion on the community level, which has been related to absence of belonging as well as work as a resource for meaning. The interesting notion about this, is that Rita managed to reconnect to the community through the element of a meaningful occupation. The way in which this happened was basically a progression from including her into the community of the Fountainhouse to

gaining the capability of working outside of it in the transitory workplaces. This development can be categorized as the efforts of community social work to create support for members of socially disadvantaged groups as well as facilitating connections between them and the social environment (Rodriguez & Ferreira, 2018). Certainly, it might be criticised that these jobs are only possible through support and do not reflect a full integration into society, but they are nonetheless a reflection of Rita's progress towards independence.

Secondly, a more individualistic perspective points towards the effect of personal growth on meaningfulness. A great body of literature in the domain of MIL has been established, referring to meaning making in the context of stressful life events (Park & George, 2013). While most of this research is focussing on trauma, meaning making applies in general to a situation, where life changes in a significant manner and typical resources of meaning are questioned (Davis & Hicks, 2013). The onset of anxiety and depression and its consequences can be interpreted as such a change. Following Tedeschi and Calhoun (2004) meaning-making within challenging life situations can lead to the positive experience of growth, which is associated with increased perception of life as meaningful (Park and George, 2013). Rita's story builds a case for personal growth in challenging situations, since her struggle with mental illness began in her late 40s and the changes that came with this development posed new challenges such as unemployment and the loss of relationships. Seen from this perspective, the involvement in a meaningful occupation facilitated by the Fountainhouse supported Rita in her process of meaning-making and led to personal growth increasing her perception of MIL.

5. Conclusion

The aim of this qualitative study was to investigate the influence of social work collaborations on service users' meaning in life in social psychiatry. The inductive thematic framework used for the analysis of the data used significance, directedness and coherence as different meanings of MIL and led to the emergence of four interrelated major themes. The first of these themes (professional collaborations vs. lost connections) was found to be a general mechanism behind the meaning-enhancing qualities of social work that have been reported in the study. Its essential function is to describe the situation of service users losing connections to various domains of social life, which in return was found to reduce perceptions of MIL. The social exclusion that gets evident through this theme anchors the findings within the discipline of social work and the nature of meaning as being socially derived further clarifies that if people lose access to domains of social life through social exclusion, they lose potential resources to derive meaning as well. In this context the data also revealed that most meaning-enhancing influences of social work in the field were associated with some type of collaboration working against these excluding and meaning depriving tendencies.

Three major types of meaning-enhancing collaborations have been identified, each within its own theme. Professional relationships, meaningful communities and meaningful occupations are collaborations that social workers were facilitating in both investigated facilities and that were perceived to be positively influencing MIL. Although differences between the practice of the two investigated facilities were found, due to their separation in a public and private organizational background, the analysis was dominantly focused on the similarities in meaning-enhancing practice. This led to the finding that caring professional relationships, re-establishment of community-belonging and meaningful occupations to involve in, are important aspects in the service users' search for meaning in life that social psychiatry can support. However, differences in the institutional set-up were found to influence perceptions of meaningfulness when it comes to voluntariness in practitioner-service user relationships and the institutional orientation towards the meaning of productive occupations.

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Appendices

List of Pseudonyms

Barbara – Employee at the Fountainhouse

Ronja – Employee at the Fountainhouse

Rita – Service user at the Fountainhouse

Hermann – Service user at the Fountainhouse

Michael – Service user at Kraftværket

Sebastian – Employee at Kraftværket

Jürgen – Employee at Kraftværket

Michael - Service user at Kraftværket

Gabi - Service user at Kraftværket

Consent for the Participation in the Research

- I voluntarily agree to participate in this research study which is a part of the Nordic Master in Social Work and Welfare Program (NOSWEL) by the supervision of Aalborg University (AAU).
- I understand that even if I agree to participate now, I can withdraw at any time or refuse to answer any question without any consequences of any kind.
- I understand that I can withdraw permission to use data from my interview within seven days after the interview, in which case the material will be deleted.
- I have had the purpose and nature of the study explained to me and I have had the opportunity to ask questions about the study.
- I understand that I will not benefit from participating in this research.
- I agree to my interview being audio-recorded with my personal permission.
- I understand that all information I provide for this study will be treated confidentially.
- I understand that in any report on the results of this research my identity will remain anonymous. This will be done by changing my name and disguising any details of my interview which may reveal my identity or the identity of people I speak about.
- I understand that disguised extracts from my interview may be quoted in the research anonymously.
- I understand that if I inform the researcher that myself or someone else is at risk of harm they may have to report this to the relevant authorities - they will discuss this with me first but may be required to report with or without my permission.
- I understand that signed consent forms and original audio recordings will be retained in the researches until the end of the academic year 2019/ 2020.
- I understand that a transcript of my interview in which all identifying information will not be re-used for any other purposes.

- I understand that under freedom of information legalisation I am entitled to access the information I have provided at any time while it is in storage as specified above.
- I understand that I am free to contact any of the people involved in the research to seek further clarification and information.

Signature of the participant

Date

Signature of researchers

I believe the participant is giving informed consent to participate in this study.

Signature of the researcher

Date

Signature of the researcher

Date

Signature of the researcher

Date

PBL Interview Guide (Practitioners)

Stating Purpose of Research

Gratitude

Informed Consent

Do you have any questions about what we are going to do?

Opening Segment (General Narrative to get the story)

Experience with Kraftvaerket and participants involvement

1. How long have you been working in Kraftværket?
2. What kind of “place” is Kraftværket for you?
3. How would you describe your job at Kraftværket? How do you define your job for yourself? (Goals)
4. Which courses and activities do you facilitate on a regular basis?
5. In your opinion, what are the courses/methods that work well and why do you think that is?
6. Are there courses that don't work that well?

Middle Segment (Theory- and topic-specific questions)

Responsiveness, Effectiveness of individual and group methods, Collaboration (Empowerment), Relationship

7. Let's dive a little deeper into the methods that you are using here. Generally speaking, you are using both individual and group-oriented methods. How would you describe the relation between them?
8. Do you see different results from them?
9. What do you think about the differences in activity levels between the participants? How do you address them in the course?
10. How do you work with this problem outside of the group context and in the long term? Do you have any other ideas on how to improve this situation?

11. How do you define your relationship with the citizens and what role does it play in their progress?

Concluding Segment (Clarifications, sum-up feeling)

12. Taking all this into account, how do you see the success of Kraftværket?

13. Do you feel satisfied with the results that the citizens get from the courses?

14. Are there things you would like to improve?

Do you have anything more to say?

PBL Interview Guide (Service Users)

Stating Purpose of Research

Gratitude

Informed Consent and confirmation of tape recording

Do you have any questions about what we are going to do?

Opening Segment (General Narrative to get the story)

General experience with Kraftværket and the interviewees related story

1. How long have you been coming to Kraftværket?
2. How would you describe Kraftværket? What kind of “place” is Kraftværket for you?
3. In what activities are you participating and how often per week?
4. Do you like the courses you are participating in? If so, which and why?
5. What goals are you personally working on and how does Kraftværket support you? Who defines these goals?
6. How would you describe your relations with the workers and other participants here?

Middle Segment (Theory- and topic-specific questions)

In-depth questioning about interviewees participation, engagement and experienced outcome of his/her activities to evaluate “responsiveness to” and perception of results in group and individual methods.

In this next part I would like to hear more about your experience with the different courses that you are going to.

7. You said that you liked course X, can you tell me what you are doing there?
8. How does this course help you achieving your goals? Why do you like being in this course (other benefits)?
9. Do you think it is easy to participate (talk) in this course?

10. *Repeat for other course XY*

11. Are there any courses that you don't like that much and if so, can you tell me why and what would you like to be different about them.

(Which courses do you feel less comfortable to participate?

Which courses do you enjoy less to be a part of?

Which course do you think is less fun?)

12. Have you ever attended an individual meeting with an employee before? How often do you have those individual conversations between them?

13. How would you describe those meetings? What do you usually focus on in these meetings?

14. Which type of meetings do you find more helpful in Kraftværket, the individual conversations with the employees or the courses we talked about?

Concluding Segment (Clarifications, sum-up feeling)

Final thoughts on future development

To get this interview wrapped up, I have a couple of final questions for you!

15. What do you like best about being a part of Kraftværket?

16. Do you feel satisfied with the time you spend here for your personal goals?

Do you have any suggestions to make it better for you?

17. Is there anything that you would like the employees to do? (more, less, differently)

18. Is there anything more you would like to say that we have not discussed/talked about?