

Recovery as the Re-fabrication of Everyday Life

Exploring the meaning of doing for people recovering from mental illness

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Attestation of Authorship

I hereby declare that this submission is my own work and that, to the best of my knowledge and belief, it contains no material previously published or written by another person (except where explicitly defined in the acknowledgements), nor material which to a substantial extent has been submitted from the award of any other degree or diploma of a university or other institution of higher learning.

Signed

Dated

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Abstract

The notion of recovery from mental illness has become a significant force in mental health policy, practice and literature. As a process, recovery can be described as the lived experience of personal growth and search for meaning after the onset of mental illness. The following phenomenological inquiry seeks to understand the meaning of day-to-day activities for 13 people in recovery from mental illness. In the recovery literature there has recently been a growing interest in the everyday aspects of recovery. Routine interactions between people and the human and non-human environment have been recognised as being significant in the recovery process. Additionally, there has been a call within occupational therapy literature for research focused on exploring the experience and meaning of different forms of occupation. This study aims to address and add to these areas of interest within the current literature.

Recovery narratives were collected from the participants in two phases, using an open ended conversational style of interview. The first phase focused on gathering stories that reflected the lived experience of recovery for eight participants. The recorded interviews were transcribed and analysed using the hermeneutic philosophy of Martin Heidegger. In the second phase of interviewing a further five participants shared their stories. In this round the conversations were focused on some of the dynamics of activity and recovery that had emerged as broad themes in the first phase. This allowed further depth to be added to the data and subsequent analysis. The interpretation focused on descriptions of engagement in activity during different periods of the participants' recovery journeys. It was important to dwell with the stories and allow themes of experience and meaning to emerge. Particular phrases and words were highlighted and their meaning explored if they showed something of the participants' lived experience. Through a process of writing, reflecting and re-writing the findings were refined and clarified over time.

Everyday activity was found to be an important medium for change as well as a recovery outcome in itself. Findings add to existing understandings about occupation as a medium for healing and transformation within the context of recovery from mental illness. In particular, the study highlights the dynamics at play in different modes of doing and the way in which carers can influence the experience and meaning of activity.

CHAPTER ONE

CONTEXT OF THE STUDY

Focus of the Study

This inquiry aims to make a contribution to current understandings about recovery from mental illness. Specifically the focus is on the experience and significance of day-to-day activity or “doing” in the recovery process. The intention is to draw out rich descriptions of the 13 participants’ lived experience to show something of the significance of doing in their recovery stories. The hermeneutic philosophy of Martin Heidegger (1962) has been used to guide the analysis of the stories. This perspective acknowledges the existence of multiple realities within lived experience and looks to peel back layers of understanding and interpretation. Insights into the significance of doing in the recovery process will be valuable to the practice of occupational therapists as well as other mental health workers. The analysis will also add to the knowledge base related to recovery and to understandings about the meaning of occupation in peoples’ lives in general. The primary question being asked is: **What is the meaning of doing for people in recovery from mental illness?** The key terms within this question will now be defined.

What is Mental Illness?

In Western countries mental illness is most commonly understood and classified according to the Diagnostic and Statistical Manual of Mental Disorders (American Psychiatric Association, 2000). In New Zealand the most commonly diagnosed disorders include mood disorders, anxiety disorders, schizophrenia, and the dementias, with one in five people experiencing some form of mental illness in their lifetime (Mental Health Commission, 1998). This study relates to people who experience significant disability due to their disorder, necessitating the use of specialist mental health services. Approximately 3 to 5% of New Zealanders experience this level of disruption from their illness (Mental Health Commission, 1998). The participants in this study all required specialist mental health services at some stage and experienced significant disruption to their lives because of mental illness. The impact of mental illness extends beyond the thought, mood and perceptual problems usually highlighted as the primary symptoms. The iatrogenic or secondary effects are recognised as being just as devastating for many people with mental illness (Lapsley, Nikora, & Black,

2002; Peterson, Pere, Sheehan, & Surgenor, 2004). Experiences such as institutionalisation, homelessness, poverty, stigma and discrimination, lack of work and accommodation opportunities, drug and alcohol misuse and side effects of prescribed medications are all common secondary effects of severe mental illness. People with mental illness report that recovery is about healing from the impact of iatrogenic effects just as much, if not more than healing from the impact of biomedical symptoms.

What is Recovery?

Over the past two decades the notion of recovery from mental illness has become significant in mental health policy, research and practice. The New Zealand government's *Blue Print for Mental Health Services in New Zealand* broadly describes recovery as the ability to live well in the presence or absence of one's mental illness (Mental Health Commission, 1998). The document suggests that the journey of recovery is different for everyone and that each person with mental illness needs to define for him or herself what living well means to them. Spaniol, Gagne, and Koehler (1999) depict the process of recovery as one of healing physically and emotionally, of adjusting one's attitudes, feelings, perceptions, beliefs, roles and goals in life. This signifies a shift in focus away from the medical view of mental disorder and treatment to a broader psychosocial and spiritual perspective. The challenge for mental health workers of all disciplines is to create services and communities that support the holistic recovery of those who experience mental illness. Further definitions and aspects of recovery will be explored in the following chapter.

What is Doing?

The focus of this study is the experience of *doing* for the participants in the process of recovery from mental illness. Throughout the thesis the term 'doing' is used to refer to any intentional activity that the participants engage in. In the fields of occupational therapy and occupational science, the term *occupation* is used to broadly describe all the things a person does in his or her everyday life, including leisure, self-care, work and other productive activities (Townsend & Polatajko, 2007). In this thesis the terms 'doing', 'activity' and 'occupation' will be used interchangeably. The term 'doing' has been used in the title and in much of the discussion, as it is seen as being best suited to the phenomenological and existential nature of the study. The terms 'action', 'activity', 'role' and 'lifestyle' are depicted as structures of doing within the findings chapters and will be further defined there.

Putting the Study in Context

This study sits in a particular historical and social context and an understanding of this situatedness is important when justifying the research focus and in the interpretation of findings. The following discussion outlines the context of the health care system which has a significant impact on people's recovery, the professional context of occupational therapy practice as well as my own personal context from which the study has developed.

The Health Care Context

During the second half of the last century mental health services in New Zealand and other western countries were transformed. One factor in the changing face of mental health practice has been the development of psychotropic medications which have allowed many people to escape the grip of their symptoms and re-engage in life. The success in using medication to control psychosis and mood disorders has meant that the numbers of people severely disabled by their symptoms has diminished significantly (Anthony, Cohen, Farkas, & Gagne, 2002). Another major factor in the transformation of mental health services was the deinstitutionalisation of care, whereby large psychiatric asylums were replaced with community based services (Anthony et al., 2002). In New Zealand deinstitutionalisation changed the fundamental nature of mental health care and highlighted the impact of environment on mental illness and recovery. Outside of the large institutions people were able to develop different routines, had greater opportunities to learn basic life skills such as cooking as well as participate in a greater variety of community based activities. Life in the community allowed more freedom for former inpatients, but it was not clear how they were to fit in with the everyday world of suburban New Zealand. The shift created incredible challenges for people with mental illness and for those working with them. This was largely because of the effects of institutionalisation, a lack of integrated support services, and stigma and discrimination from the community at large.

The third major shift in the last 50 years has been the growing voice of people who use or have used mental health services. The consumer or service user movement has been a major factor in the emergence of recovery as an emancipatory notion. In many western countries former service users shared their stories of recovery and fought to quash the belief that recovery from serious mental illnesses such as schizophrenia was not possible. The movement also opened up the possibility of having people with experience of mental illness participating at all levels of service delivery, from peer

support work to board membership and in New Zealand's case the Mental Health Commissioner. This influence has led to the use of recovery as a guiding vision for the whole of New Zealand's mental health system. This and the other changes in the mental health system have brought about the need to research recovery, particularly in the context of everyday community life as opposed to clinical settings. A greater understanding of how people with mental health problems can be supported to participate in all aspects of community life is essential in facilitating recovery.

The Professional Context

The shift to community based, recovery focused practice has meant that health professionals, including occupational therapists are now required to work in different ways. The Blueprint for Better Mental Health Services (Mental Health Commission, 1998) states that "people working in the mental health system must use a recovery approach in their work" (p. 16). A belief that recovery from mental illness is possible, even for the most disabled person, is central to occupational therapy practice. However, in recent times the emphasis on person centred practice has highlighted the need to work with people as a whole, including their strengths and dreams as well as their difficulties. Occupational therapy departments were once busy centres of activity within large institutions. Group crafts and work-like activities were frequently used as therapeutic mediums for alleviating distress and addressing psychosocial impairment. Following deinstitutionalisation, many occupational therapists were required to work in community settings, often employed by non-governmental organisations. Accordingly, the focus of practice has moved to supporting people to live in the wider community, including developing skills for work, education and other aspects of community life. The move away from large occupational therapy departments has meant that many therapists no longer work with a team of occupational therapists on a day-to-day basis. With this shift and a move towards a more generic mental health workforce, occupational therapists increasingly find themselves working in general roles as case managers or team leaders. This creates a tension for many occupational therapists, who feel restricted from working with a focus on occupation. These contextual factors have significant implications for occupational therapy as a profession. However, the professional identity of occupational therapists can be strengthened through occupation focused research and practice development.

The Personal Context

I arrived at this study as part of my own life journey, with many events and experiences leading me to this point. From the beginnings of my journey I was brought up to be reflective about life and the meaning of being. My father's work as a minister in a Swedenborgian church meant that I was surrounded by reflective discussion and hermeneutic discourse. Swedenborg was an eighteenth century philosopher and theologian who wrote extensively about spiritual life and the inner meaning of the Bible. His work influenced many thinkers including William Blake, Carl Jung, William James and Helen Keller. The hermeneutic and symbolic nature of his writing provided me with a foundation for feeling at home with Heideggerian hermeneutics.

In childhood I was also instilled with a strong sense that putting one's abilities to use for others was important. Following secondary school I completed two years of psychology and sociology papers at university, went travelling for a year and then completed a three year degree in occupational therapy. Over this period of time I became interested in mental illness and the field of mental health practice. I went on to practice as an occupational therapist in several mental health services in New Zealand and England, and found myself both challenged and inspired by the struggles and triumphs of the people I worked with. I always had a belief in the power of occupation to help with the recovery process and saw this firsthand on many occasions. More often than not it was a gradual and subtle process, meaning that the way in which doing changed peoples' being was not always clear to me. In practice I also saw the negative impact of restrictive environments on the recovery process. This left me wanting to understand the relationship between a person's engagement in occupation, the influence of context and the overall healing process in greater depth.

As my professional life progressed, I began teaching occupational therapy students about mental health practice and also began postgraduate study. My desire to understand the relationship between doing and recovery stayed with me during this time. Enrolment in various postgraduate papers created an opportunity to begin exploring the phenomenon, by introducing me to qualitative research methods, Heidegger, hermeneutics and phenomenology. Through the course of my study I also read the occupational therapy literature. I discovered that while some research had been done in relation to doing and recovery, it tended to be focused on clinical interventions and not doing in the everyday world. While the literature did shed some theoretical light on the issue, it still left me with questions about the subtle and seemingly poorly

understood power of occupation.

Another aspect of my personal journey that brought me to this research has been my own periods of psychological and emotional ‘unsettledness’, and the power of regular and meaningful patterns of doing to restore balance and a sense of order in life. Although I now work in education rather than the health system, I continue to have regular interactions with people who are struggling with and triumphing over the devastating effects of mental illness. It is their spirit and resilience that has been my inspiration to maintain my focus and complete this study.

Overview of the Thesis

This study sets out to explore the meaning of doing for people recovering from mental illness. The focus of the inquiry has arisen within a personal, professional and health care context in which particular shared understandings are prevalent. It is anticipated that through using stories of lived experience and the methodology of hermeneutic phenomenology, this study will open up and uncover new understandings of doing in mental illness and recovery. This chapter has begun setting the scene for the study, highlighting the focus of the research and describing the context in which the study sits. The remaining chapters build on this to show the process and content of the research in greater depth.

In Chapter 2 the literature relevant to the research question is reviewed. It highlights the links between the question and the current knowledge base related to mental illness, recovery and ‘doing’. Significant gaps in the literature will be identified and considered in the light of this study.

The methodology used in the study will be discussed in Chapter 3. The chapter begins by outlining the key philosophical notions that underpin all aspects of the research process. It then describes why the particular methodology of Heideggerian phenomenology was chosen in relation to the research question.

Chapter 4 provides details of the study design. The process of the research is described, including the recruitment and interviewing of participants, the analysis of the interview and the writing up of the findings. The chapter will close with a discussion regarding the trustworthiness of the study.

In Chapters 5 to 9 the majority of the study’s findings are presented. The overarching notion through these chapters relates to the change that occurs in the participants’ being-in-the-world as they experience different modes of doing. The chapter titles capture this

notion as they progress from the ‘uncovering’ of self to the ‘recovering’ and ‘discovering’ of self through doing. Excerpts from the participants’ stories along with the researcher’s analysis will be used to highlight and illustrate themes. Notions from Heidegger and other phenomenological thinkers will be introduced to further illuminate the discussion.

Chapter 10 contains further findings, but the focus turns to the practice of supporting people who are in different modes of doing. The notion of ‘therapeutic tact’ will be introduced and illustrated using accounts from the participants’ recovery stories.

Within Chapter 11 the study is drawn together and conclusions made in a final discussion. The key findings will be summarised and then reviewed in relation to current literature. The implications for mental health practice, education and research will be outlined before the limitations of the study are acknowledged. The thesis closes with a final reflection.

Summary

This thesis explores the meaning of doing for people recovering from mental illness. Using a Heideggerian phenomenological approach, it seeks to return to the experience of the participants to uncover the hidden, taken for granted, known but forgotten meanings that lie at the heart of such a lived through journey. The following chapter situates the notion of recovery within relevant literature, revealing the need for an ontological study such as this.

CHAPTER TWO

LITERATURE REVIEW

Introduction

New understandings do not arise in a vacuum but are always built on the foundation of that which has gone before. This chapter reviews the existing literature related to the phenomenon of ‘doing’ in recovery from mental illness. The focus is on those accounts that best show the wider context in which this research and its findings sit. While not all the available literature pertaining to doing and recovery from mental illness is included here, the most significant accounts have been selected to put the study in context. The early aspect of the chapter explores what is generally understood about the experience of recovery from mental illness. Theories based on recovery research as well as first person accounts make up the majority of this literature. The later discussion will show something of what is understood about the meaning of ‘doing’, specifically pertaining to doing and recovery from mental illness. Literature from occupational therapy and occupational science make the most contribution to this discussion. The chapter concludes by identifying what is missing from the current research, showing the need for the particular focus and methodology of this study.

What is Understood about Recovery from Mental Illness?

Over the last two decades the concept of recovery from mental illness has been widely discussed, sometimes researched and increasingly used in the development of service policy and provision. It has been defined and interpreted by those who have experienced mental illness as well as those who have not. The distinction between recovery and interventions that assist recovery, such as treatment and rehabilitation has been made (Anthony et al., 2002, p. 68). The significance of the notion to the field of mental health practice is still being realised. In New Zealand, recovery has been embraced as a reality by people with mental illness and increasing numbers have shared their recovery stories (Fenton & Te Koutua, 2000; Lapsley et al., 2002; Leibrich, 1999; Malo, 2000). The notion of recovery also features in several policy reports related to the provision of the nation’s mental health services (Mental Health Commission, 1998; Ministry of Health, 1995; O’Hagan, 2001). The belief that recovery from severe mental illness is possible has not always existed in traditional psychiatric services. Until recent decades a more

common view was that conditions such as schizophrenia involve a slow progressive deterioration, from which recovery was not possible. However, the mental health survivor/consumer movement and numerous longitudinal studies have challenged this view. Research findings have demonstrated that one-half to two-thirds of people with severe mental illness significantly recover over time (Harding & Zahniser, 2005) .

Defining recovery from mental illness has proven to be difficult due to the fact that the experience is varied and complex. Additionally, there is an underlying diversity of views about mental illness itself, and so the notion of recovery has accordingly been interpreted from a range of perspectives (Onken, Craig, Ridgeway, Ralph, & Cook, 2007). Spaniol et al. (1999) attempted to clarify the situation by separating existing notions into three distinct areas. They suggested that recovery can be seen as a process, as well as an outcome and finally as a vision for health care provision. Understandings related to the process and outcome of recovery are of most relevance to this study and will be a focus in this review. Additional clarification has been provided in the form of a distinction between recovery *from* and recovery *in* mental illness (Davidson & Roe, 2007). While a significant percentage of people do recover from mental illness by overcoming the symptoms and iatrogenic effects of their disorder, many also live *in* recovery and find meaning and purpose despite experiencing symptoms for much of their life. This distinction accommodates the clinical perspective of recovery as an absence of symptoms or ‘cure’, as well as recognising the perspective of many mental health consumers who live with and beyond their symptoms. Harding (as cited in Jacobson & Curtis, 2000) made the point that viewing recovery as an endpoint defies its highly individual and fluid character and suggested that the notion of recovery outcomes should be reframed as benchmarks or “markers of course” (p. 164). The notion of living *in* recovery best fits the experience of the participants in this study, and so the discussion will now turn to the process and the ongoing outcomes of living in recovery.

Despite the difficulty in creating a single definition of recovery, there are many valuable examples of recovery accounts and definitions in the literature. One of the most cited and respected writers is Patricia Deegan (1988), a clinical psychologist and advocate for people with experience of mental illness. She suggested that over time:

People experience themselves as recovering a new sense of self and purpose within and beyond the limits of disability. This is something only the self can do; it is a decision to lead a hopeful life and to make a contribution in spite of the limitations imposed by illness. (p. 11)

The subjective nature of the recovery experience means that each person's approach to the process and possible outcomes is unique (Curtis, 1997). However, for most people recovery is a notion that focuses on health rather than illness and provides hope, when too often mental illness has been equated with abandoning a bright future for a life of disability and poverty (Everett et al., 2003). Personal accounts of recovery have played a critical role in illustrating the practical resilience of people diagnosed with mental illness, identifying various pathways of healing and describing factors which enhance or detract from the process (Jacobson & Curtis, 2000).

Recovery research suggests that generally the process is not a straightforward linear one and that people recover from much more than the symptoms of mental illness. The process may involve long periods of little change, short bursts of rapid change, periods of steady improvement and periods of relapse (Carpenter & Kirkpatrick, 2005; Strauss, Hafez, Lieberman, & Harding, 1997). It inevitably involves overcoming major socio-cultural and institutional barriers such as stigma, discrimination, loss of choice and loss of valued roles (Anthony et al., 2002; Lapsley et al., 2002). An increasing focus on recovery as a complex and dynamic developmental process is evident in the literature. Recent studies have focused on the activities and interactions of individuals in the contexts of their everyday lives (Borg & Davidson, 2008; Davidson & Shahar, 2007; Onken et al., 2007). While broad stages of recovery have been conceptualised (Spaniol, Weworski, Gagne, & Anthony, 2005), there is limited understanding about the way in which multiple personal and environmental factors interact in the change process.

Whether recovery is defined in terms of being an ongoing process or an attainable end point, it appears that it is the voice of the recovering person that matters most. It is these voices that most clearly point out that it is not for health professionals or family members to decide if individuals with mental illness have recovered, or indeed what they have recovered from, for these are questions only the person in recovery can answer. The discussion now turns to look more closely at commonly discussed dimensions of recovery. Each of these aspects has a particular focus, revealing the various positions from which recovery can be viewed, and each is relevant to understanding doing in the context of the recovery process.

Recovery as Illness Management

The bio-medical perspective of mental illness and recovery has long been the focus of psychiatric services and mental health funding. For many decades, the field of psychiatry has dominated beliefs about illness and recovery and mental health practice.

It has been argued that a view of mental illness as a brain disorder aligns it with other health conditions rather than labelling it as a problem of one's fundamental 'self' (Mack, 2001). This potentially assists in reducing the stigma and blame associated with mental illness. Brain disease can be managed and alleviated by effective medication and the reduction of stress, just as diabetes and heart disease can. Gaining control over one's symptoms and relapses through illness management is seen as central to the restoration of a meaningful life (Meuser et al., 2002).

The essence of this perspective relates to biological health, developed through medical intervention, the reduction of stress and the development of a healthy lifestyle. Outcomes described in this medically oriented dimension relate to symptom relief, freedom from substance abuse and physical health and safety (Meuser et al., 2002; Noordsy et al., 2002). Many stories of recovery involve the development of new life style patterns aimed at reducing symptoms and increasing vitality and alertness. For some this means accessing warm, dry shelter; for others it means developing new sleeping, eating or exercise habits. Some report that detoxification from harmful drugs is important, while many people with mental illness recognise the contribution of prescribed medication in the management and reduction of their symptoms. For instance, Young and Ensing (1999) explored the perspectives of people recovering from mental illness and found that taking care of one's basic physical and physiological health emerged as a common theme. They use two participant quotes to demonstrate the finding.

The medicine is almost 90% of the battleIt's not a crutch; it's just like a diabetic uses medicine. Medicine is tremendous. (p. 226)

It [exercising] builds my morale. It helps me to feel more confident about myself and helps me want to do other things...it gives me a better outlook on life. (p. 226)

The focus for these people is clearly on managing their illness and taking care of their physical well-being. However, an excerpt from Roger's (1999) recovery narrative shows something of the tension that can arise for people as they use medication for symptom relief.

So I saw my G.P. and went on Prozac for a while and that helped, I suppose. I felt good that I was getting recognition for what I was feeling and it helped me get out of the real downer that I was in. But as soon as I started feeling better again, I didn't want to take the medication anymore because I was having lots of really vivid dreams and disturbed sleep, so I'd wake up feeling tired in the morning as well. (p. 149)

While appreciating the relief from symptoms, the author of this account is tempted to stop the medication because of the disconcerting side effects. It is clear in many personal narratives that while medication and reduction of symptoms is one factor in recovery there are many other significant influences as well. Some accounts even describe prescribed medication as being a barrier to their recovery (Berman, 1994). In fact, the strong emphasis within psychiatry on the bio-physical dimension in general, has been critiqued as being detrimental to recovery for some people. For example, in New Zealand, Maori survivors of mental illness have described the medicalisation of experiences that are traditionally considered either acceptable (such as hearing voices) or symptoms of spiritual ailment rather than physiological disease, as a hindrance to their recovery (Fenton & Te Koutua, 2000; Lapsley et al., 2002). From the preceding accounts it can be seen that there is a diversity of perspectives in relation to the bio-physical aspects of mental illness. This creates a tension between seeing one's recovery as managing physiological stress and the symptoms of a brain disease or seeing it as a process beyond the physiological. Both symptoms and medical treatment for symptoms emerge in accounts as either enhancing or hindering people's engagement in doing.

Recovery as Psycho-Emotional Adjustment

Recovery may also be viewed as a process of regaining psychological and emotional well-being following mental illness and its associated effects. Seen from this perspective, mental illness involves the breakdown of psycho-emotional functioning due to life stressors or trauma. Through this breakdown, one's sense of self is shattered and an overwhelming loss of efficacy, control and hope are experienced. People with mental illness may be recovering from the experience of highly distressing symptoms such as psychosis, from various forms of institutional abuse in psychiatric units, abuse from partners or family, and the devastating loss of relationships, jobs, housing and financial security commonly associated with mental illness. Childhood physical and sexual abuse is also considered to be significant in the 'breakdown' of self associated with mental illness. The rates of childhood sexual abuse for females with severe mental illness have been found to be up to 40% higher than those in the general population (Janssen et al., 2004; Mowbray, Oyserman, Lutz, & Purnell, 1997).

Baxter and Diehl (1998) described the emotional process of recovery as involving movement from despair and anger to grief and anxiety, and eventually to a stage of hopefulness. They suggested that the outcome of this process is acceptance of self and confidence in future possibilities. Support for this perspective comes from numerous

accounts, with people commonly describing periods of hopelessness prior to and during their recovery. For instance in telling his recovery story, Reidy (1999) said:

I remember experiencing despair. Suicide was never really an option, but I did think about it because life did seem pretty pointless. I had no concrete hope during those months and years. (p. 92)

In the literature, hope emerges consistently as the emotional essence of recovery. Hope has been described as a sense or feeling that change and a better life is not only possible, but attainable as well as a biological necessity of life (Deegan, 1988; Onken et al., 2007).

Despite widespread recognition of the deep and pervasive impact of the emotions associated with mental illness, routine psychiatric treatment has been described as inadequate in addressing the emotional process of recovery. More than 15 years ago, Anthony (1993) argued that the range of emotions that people experience as they recover should not be diagnosed as abnormal or pathological but seen as a normal part of the process. Nonetheless, people with mental illness continue to point out that the humanity of their grieving process is ignored and that their emotional responses are treated as symptoms of an illness that demand a biochemical cure (Lunt, 2002).

Closely related to the emotional process of recovery is the psychological dimension, which focuses on constructs such as self-efficacy, locus of control and choice. Most survivors report experiencing a loss of control over their lives through illness and the resulting barriers placed on them by the health system and society. The loss of power in mental illness relates to the loss of ability to act in one's own interest (Spaniol et al., 1999). Ultimately, however, recovery emerges from the person, rather than being imposed upon him or her. Recovery itself is a choice, in that people experiencing mental illness cannot be made to recover by others, they must choose to (Cowan, 2008). Turning points in the recovery process are often highlighted as small decisions or choices through which survivors take control and responsibility for their actions.

Recovery appears to involve challenging old ways of thinking, gaining information or awareness, and being able to make informed decisions. Often the process described is a progressive one, moving from small decisions to larger ones that involve greater risk. This process of choice making requires courage, as it is how people in recovery take responsibility for their current and future circumstances. However, in her story Leete (1997) suggested that professionals more often measure progress using concepts like "consent", "co-operate" and "comply" instead of "choose" (p. 103). She suggests that

the message being given is that people with mental illness are incapable of taking an active role as partners in their own recovery. For some cultures decision making is collective and often involves consideration of the whole family unit. In this context, it may be more acceptable for other family members to have significant input into the decisions along with the recovering person (Fenton & Te Koutua, 2000; Malo, 2000). Overall, the literature suggests that psycho-emotional ‘markers’ of outcome in the recovery process include taking responsibility, self-determination, gaining a sense of control over one’s life, developing a coherent and positive sense of self, healing old wounds and finding hope for future possibilities (Onken et al., 2007).

Recovery as Social Integration

The social dimension of recovery is associated with role performance and participation. This perspective is tied to a view of mental illness as the transformation of one’s social identity through progressive role constriction. As Estroff (1997) pointed out, when “individuals cease to have a job, withdraw from school and lose contact with friends and family, they also lose valued social roles, and acceptable identities compiled and derived from these roles” (p. 48). This role loss is often compounded when people in recovery are encouraged to take on the ‘patient role’ and psychiatric services are provided in compartmentalised programmes, outside of their community, social, and family lives (Jacobson & Curtis, 2000).

Recovery can thus be conceptualised as role reclamation and a shift from being a patient to taking on the social roles typical of people similar in age, gender, culture, and background (Onken et al., 2007). Developing success and stability in a range of meaningful roles including worker, parent, friend, carer and partner, has been highlighted as a key task associated with recovery (Noordsy et al., 2002; Spaniol et al., 2005). The types of role performance described as aiding recovery are those that connect individuals to their wider communities and a sense of self. This is achieved through developing capacity and opportunities for participation, at the same time as reducing social and economic barriers (Ware, Hopper, Tugenberg, Dickey, & Fisher, 2007). At the core of the social re-integration perspective is the belief that being connected to and valued by others is a common human need and a direct determinant of well-being. For instance, one phenomenological study found that “no matter how disabled or isolated they [people with mental illness] appear, they have become neither the ‘empty shell’ depicted in the clinical literature... nor apathetic about relationships, but consistently and poignantly express both being lonely and desiring love and

companionship” (Davidson, Stayner, Nickou, & Styron, 2001, p. 380). Furthermore, inclusion in families, social groups and wider communities is commonly described as being significant in determining the progress and focus of recovery (Cowan, 2008).

While inclusion has been found to be helpful, barriers to participation in society are seen as equally detrimental as the primary symptoms of mental illness. Stigma and discrimination are consistently identified as a social barrier within the international and New Zealand recovery literature (Peterson et al., 2004). In New Zealand stigma and discrimination are encountered in the employment, education and housing sectors, in institutions such as banks and welfare offices, sports clubs, churches and amongst friends and family (Fenton & Te Koutua, 2000; Malo, 2000; Peterson et al., 2004). Within different socio-cultural groups stigma is influenced by the values and beliefs shared by group members. In New Zealand, Maori people have reported the experience of stigma from family members due to the belief that their illness is caused by a social or spiritual indiscretion. The shame that the person and their family feel prevents them from talking about the illness or seeking help, which ultimately encourages the discrimination that the family is trying to avoid (Fenton & Te Koutua, 2000). Additionally, people from minority social or ethnic groups may experience multiple social barriers in their recovery including cultural inequality and misunderstanding, language difficulties and racism (Malo, 2000).

The literature shows how recovery can be viewed as a social phenomenon, involving the reclaiming and rebuilding of roles following the pervasive role loss of mental illness. This perspective relates to the focus of this study in that everyday doing is largely structured by the roles that we perform. When people lose roles through the symptoms and environmental barriers associated with mental illness, the patterns and nature of their doing is inevitably affected.

Recovery as a Spiritual or Existential Journey

It has been suggested that the spiritual dimension is a central and mediating factor in recovery, inter-relating with all other dimensions of the individual (Davidson & Strauss, 1997). Studies have found that spiritual development is commonly perceived as a central aspect of recovery (S. L. Young & Ensing, 1999). The essence of this dimension appears to be ontological, related to the meaning of one’s very being. Mental illness has been described as a spiritual crisis, when one’s core sense of being becomes fragmented and traumatised (Davidson & Strauss, 1997; Leibrich, 2002). Here, recovery involves making sense of one’s illness and illness experiences in relation to one’s own way of

being-in-the-world. Deegan (1996) suggested that ongoing disconnection from one's core sense of self may be used as a protective mechanism to avoid further trauma. However, re-connection with the self is necessary if forward movement in life and recovery is to occur (Spaniol, Bellingham, Cohen, & Spaniol, 2003). While making sense of the illness and developing self awareness is an important aspect of recovery, many survivors report that going beyond the illness and its consequences to find new meaning and purpose is essential (Deegan, 1988; Lapsley et al., 2002; Leibrich, 1999, 2002). Some accounts stress the significance of spiritually focused practices, such as prayer and church activities in recovery (Mulcahy, 2007; Russinova & Cash, 2007). It has been suggested that spiritual healing and transformation occurs through the creation of deeper connections to oneself, others, nature and a higher power or cause (Leibrich, 2002; Mulcahy, 2007; Spaniol et al., 2003). The literature also indicates that the outcome of spiritual recovery is the development of a new sense of purpose, interconnectedness and integration in one's being (Russinova & Cash, 2007).

To summarise the discussion thus far, the literature reveals recovery as a unique and multifaceted process. However, if recovery is an essentially human process then it should not be surprising that similar themes arise in different survivor accounts and in different countries. Whether the cause of disorder is seen as spiritual, social, psycho-emotional, or biological the process of recovery appears to involve finding meaning, hope, self direction, physiological health and re-connection with others. In showing various positions related to the recovery process, my intention is not to make a judgement about the relative merits of each perspective. People in recovery from mental illness have no choice but to make sense of what is happening to them in one way or another. Ultimately most recovery narratives depict the recovery process as being essentially complex and multifaceted with no single perspective being adequate. A characteristic of all of the dimensions reviewed is that they require active engagement in the world. With this in mind, the discussion now turns to the relationship between doing and recovery.

What is Understood about Doing and Recovery?

In recent decades processes such as deinstitutionalisation, the consumer movement, and more recently person-centred practice have influenced the move to go beyond clinical observation to gain a deeper understanding of the lived experience and participation in everyday contexts for people with mental illness (Anthony et al., 2002). An increasing interest in the nature and patterns of doing for people with mental illness is evident in

recent literature. The variety of evidence being gathered includes first person narratives, qualitative research using narrative and participant observation and quantitative research using time-use diaries, surveys and standardised measures of relevant phenomena. The following sections review the literature relating to the significance of doing for people in recovery under the recovery dimensions discussed previously. However, first the impact of mental illness on everyday engagement will be considered briefly.

How does Mental Illness affect Everyday Doing?

There is a clear relationship between the symptoms of mental illness and the disruption of everyday activity. Medical literature documents and categorises the difficulties that people experiencing mental illness have in perceiving and responding to the world. Indeed, in order to reach the diagnostic threshold, the one common criterion required for all mental disorders is the presence of marked distress and/or significant disruption to one or more areas of functioning, including work, interpersonal engagement and self-care activities (American Psychiatric Association, 2000). Occupational therapy literature has also outlined the impact of specific mental illnesses on various aspects of functioning (Atchison & Dirette, 2007; Bonder, 2004). Impairment to cognitive functioning, including reduced concentration and memory, problems with executive functioning and various thought disorders, have been shown to have a significant impact on engagement in occupation (Atchison & Dirette, 2007; Bonder, 2004). Sensory processing difficulties commonly experienced by people with mental illness include sensory sensitivity in which sights, sounds or smells have an increased intensity leading to distractibility, and low registration, which reflects a slowness and difficulty in making sense of information in the environment (Brown, 2001).

These phenomena are shown in first person accounts of people experiencing mental illness. Participants in one study describe the cognitive and sensory disorder as “like a computer crashing” (Gould, DeSouza, & Rebeiro-Gruhl, 2005, p. 470). The disruption to their daily lives was frightening and unexpected, as simple activities became difficult. For instance one respondent stated “I couldn’t focus on my work.....I couldn’t hear nothing.....I couldn’t focus onI couldn’t hear myself think, I couldn’t hear the thoughts in my head” (p. 470). In another account Weingarten (1997) describes his sensitivity to sensory information:

I feel enormous pressure when I encounter new experiences, environments and people, so it is easy for me to become over-stimulated at these times. I have learned to overcome these situations by avoiding them where possible, and going back to them until I mastered them. (p. 128)

Other writers have highlighted the difficulties of volition experienced by people with mental illness. Research suggests that an increase in depression is likely to correspond to difficulties identifying or enacting interests (Kielhofner, 2008). Problems with engaging in activity may relate to a loss of interest in life in general, affecting occupational choices and one's commitment to maintaining a particular lifestyle. Difficulties when engaging in specific activities may reduce enjoyment and limit capacity for engagement purely as a pleasurable experience in itself (Persson, Erlandsson, Eklund, & Iwarsson, 2001). Deegan (1988) also highlighted the link between diminished hope and reduced engagement in activity, stating that "when one lives without hope, when one has given up; the willingness to 'do' is paralyzed as well" (p. 94).

A common finding in the literature is that people with severe mental illness have a lower level of structure and organisation in their habits and roles than the general population (Bejerholm & Eklund, 2004; Leufstadius & Eklund, 2008; Leufstadius, Erlandsson, & Eklund, 2006; Minato & Zemke, 2004a; Shirmitras, Fossey, & Harvey, 2003; Suto & Frank, 1994; Weeder, 1986). Other studies indicate that people with mental illness are more oriented to the past rather than the future. Psychosis may cause future images to become disorganised and confused, leading to difficulty in stating future goals, while in depression the future can seem hopeless and menacing and the present may seem stagnant (Oakley, Kielhofner, & Barris, 1985). Further research has noted an over rigidity in scheduling for some people (Bonder, 2004; Katz, 1998).

People with mental illness are consistently under-represented in employment and education statistics (Anthony et al., 2002; Shirmitras et al., 2003), and feel restricted in their participation in community based leisure pursuits (Noordsy et al., 2002). Hvalsoe and Josephsson (2003) reported that informants in their study described how they had either lost almost all their valued roles or had experienced roles as being threatened. In another study, even though occupational therapy intervention increased participation in work and student roles across the sample, the numbers engaged in these roles was still only 30%, compared to almost 100% for people of similar ages from the general population (Eklund, 2001). Lack of involvement in gainful employment removes people with severe mental health problems from the mainstream of society, maintaining their peripheral status in the everyday public world (Crist, Davis, & Coffin, 2000).

Research also demonstrates the significant impact of the social, cultural and institutional environment in restricting or supporting engagement in everyday activities for people in

recovery (Bryant, Craik, & McKay, 2004; Hvalsoe & Josephsson, 2003; Link, Struening, Neese-Todd, Asmussen, & Phelan, 2001; Perlick et al., 2001; Peterson et al., 2004; Warner & Mandiberg, 2003). Restricted access to meaningful activities and roles due to contextual factors has been described as 'occupational deprivation' (Wilcock, 2006). For instance, studies have found that the socio-economic constraints and a lack of flexible employment options deprive people in recovery from participating in regular work (Nagle, Valiant Cook, & Polatajko, 2002; Noordsy et al., 2002; Shirmitras et al., 2003). Additionally, people with mental illness who regularly engage in occupations that have no personal meaning, are isolated from everyday places and people, or are repetitive and boring, may experience a sense of alienation from themselves and from others (Bryant, 2008; Bryant et al., 2004). The literature highlights that people in recovery are not only dealing with a primary diagnosis and often pervasive symptoms, but also with significant environmental restrictions which impact on their participation in everyday life. It paints a bleak picture for people with severe mental illness and shows that recovery requires great courage and determination. The discussion now turns to research related to the impact of doing on each of the previously discussed dimensions of recovery.

Doing and Biological Recovery

Literature on the management of mental health symptoms largely refers to the use of medication, psycho-education, the reduction of unhealthy habits and the development of specific cognitive-behavioural strategies (Meuser et al., 2002). However, occupationally focused research and recovery narratives indicate that there is also a strong relationship between everyday activity and the management of mental illness. It seems clear that engagement in everyday occupation can both exacerbate and reduce the impact of mental illness and research suggests that people in recovery develop ways of using engagement to directly manage their symptoms (Cunningham, Wolbert, Graziano, & Slocum, 2005; Minato & Zemke, 2004b; Roe, Chopra, & Rudnick, 2004).

Minato and Zemke (2004b) noted two main strategies for managing stress and mental health related symptoms through engagement in activity. The first coping strategy involved using passive activities such as sleeping, watching television, talking with family and music as a means of escape. The idea that withdrawal from everyday engagement is not necessarily a symptom, but can be an adaptive strategy to manage symptoms is supported in other literature (Bejerholm & Eklund, 2004; Corin, 1998; Deegan, 1996; Gould et al., 2005). For instance Bejerholm and Eklund (2004) suggested that reducing levels of engagement allows people in recovery to observe their

environment at their own pace and control symptoms such as anxiety by interacting according to their perceived capability. The participants in their study largely performed passive activities alone within their own homes, and they seemed to be observing or escaping from the environment rather than interacting with it.

The second strategy for managing stress and symptoms of mental illness appears to be increasing regular engagement in everyday activities. In Minato and Zemke's study (2004b), participants deliberately chose occupations that were potentially stressful, such as work or attending a day centre, as they believed that increased engagement would ultimately promote health by providing structure, predictability and control over stress and psychiatric symptoms. As Leete (1997) pointed out, when one's inner existence is chaotic, the structure provided by a predictable daily schedule can make life easier. Further research also suggests that actively coping with symptoms or gaining relief from them through everyday engagement can contribute to the maintenance of a healthy lifestyle (Haertl & Minato, 2006). Goldberg, Brintnell and Goldberg (2002) concluded that "engagement in meaningful activities can work in combination with other interventions to help lift a depressive mood and contribute to developing a resilience to stress" (p. 37). Other accounts report that creative and relaxing activities and engagement in natural environments can help in the management of mania and psychosis (Copeland, 1997; Frese, 1997). Regular engagement in physical activity including sports and other forms of exercise, has been shown to have a significant impact on a range of mental health symptoms (Cole, 2008; Copeland, 1997), and other literature highlights the importance of replacing routine activities that jeopardise physiological health, such as drug and alcohol misuse, with healthier occupations (Helbig & McKay, 2003).

A number of time-use studies note a correlation between higher levels of time spent in active engagement and the control and reduction of symptoms for people in recovery (Bejerholm & Eklund, 2006, 2007; Chugg & Craik, 2002; Leufstadius & Eklund, 2008; Lloyd, King, McCarthy, & Scanlan, 2007; Minato & Zemke, 2004b; Nagle et al., 2002). It is not necessarily clear in the studies whether higher engagement actively reduces symptoms, or if people are able to be more active because they have fewer symptoms. It is likely that the relationship is reciprocal and determined by a combination of internal and contextual factors (Chugg & Craik, 2002; Onken et al., 2007). However, it is believed that over time, engagement in regular activities becomes a protective factor and when symptoms of illness re-appear, regular occupation helps to make the

symptoms less overwhelming and reduces the need for intervention (Pitts, 2004). In contrast, a lack of things to do, or not being able to do routine activities seems to exacerbate symptoms which inevitably leads to further disengagement and a decrease in mental health overall (Bryant, 2008; Haertl & Minato, 2006).

Additionally, meaningful activities such as work, social and leisure pursuits provide people in recovery with a reason to focus on self-care and illness management (Lloyd et al., 2007; Noordsy et al., 2002). Having opportunities to choose and perform activities not only gives people motivation to get out of bed, it also provides the impetus and opportunity to better understand and address disruptive symptoms (Leufstadius et al., 2006). It seems that the right balance of active engagement and disengagement, including having quality sleep (Kiser, 2003), has a direct impact on psychiatric symptoms. Imbalance in doing can exacerbate illness, with too little or too much engagement increasing symptom levels (Nagle et al., 2002). The combination of adequate structure along with choice and flexibility in doing appears to be crucial in the management of mental health problems (Eklund, 2007; Leufstadius, Erlandsson, Bjorkman, & Eklund, 2008; Minato & Zemke, 2004a, 2004b; Nagle et al., 2002; Strong, 1997, 1998). The available literature points to a definite relationship between everyday doing and the recovery of bio-physical wellbeing through illness management.

Doing and Psycho-Emotional Recovery

There is significant evidence supporting the idea that engagement in everyday activity is also central to people's psychological and emotional recovery after the trauma, losses and despair associated with severe mental illness. It seems that the movement from a sense of complete powerlessness towards a sense of control and agency is a process inextricably linked with engagement in daily life. Overwhelmingly, the research indicates that opportunities to choose and perform meaningful occupations enhances personal growth, by providing experiences of autonomy, self mastery and control for people in recovery (Bejerholm & Eklund, 2007; Eklund & Backstrom, 2006; Hvalsoe & Josephsson, 2003). People who actively engage in the recovery process not only assume more responsibility for managing symptoms and treatment, but also take control of their daily routines. This may begin with a seemingly small but important decision to engage in an activity. Deegan (1996) related that it was making a choice to get up and go shopping instead of lying in bed, which began her journey to recovery.

It seems that periods of reduced activity are not only important for illness management, but they also assist people to adjust psychologically. Gould, DeSouza and Rebeiro-

Gruhl (2005) proposed that doing little or ‘coasting’ offered people with schizophrenia time to reconfigure their sense of self. The individuals in their study could ‘just be’, rediscover who they are, and reflect on their past before moving towards re-engagement in everyday occupations. Similarly, Frese (1997) suggests that taking time away from the stresses of daily living and engaging in less demanding creative activities can help in expression of self and the development of a sense of agency. Nagle et al. (2002) found that people in recovery sought secure environments in which they could engage in interesting or fun occupations that encouraged them to use and develop their skills. In these settings they could easily meet the demands placed upon them and they retained control over their doing. It appears that regular and incremental success in personally valued occupations develops intrinsic motivation and self-efficacy, which perpetuates further engagement. Opportunities for doing in environments that provide for “choice and decision making and which are sufficiently challenging without being overwhelming” appear to be essential in psycho-emotional recovery (Goldberg, Brintnell, & Goldberg, 2002, p. 38). Research has shown that occupation can be beneficial when used therapeutically in a structured setting (Mee, Sumsion, & Craik, 2004; Rebeiro & Cook, 1999). Participant feedback indicated that occupation in mental health service settings can provide opportunities for choice making, learning new skills, feeling useful, having some control and creating hope for future possibilities. The beneficial effects were described as cumulative; a developmental process of building competence and confidence.

A number of time-use studies have also found that people who demonstrated higher levels of engagement in daily life also exhibited higher levels of intrinsic motivation, perceived control and self concept (Bejerholm & Eklund, 2006, 2007; Chugg & Craik, 2002; Leufstadius & Eklund, 2008; Lloyd et al., 2007; Minato & Zemke, 2004a). Other studies concluded that accomplishments and responsibility in work and educational roles helped people in recovery to develop a positive sense of self and to envision a brighter future (Goldberg et al., 2002; Hvalsoe & Josephsson, 2003; Ianelli & Wilding, 2007; Laliberte-Rudman, Yu, Scott, & Pajouhandeh, 2000; Leufstadius et al., 2008). Leisure pursuits also play a part in psychological and emotional recovery. Lloyd et al. (2007) suggest that “participants who are motivated to engage in leisure for reasons of intellectual stimulation tend to be functioning at a higher recovery level with respect to certain characteristics such as personal confidence and hope and goal and success orientation” (p. 39). Furthermore, decisions to engage in activities for enjoyment or fun were described in one study as “markers of hope” (Noordsy et al., 2002, p. 321). The

available literature suggests that engagement in personally important activities can greatly enhance feelings of autonomy and sense of self for people recovering from the losses and despair associated with mental illness. Incremental development in interests and capacity for engagement promotes psycho-emotional well-being by restoring a sense of order, direction and hope.

Doing and Social Recovery

The social dimension of recovery involves the construction of a new social identity through developing meaningful life roles beyond the world of mental health services. It appears that social connection is both a goal of everyday activity as well as an enabler of everyday activity. Several studies have indicated that people in recovery tend to engage in social roles that are not as stressful and allow more flexibility and safety (Bejerholm & Eklund, 2004; Eklund & Leufstadius, 2007; Leufstadius & Eklund, 2008; Leufstadius et al., 2006; Minato & Zemke, 2004a; Shirmitras et al., 2003; Suto & Frank, 1994; Weeder, 1986). One study found that although participants living in supported accommodation had few active roles, they still valued having a routine that was shared with other residents, based around television programmes, mealtimes and bingo days (Suto & Frank, 1994). Nagle et al. (2002) also found that in the absence of paid employment participants sought other secure environments that provided structure and opportunities to engage in reciprocal social support.

Despite the apparent need to monitor their levels of daily activity, people with severe mental health problems also express that everyday social roles and routines are meaningful recovery outcomes (Onken et al., 2007). The desire for mainstream vocational, educational and leisure roles is clearly indicated in the research (Hvalsoe & Josephsson, 2003; Ianelli & Wilding, 2007; Lloyd et al., 2007; Nagle et al., 2002). The opportunity for natural social interaction has been noted as being particularly important. Socialising with friends and family, attending mental health programmes, and working or volunteering all rated as being central to recovery and quality of life in general. Performing activities with and for others in supportive environments outside of the home, added to the quality and enjoyment of the engagement (Mee et al., 2004; Yilmaz, 2008). Shared occupations were found to promote the development of supportive social networks, structured routines, social identity and a sense of belonging (Hvalsoe & Josephsson, 2003; Leufstadius et al., 2008; Merryman & Riegel, 2007). Furthermore, activities performed alone at home, such as reading, were also seen as important for making social connections as they provided something to talk about in social settings

(Goldberg et al., 2002).

A major marker of social recovery is paid work, which “is commonly identified by consumers as both a goal and a force in recovery” (Sullivan, 1997, p. 18). Work is described as being important for creating a sense of responsibility and obligation towards others, which motivates continued regular engagement and time management (Laliberte-Rudman et al., 2000; Shrimmitras et al., 2003). Successfully meeting work obligations provides tangible results, recognition from others and a steady income (Ianelli & Wilding, 2007; Mee et al., 2004). The establishment of relationships at work can also open up opportunities for social and leisure occupations outside of work. A sense of belonging and of living a ‘normal’ life can be achieved through work related activity (Laliberte-Rudman et al., 2000). Henderson (2004) reports that engaging in a work role “is the difference between thriving and just surviving...[it] decreases feelings of social isolation, has.... greatly increased my self-esteem and given me greater overall independence” (p. 86). Similarly, Leete (1997) found that “as I work, I become increasingly self-confident and my self-image is bolstered. I feel important and grownup, which replaces my usual sense of vulnerability, weakness and incompetence” (p. 99).

Acknowledging the need for support can be difficult for some individuals in recovery. However, finding the right support can be the turning point that opens up a way forward and provides opportunities to engage in a wider range of roles (Gould et al., 2005). Several studies indicate that living with other people leads to more active engagement and regularly doing activities with others results in a reduction of symptoms (Ivarsson, Carlsson, & Sidenvall, 2004; Leufstadius et al., 2008; Leufstadius et al., 2006). Having a trusted social network perpetuates further engagement and greater community involvement through increased resources, available support and opportunities for participation outside of mental health services (Nagle et al., 2002; Shrimmitras, Fossey, & Harvey, 2003).

Social recovery involves the development of roles and shared activities that have either been lost or threatened. The literature suggests that engagement in socially valued and shared occupations supports recovery in mental illness by providing opportunities to build relationships and a sense of belonging. Additionally, the development of supportive social networks is believed to encourage and enable meaningful activity.

Doing and Spiritual Recovery

Because the spiritual dimension of recovery is concerned with people's being as a whole in the context of their past, present and future lives, all of the other dimensions of recovery are incorporated in spiritual well-being. Wilcock (2006) suggested that occupation is not only the medium through which humankind develops, but it also incorporates the opportunities and options that humans pursue to realize meaning, purpose and self-actualisation throughout life. The purposeful action we take (our doing), has the potential to reflect who we really are (our being) and determine how we ultimately develop (our becoming) (Wilcock, 2006). While this trilogy of doing, being and becoming relates to general development across time, it also applies to the process of recovery. The interplay and balance of doing, being and becoming can significantly impact the overall well-being of people with mental illness. This is highlighted in several studies which found a clear relationship between involvement in valued occupations and overall quality of life for people with mental illness (Aubin, Hachey, & Mercier, 1999; Eklund, 2001, 2004; Goldberg et al., 2002; Laliberte-Rudman et al., 2000; Leufstadius et al., 2008).

At the heart of spiritual recovery is making connections with one's being and becoming at a fundamental level. For many people this means finding new meaning and purpose in life by engaging in occupations that connect them to a wider community, a larger cause or a higher power. The recovery stories of Caucasian New Zealanders and people writing in the international literature seem to focus on political and humanitarian issues or in creative expression such as writing or art (Lapsley et al., 2002). Several people have focused on advocating for the rights of people with mental illness and pushed for change in mental health systems. For example, Weingarten (1997) reported how he was able to reconnect with his long held ideals of social justice by becoming involved in the Mental Health Consumer Movement.

[I] began to speak out, write and work on behalf of mental health consumers, who I saw as an oppressed and voiceless minority.... Getting involved in jobs and activities that were consistent with my longstanding ideals helped me find and keep a focus.... Also, serving a cause that was greater than myself helped me get through those nights when the outcome and consequences of my activism were uncertain and problematic. (p. 128)

In the New Zealand literature, organised religion is described as an important factor in both hindering and supporting recovery for Pacific Island people (Malo, 2000), and Maori accounts of recovery highlight spirituality as being significant, including the

return to traditional customs and practices (Fenton & Te Koutua, 2000). Despite varying perspectives of spirituality, the literature suggests that spiritual transformation involves a process of making meaning and connections through engagement in particular forms of activity.

The Meaning of Doing in Recovery from Mental Illness

Any journey of recovery inevitably involves all the dimensions discussed in this chapter. However, one feature common to all of the perspectives presented is that they involve ‘doing’ as an essential element of rebuilding a sense of well-being and life purpose. Kerkser reflected this notion when he argued that “recovery takes place through creation of new patterns of behaviour that make our lives more satisfying and productive” (as cited in Henderson, 2004, p. 83). With similar sentiment, Knowles said “I am hopeful;” “I am willing to try;” and “I discover that I can do” (as cited in Deegan, 1988, p. 14). Whether it is developing healthier habits and routines, setting goals and making decisions about one’s future doing, participating in doing things with others, or creating an overall sense of meaning and purpose in one’s life, it appears that recovery is an active process requiring engagement in the everyday world. A study of occupational meaning for people experiencing mental illness concluded that activities were considered meaningful when they supported “a life approaching normality” (Hvalsoe & Josephsson, 2003, p. 61). In Davidson’s (2003) phenomenological research into the recovery experiences of people with schizophrenia, everyday doing emerged as a significant factor in the participants’ recovery as they moved from a life ‘inside’ schizophrenia to one ‘outside’ of the disorder. The findings of a recent descriptive study reflect the overall themes in the literature related to meaningful occupation and mental illness. The researchers concluded that meaningfulness in occupation arises out of connection with others and the world, enjoyment and fun, being productive and a sense of achievement (Leufstadius et al., 2008).

There appear to be clear benefits of engagement in everyday activities for people in recovery. However, another aspect of concern in this thesis is how occupation is experienced and how meaning is made in the process of doing. The consensus in relation to attaching meaning to occupation seems to be that meaning is interpreted by the individual within the bounds, and influence of, their socio-cultural and physical context. That is, both individual and environmental factors not only shape what is done, but also the expectations of how it is done as well as the significance of the experience (Hasselkus, 2002; Hvalsoe & Josephsson, 2003; Nelson, 1996). One of the key factors

described in the literature as influencing the perception of occupational meaning, is the value accorded to the occupation (Eklund, Erlandsson, & Persson, 2003; Hvalsoe & Josephsson, 2003). Values provide a sense of belonging and correctness in what people do, they “commit us to a way of life” (Kielhofner, 2008, p. 39), and are “a prerequisite of meaning” (Hvalsoe & Josephsson, 2003, p. 68). It is unlikely that any occupation has only one value or motivating factor associated with it (Kielhofner, 2008). Rather, the literature indicates that there are multiple layers of value and associated meaning in most occupations, from the concrete to the symbolic (Hammell, 2004; Persson et al., 2001). In reviewing the literature, it seems that most emphasis has been placed on the concrete value of occupation for people in recovery from mental illness, focusing on the tangible outcome or increased capacity for performance. Some findings have focused on the symbolic value which relates to the personal, cultural and universal significance of occupations. However, there is little exploration of the self-reward value pertaining to the enjoyment and meaning of experiencing the occupation in itself (Hammell, 2004). Hasselkuss (2002) emphasised the notion of meaning in doing and stressed that engagement in activity for the sake of the experience, for how someone *feels* when doing, is equally, if not more important than its outcome or purpose. With this in mind this study endeavours to explore the symbolic and self-reward aspects of engagement as much as it does the concrete meaning.

Identified Gaps in the Literature

The discipline of occupational therapy is based on the premise that engagement in meaningful occupation is the aim of therapy as well as the means to that end (Crabtree, 1997). However, a review of the literature has shown only limited evidence in the form of research to support this belief in the practice area of mental health. The increasing push for evidence-based practice in all health care has highlighted this gap and the great need for relevant research in this area (Craik, 1998; Rebeiro, 1998). Until recently most of the evidence has been expert opinion and the research base is still in the early stages of development (Mee et al., 2004).

There is some discussion in the literature regarding the future focus of practice and research in the area of mental health. A significant theme is the call to examine how personal meaning is attributed to the everyday occupation of people with mental illness (Aubin et al., 1999; Hasselkus, 2002; Laliberte-Rudman et al., 2000). Hammell (2004) argued that “congruent with the values and egocentric ideology of Western culture, occupational therapy has traditionally privileged goal-oriented, purposeful occupations

that have economic and social benefits” (p. 300). She drew a distinction between *purposeful* occupation that in the research is largely measured by socio-cultural standards of what is purposeful, and *meaningful* occupation for which individuals are free and responsible to choose the meaning, within the limitations of the reality in which they find themselves. She went on to say that “despite an alleged commitment to meaningful occupations, occupational therapists have only rarely explored the meaning of occupational engagement or whether engagement in purposeful occupations is sufficient to imbue life with meaning” (Hammell, 2004, p. 300). Leufstadius et al. (2008) have recently added to this call stating that “there is a need for further studies, using in-depth interviews to increase our understanding of meaning in occupation for people with mental illness” (p. 33).

This study sets out to address the lack of understanding in the literature of the complex relationship between occupational engagement and the creation of meaning within the context of recovery from mental illness. As Bejerholm and Eklund (2006) stressed, it is necessary “to study the possible relationships between occupational engagement and the illness process, symptomatology, and the recovery of self” (p. 117). The qualitative design and the philosophy underpinning the research will allow for greater depth of exploration, drawing on rich descriptions of participant lived experience. The weakness of some earlier studies lies in part with the lack of reliability and validity data and also in the limitations of using quantitative research methods to examine concepts that are dynamic, multifaceted and inter-related. The designs used restrict the participants’ responses to pre-determined categories and have not explored the multitude of environmental and social factors that are involved in the formation and expression of meaning.

While some qualitative studies examining the experience of occupational engagement for people with mental illness have recently been published (Bejerholm & Eklund, 2006, 2007; Borg & Davidson, 2008; Leufstadius et al., 2008) there is still a need to directly explore the experience of occupation in the lived journey of recovery. Unlike many other studies to date, this inquiry seeks to uncover the essence of what makes doing meaningful in the wider context of a life journey and not just in therapeutic settings for those recovering from mental illness. According to the interpretative paradigm, meaning cannot be separated from the individual contexts in which the participants exist. It is anticipated that using the participants’ recovery stories will allow exploration of their engagement in a range of social, cultural, physical and institutional

contexts, as well as formal therapeutic settings. This will provide an understanding of the environments that enable and constrain their engagement in the world and their expression of meaning in everyday doing (Hammell, 2004).

Despite calls to investigate ways of using occupation to increase the quality of life and subjective feelings of well-being for people with mental illness (Hvalsoe & Josephsson, 2003), specific therapeutic intervention is not the primary focus of this study. Rather, it is anticipated that increased understanding of the experience and meaning of doing for the participants will show what makes occupation central to recovery. Additionally, the impact of the socio-cultural environment on doing and recovery has been highlighted in the literature review and there is very little research related to the impact of the New Zealand context on recovery and occupation. Therefore, gathering stories related to New Zealanders' recovery experiences has merit and will add to the local and international evidence base. While it has been argued that "there is probably no methodology by which the actual dynamics between occupational, environmental and personal factors could be fully caught and revealed" (Bejerholm & Eklund, 2004, p. 44), in studying the lived experience in rich and descriptive stories, it is anticipated that something of the complexity will be shown and a deeper understanding of these dynamics will emerge. By focusing on the phenomenon of occupation in the context of recovery from mental illness, the nature of the recovery process may be disclosed in new ways.

Summary

The process of recovery from mental illness is complex and multifaceted. The literature indicates that recovery can be viewed from various perspectives and each has its own focus and understanding about what the process of recovery involves. A key aspect highlighted, was the need to change or develop one's engagement in the world in one way or another. It appears that recovery is an active process, requiring the person to make decisions and take responsibility for their being-in-the-world. The literature also shows something of what is understood about how people with mental illness experience and benefit from doing. Recently there has been a growing recognition of the need to better understand the lived experience of doing in the everyday lives of people with mental illness. While the evidence base is developing, there are still clear gaps in understanding, particularly related to the meaning of doing in the context of recovery.

CHAPTER THREE

METHODOLOGY

One does not always have to insist that what one is doing is phenomenology, but one ought to work phenomenologically, that is descriptively, creatively – intuitively, and in a concretising manner. Instead of simply applying concepts to all sorts of things, concepts ought to come forward in movements of thought springing from the spirit of language and the power of intuition.

(Gadamer as cited in Frykman & Gilje, 2003, p. 7)

Introduction

Within this chapter the context of the study will be further explored by outlining the philosophical notions that underpinned the research process. This study dwells in the philosophy and methodology of hermeneutic phenomenology. The following discussion sets out to demonstrate the relationship between the research question, the philosophy of Martin Heidegger (1927/1962) and the use of hermeneutic phenomenology. Specific notions relevant to this study will be outlined and justifications for the methodology will be provided.

Philosophical Underpinnings

This inquiry begins with a central question, which is embedded in the interpretive paradigm and calls for a certain type of understanding. The question asked is, “*what is the meaning of doing for people who are recovering from mental illness?*” In asking this question, the study seeks to understand the participants’ experience of day-to-day activity in the context of recovery from severe mental illness. The interpretive paradigm holds that the world can be understood in terms of the different perspectives people bring to their existence. Therefore, in this study it is understood that meaning is made by the participants in telling their stories, the researcher in dwelling with the data and eventually by the reader who interprets what is said through his or her own historical and social horizons. In keeping with this paradigm, the research methodology is informed by the philosophy of Martin Heidegger. Martin Heidegger was a twentieth century philosopher who wrote extensively on the nature of human being. In exploring the nature of human life Heidegger took up the call of his mentor, Edmund Husserl to “return to the things themselves” (Grondin, 1995, p. 39). For Heidegger this meant going back to the phenomena of everyday living to uncover the essence of being human,

which is typically covered over by the abstract theories, common opinions and collective understandings of society in general. It involved opening one's eyes to what is present in the essential experience of things (Grondin, 1995). In developing his philosophy Heidegger rejected many of Husserl's interpretations, as he believed they objectified experience. Instead, he turned to the philosophy of the ancient Greeks which he saw as the ground of thinking about human being. Heidegger drew much of his inspiration from ancient texts and the Greek etymology of words. His thinking was radical in the way it departed from previous notions of human being and required the creation of new terminology to escape previous understandings (Grondin, 1995). Many other thinkers, most notably Gadamer and the French existentialists have since drawn on Heidegger's philosophy in their work.

Heidegger the Man

Before moving on to further explore Heidegger's philosophy a brief note about the man himself seems necessary. In using Heidegger's philosophical notions it is important to consider the historical background in which they were formed and acknowledge the controversy surrounding Heidegger's life. Heidegger (1889-1976) was born and raised in a small town in Southern Germany, steeped in the traditional culture and practices of pre-industrial Germany. Heidegger's family were poor and he required scholarships to attend Catholic school. He went on to study theology and philosophy, and eventually held a professorship at Marburg University where he wrote his major work, *Being and Time*. In 1929 he succeeded Husserl as the chair at Freiburg University and was voted as rector of the university in 1933 (Inwood, 1997).

While widely recognised as a brilliant thinker, Heidegger has been a controversial figure due to his involvement with the Nazi party in the early 1930s. It has been suggested that his initial support of National Socialism was largely due to his conservative, anti-modernist stance and his desire to return Germany to a more traditional way of life based on agriculture and artisanship (Feldman, 2005). Young (1998) states that Heidegger saw the rise to power of the National Socialists as "a revolution to bring about a spiritual renewal of German life" (p. 12). However, Heidegger resigned from the party early in 1934 following conflicts with party officials and he had no further involvement in political affairs (Inwood, 1997). Although Heidegger appeared to become disillusioned with the direction that the Nazi Party had taken, he has been criticised for his attitude towards his Jewish colleagues and his silence during and following the Holocaust. After careful and extensive research, Young

(1998) concluded that a distinction can be made between Heidegger the man, who was caught up, and to some extent complicit in maintaining the atmosphere and culture of Nazi Germany, and Heidegger's philosophical thinking as a body of work.

Heidegger's political life highlights the need to question his thinking and writing. In my reading of his work I have not seen any evidence of Nazi ideology, but have clearly heard his call for a return to a simpler and more essential way of living. I was drawn to aspects of Heidegger's work that focus on practical engagement in the everyday world, as well as his emphasis on metaphor and poetic writing. There is no doubt about the power of his writing, not in directing thinking towards dogma or ideology, but in opening up thinking and the exploration of fundamental aspects of being in everyday life.

Defining Phenomenology and Hermeneutics

According to Heidegger (1962) "phenomenology is the science of the Being of entities - ontology" (p. 61). In other words, phenomenology seeks to gain a deeper understanding of the nature or meaning of our everyday experiences, of what it means to be human. Phenomenology is essentially a descriptive methodology because it attends to the appearance of things, showing the 'how' of experiences rather than the 'why' (Van Manen, 1990).

As well as being phenomenological, this study dwells in hermeneutics, which focuses on the theory and practice of interpretation. One can show the appearance of things through phenomenology, but to capture and describe that appearance is always an interpretive process (Van Manen, 1990). For Heidegger (1962), to interpret a text such as a story of 'doing' in recovery, is to come to understand the possibilities of 'being' revealed by the text. The stories in this study reveal something of what it is to experience engagement in activity in various states of mental disorder as well as in everyday modes of being. It also explores carers' possibilities of being supportive or obstructive for people in their recovery.

Heidegger (1962) suggests that the need for phenomenological inquiry arises because for the most part, phenomena are proximal and *not* given to us. In other words, we are so close to and involved in our everyday worlds, we overlook or are blind to aspects of our existence. This "covered-up-ness" acts to conceal or disguise the phenomena of everyday life (Heidegger, 1962). Therefore, the purpose of this research is to uncover some of the taken-for-granted and overlooked aspects of doing for people in recovery from mental illness.

The analysis within the study also uses notions from the phenomenologist researcher and writer, Max Van Manen. Van Manen (1997) suggests that good phenomenological research “has the effect of making us suddenly ‘see’ something in a manner that enriches our understanding of everyday life experience” (p. 345). The research should draw the reader in and appeal to both cognitive and non-cognitive sensibilities. Van Manen (1997) goes on to state:

Phenomenological understanding is distinctly existential, emotive, enactive, embodied, situational and non theoretic. A powerful phenomenological text thrives on a certain irrevocable tension between what is unique and what is shared, between particular and transcendent meaning, and between the reflective and the pre-reflective spheres of the life-world. (p. 346)

In the following section I will outline the significant notions from Heidegger and Van Manen that are used in the interpretation of the study’s findings. While it is beyond the scope of this chapter to describe these understandings in great depth, further discussion of the relevant notions is integrated within the findings chapters.

Heidegger’s Notions of Being-in-the-World

In his extensive writings, Heidegger (1927/1962) describes his views on human beings and their involvement in the world. The focus in much of his writing is “Dasein” which is literally translated as ‘being-there’ but is also understood as human being, being-opened or being-in-the-world. This thesis will use the term ‘being-in-the-world’ when describing the participants’ unified interaction with the human and non-human environment. To Heidegger being-in-the-world involves more than being in physical space. It involves *Being-in* a world of involvement or occupation with things, and this is definitive of our total being-in-the-world (Dreyfus, 1991). The term is hyphenated to reflect the wholeness of one’s being, integrated with and not separated from the world in which one acts.

For Heidegger, doing is central to existence because human beings experience movement in time and space through engagement in the world. The nature of our doing determines our interpretation of the world and the direction of our being. Heidegger’s view departs from the philosophical tradition of dualistic rationalism which is captured in Descartes’ assertion that “I think therefore I am”. For Heidegger (1927/1962), in the first instance human beings experience rather than think. We are what we do, and our thinking starts with and is nourished by our lived experience of doing in the world.

There is a multitude of ways of being-in-the-world, all shaped by our involvement with

other things and people. Heidegger (1927/1962) provides descriptive examples of being, such as:

having to do with something, producing something, attending to something and looking after it, making sense of something, giving something up and letting it go, undertaking, accomplishing, evincing, interrogating, considering, discussing, determining... leaving undone, neglecting, renouncing, taking a rest. (p. 83)

All these are ways of Being-in-the-world; they are also ways of concern (or lack of concern). In fact, Heidegger states that our very being-towards the world is essentially concern. It is concern or care that structures our actions in the world, as well as the meaning we attach to those actions. As the study will show, this notion is particularly relevant to the experience of mental illness, where one's being towards and concern for the 'world' can change dramatically.

Heidegger (1927/1962) also points out that we are born into existing structures of concern due to our historical and cultural emersion in a world of others. Our "thrownness" into a particular period of history within a particular family and society provides us with a reassuring foundation for being-in-the-world. For Heidegger, being-in-the-world is being-*with*-in-the-world, and the social world into which we are 'thrown' is saturated with rules, expectations, standards, tasks and roles. Through our being-*with* others we understand what is important, what to do in life and how to do it. We also come to see what sort of human being we 'should' be and gain a sense of who we are.

This emersion in a world of others is unavoidable, and is what Heidegger calls the facticity of being-in-the-world. Through our facticity, certain possible ways of being are opened up and others are closed off. We are thrown into a world that both supports and limits our projects. However, despite the facticity of our being-in-the-world, Heidegger's work shows that we can also influence and shape our own being-in-the-world. Since we are what we do, we are always projecting or acting on, possibilities of 'being'. Heidegger calls this capacity for pressing into the future and taking a stand on our current situation, the possibility of transcendence (Dreyfus, 1991).

Thus, although we may get caught up in the everyday world of others and forget the full meaning of our interactions, it is possible to step back and see what the possibilities for being more truly ourselves are. It could be said that the nature of our doing is important for getting beyond the everyday busyness to 'see the bigger picture'. We not only 'see' or understand through our eyes, but we get a fuller picture or understanding through our

actions and interactions. Our doing has the potential to move us in various directions at various speeds and ultimately it can move us to be more true to our own possibilities of being.

The Life-World Existentials

As described earlier, the aim of this study is to uncover the experience of doing in the everyday lived world or ‘life-world’ of people recovering from mental illness. Van Manen (1990) suggests that there are certain existential themes which “probably pervade the lived experience of all human beings regardless of their historical, cultural or social situatedness” (p. 101). These four fundamental themes, otherwise known as ‘existentials’, have been used in this study to guide my reflection and writing. These themes are: *lived body* (corporeality), *lived space* (spatiality), *lived time* (temporality) and *lived others* (relationality) (Van Manen, 1990). The changing experience of lived body is a central theme within many of the participants’ stories. Even when we are not actively engaged in the world we are in the world in a bodily way. Our being-in-the-world is always embodied and therefore our body both reveals and conceals aspects of our being-in the-world (Van Manen, 1990). The chapters that follow will show how the participants’ experience of their bodies alters as their mode of being-in-the-world changes.

The experiences of lived time and space also take on certain characteristics within the stories. Lived time is subjective time as opposed to clock time or objective time (Van Manen, 1990). Our experience of doing influences time. For example, time may ‘drag’ when we are waiting and ‘fly by’ when having fun. The relationship between past, present and future is another temporal aspect of our everyday doing. Heidegger (1927/1962) points out that the present always contains our past as well as our future possibilities of being.

Lived space is *felt* space rather than the mathematical space which is measured in length, height and depth dimensions (Van Manen, 1990). When we walk into a room we do not usually measure the mathematical dimensions of the space but we do feel a certain way within that space. We can be drawn to things or people in a room or we may distance ourselves from them, as we get a ‘sense’ of the space. Heidegger (1927/1962) suggests that the things we are closest to in physical space are often the things that are furthest from our being-in-the-world, as we overlook or forget about them. These notions of lived time and space also emerge in the participants’ stories as being significant to their experience of doing and recovery.

Lived other is the lived relation we maintain with other people in the interpersonal space we share with them (Van Manen, 1990). As discussed earlier, being-in-the-world is being-*with*-in-the-world, but our experience of 'being-with' can change dramatically depending on our mood and what we are doing. Again, as the findings chapters will show, the different experience of others is a central theme in the findings.

The use of the life-world existentials as structures to guide the analysis in this study is fitting because of the very nature of mental illness. Fuchs (2002) suggests that the pre-reflective dimension of experience is especially affected in people with mental disorder:

For here consciousness loses its ground in the living body as the seat of taken-for-granted habitualities; it loses its anchoring in temporal continuity and its rootedness in the intersubjective commonsense. (p. 321)

All of the participants' stories reveal aspects of their life-worlds and the four existentials emerge as being extremely relevant to the interpretation within the study. The experience of lived body, time, space and others cannot be separated from one's unified being-in-the-world, but they can be differentiated and disclosed. This disclosure is central to understanding the experience of doing for the participants, and will be used to show something of the meaning within their stories.

Why Use Hermeneutic Phenomenology?

In Chapter Two, the literature review outlined several studies that examined the occupations of people with mental illness using quantitative and descriptive qualitative methodologies such as surveys and time-use diaries. The findings of these studies reveal general patterns of doing and themes related to the outcomes of doing for people in recovery from mental illness. Many of the researchers from these studies, as well as other writers, recognise the need for qualitative studies to explore complex aspects of doing such as the experience and personal meaning of engagement. The use of phenomenology in this study is a response to this identified gap in current understandings within occupational therapy knowledge and practice.

In addition, there is a good fit between the focus of this study and the use of a hermeneutic phenomenological approach. The research question asks: what is the meaning of the participants' experience of doing, in relation to their recovery from mental illness? The focus of phenomenology is on uncovering the covered-over meaning within lived experience. Both 'doing' and 'recovery' are not uncommon human experiences, but they are understood in a superficial or general way within the everyday world of others. The shared public meaning of these phenomena covers up the

deeper individual meanings that exist in the stories of people with mental illness. The phenomenological practice of using participant stories as data holds the potential of showing a greater depth of understanding and reveals something of the personal meaning within lived experience.

As well as having a goodness of fit with the research question, the use of life stories in the exploration of occupation or 'doing' has been widely supported within occupational therapy literature (Clark, Carlson, & Polkinghorne, 1997; Molineux & Rickard, 2003; Wicks & Whiteford, 2003). Through the use of descriptive stories the researcher is able to gain an understanding of the form, function and meaning of occupations at different stages of a person's life. Phenomenological stories are particularly suitable for capturing occupational experience, within a cultural context, across time (Turpin, 2007; Wicks & Whiteford, 2003). The overall structure and trajectory of the participant stories was seen as being less important in this study than specific experiences and meaning of doing. Thus, while other forms of narrative inquiry were considered, they were discounted because they lack the 'richness' of personal descriptions and interpretation found in a phenomenological approach (Schwandt, 2000). A more critical perspective was also considered due to the obvious power issues for people with mental illness and the emancipatory aspect of recovery. However, it was decided that a focus on the experience and personal meaning for participants would more effectively answer the research question. Furthermore, hermeneutics has a critical element if issues of power emerge as central to the lived experience (Schwandt, 2000). By shedding light on the lived experience, hermeneutic phenomenology can open up thinking and highlight the need for change in broader social and institutional systems.

Other forms of interpretive methodology are based on the belief that there is a 'correct' or objective process for interpretation in the human sciences. This requires researchers to put their pre-understandings to one side as much as possible, so as not to influence the objective process of interpretation (Schwandt, 2000). In this view, different researchers should arrive at similar themes if the same set of data is interpreted independently. However, the philosophical hermeneutics of this study rejects the notion that there is one correct interpretation of a text. The researcher's historical and social context is deeply embodied and constantly shapes the way he or she understands the world (Schwandt, 2000). Pre-understandings cannot be put to one side and they play a significant part in the negotiation of meaning in hermeneutic analysis.

It is important to note that the aim of phenomenology is not to create effective theory

with which one can explain and/or control the world. Instead it aims to offer plausible insights that bring us more directly into contact with the world (Van Manen, 1990). Like poetry and other forms of art, good phenomenology seeks to reunite human beings with the ground of their lived experience. This makes it an apt approach in the research of recovery from mental illness, as the experience is often one of moving from profound groundlessness to finding one's feet in the world again. It is anticipated that insights gained through using phenomenology will provide a means to understand more deeply, aspects of being-in-the-world related to doing and recovery.

Summary

In any study it is essential to reveal the context within which the research has developed and within which the study's findings sit. This chapter has described the philosophical and methodological context of the study, providing explanations and justification for the use of hermeneutic phenomenology. The philosophy of Martin Heidegger was briefly introduced and notions relating to the life world were outlined. The following chapter builds on this discussion by laying out the way in which these methodological considerations have been applied in the research design and procedures.

CHAPTER FOUR

METHODS

Introduction

In the preceding chapter the particular philosophical and methodological approaches used in this study were discussed. The interpretive nature of the research was highlighted and the use of hermeneutic phenomenology was justified in relation to the primary research question. This chapter shows the particular pathways taken through the research journey. Van Manen (1990) suggests that in phenomenology there is no recipe and no foolproof techniques exist that guarantee to produce repeatable scientific results. However, he does outline some principles that have guided the interviewing and analysis within this study. The following discussion lays out the use of these principles in greater depth, but first an overview of the ethical considerations and the involvement of participants in the study are provided.

Ethical Considerations

The protection of the participants was a key ethical consideration in this study. People who are in recovery from mental illness are often subject to the removal and abuse of basic rights such as privacy and choice, within and beyond mental health services. In addition there is a real potential for emotionally sensitive experiences and information to arise in the life stories of people with experience of mental illness. To ensure participation was an informed decision, invited participants were given detailed information about the interview process (Appendix A) and asked to sign a consent form regarding their participation, including the recording of interviews (Appendix B). It was also important to provide opportunities for participants to check and verify the transcription of their narratives and to ask for any inaccurate or sensitive information to be removed from the research data. Further strategies used to protect the participants are outlined in the following discussion. Ethical approval for the study was gained from the Auckland Ethics Committee (Appendix C) and the Auckland University of Technology Ethics Committee (Appendix D).

Introduction to the Participants

Thirteen participants took part in the study and all offered their stories freely, for which I am ever grateful. A general overview of the group's demographics is provided here rather than individual details, in order to protect the identity of the participants. Eight of the participants were women and five were men, with ages ranging from mid twenties to late fifties. Four of the participants identified as being Maori, with the rest being of European descent. Three had a primary diagnosis of major depression, six had schizophrenia or a psychotic disorder, three had bipolar affective disorder and one had post traumatic stress disorder with associated depression. In addition to their primary diagnosis, several had battled with issues of drug and/or alcohol abuse, and two had addiction issues that required specialist residential treatment.

The time spent in institutions ranged from not at all for one participant, through to more than 30 years for another. Two participants had spent considerable time in forensic services. Most participants had required periods of hospitalisation when they were most unwell. At the time of the interviews three participants lived in supported accommodation, three in their own home with a partner, and the remaining seven lived on their own in a rented home or flat. The gender, age and ethnic mix of the participants provided a variety of perspectives and experiences reflective of those found in most populations accessing New Zealand's adult mental health services. All of the participants identified that they had recovered in some way from the major effects of their illness. However, it was clear through the stories that there were differences in how far each participant perceived they had progressed in relation to where they wanted to be in life.

Accessing Participants

The managers of three different mental health services acted as contacts in the recruitment of possible participants. All of the services provided access to people with mental illness who were not acutely unwell or severely distressed. An outline of the study and a request for volunteers was verbally communicated by the contacts at service user meetings. Possible participants included those that; had been diagnosed with a serious and enduring mental illness by a registered psychiatrist, who saw themselves as having made significant progress in recovering from their illness, who had the ability to give informed consent for participating, could communicate in English, were free of acute symptoms and were living in the Auckland area.

Further written information was available on the participant information sheet for

people interested in being involved. The contacts provided copies of the information sheet and a consent form for possible participants to take away and consider. Fifteen people then either contacted me to communicate their interest, or a contact person did this on their behalf. Most of the possible participants met with me prior to the first interview to discuss their involvement in the study, and to sign the consent form if they agreed to proceed. Two of the participants already knew me and were comfortable signing the consent form and proceeding without meeting before the interview.

Protecting Participants

The emotional and personal safety of the participants was seen as being vitally important in the design of the study. In telling their stories the participants put themselves in a vulnerable position, and needed to be able to trust me with significant details of their lives. Several safeguards were put in place to protect them. The service managers acted as intermediaries between the researcher and the participants. This ensured that the participants' involvement in the study could not be coerced. In addition, the participants were given written information about the study and had at least two weeks to consider it before making their decision. There was no undue pressure on participants to be involved and two people decided not to participate after discussing the requirements of being involved in the study.

Participants were invited to have a support person with them at all meetings and interviews. This included family or elder support for the Maori participants. However, all participants declined this invitation and said they felt comfortable with no support person. It was agreed with the participants that if they became distressed during or after the interview, then a relevant support person would be contacted to assist in dealing with the distress. This was not necessary for any of the participants. The privacy of the participants was ensured at all stages of the study. The person responsible for transcribing the recorded interviews was asked to sign a confidentiality agreement regarding participant information (Appendix E). The tapes are secured in a locked cupboard in the researcher's home and all identifying information has been removed from the interview transcriptions. All the names of participants, relatives, hospitals or residential areas included in the findings have been either omitted or replaced with pseudonyms.

Assumptions and Pre-understandings

Because of the hermeneutic nature of this study it was envisaged that the development of understanding would occur within a hermeneutic circle (Van Manen, 1990). That is, the research questions would not only influence the stories collected, but the stories would influence the questions. In this approach, it was impossible for me, as the researcher to put my assumptions and pre-understandings to one side, as they were the starting point, leading the way into the hermeneutic circle (Fredriksson & Lindstrom, 2002). It was therefore important for me to recognise the understandings that brought me to the research. By recognizing my own horizons of understanding, I was able to be more open to the horizons of the participants and in this way arrive at a new place of understanding (Smythe, Ironside, Sims, Swenson, & Spence, 2007).

In order to achieve this reflexivity, I was interviewed by one of my supervisors who assisted me in identifying my existing beliefs about the significance of doing in recovery from mental illness. Experiences that influenced my beliefs and preconceptions prior to beginning this study were wide ranging. They came from my personal life and my own engagement in activity, from my work as an occupational therapist and my engagement in mental health settings. They were also influenced by literature and research within the fields of psychology, sociology, occupational therapy and occupational science. As a consequence of these experiences and understandings, I expected occupation to feature as a significant part of the participants' stories, both in relation to loss and disruption of valued activities or roles and in assisting them to cope with and grow beyond the illness.

I also had the pre-understanding that environments and phases of illness and recovery would strongly influence the level of occupational disruption and the significance of activities for individuals. I saw the process of recovery as an ongoing one that involves learning to cope with symptoms through such things as medication or activities. All of these understandings and assumptions potentially impacted on the way that I interpreted and viewed experiences revealed in the participants' narratives. The following story from my own work experience is selected from the pre-understandings interview to illustrate how this could occur.

I was employed in a Forensic unit in England, working with people with mental illness. I sat in the smoking room and just talked to the people in the room. It seemed that I couldn't stop myself from wondering why they were spending so much time in that airless room full of smoke when there were

opportunities to do other sorts of activities. Yet they seemed so much more relaxed and comfortable there.

I hated being in there. The room was thick with smoke and I'm not a smoker myself. In some ways it took me a bit of time to feel comfortable there because I felt like it was a place where the clients sat, that it was their space. And so I was a staff member in their space. As I'm a non-smoker I see smoking as a fairly unhealthy thing to do and as not very constructive or purposeful. At the time, my underlying intention was to get the clients out of the smoking room and doing something more constructive, purposeful or meaningful.

On reflection, the interview text clearly shows professional and personal bias as well as pre-judgements about the value of the environment and of the activity of sitting and smoking with others. My prejudgements regarding what is 'good' and what is 'bad' activity in recovery from mental illness shaped the meaning I attached to the situation. In order to pay attention to the lived experience and meaning within participant narratives, I needed to also hold onto an awareness of my own views. The potential for overlooking possible meaning and understanding in both the interviewing process and the analysis meant that it was important to continually recognise the influence of my own beliefs in the process. There was a balance to be struck in my focus on 'doing' within the recovery stories, as I also needed to recognise other issues and contextual factors affecting the participants' experience.

In accordance with Van Manen's (1990) first principle of phenomenological investigation, my personal and professional experiences are the starting point for this study. These experiences and understandings, which have been outlined here and in Chapter One, are what initially shaped the data collection and interpretation within the study. The methods used in the research process will now be discussed further as the discussion turns to the design of the study.

The Interview as Existential Investigation

Most of the data for this study was gathered using 'conversational interviewing' which is characteristic of hermeneutic phenomenology (Van Manen, 1990). The interviews were a means of gathering experiential stories from the participants, which were later used to uncover deeper and richer understandings of doing in recovery.

The participants chose where they wished to be interviewed. Six preferred their own home while the others chose a quiet room at their work place. The interviews were generally between one and two hours in length. Some participants required breaks during the interview for a cigarette or to use the toilet. Because of the conversational

nature of the interviews, the breaks tended to occur in natural pauses and did not dramatically disrupt the narrative flow.

The participants were invited to do some preparation for the interview by drawing or writing a representation of their recovery from mental illness. They were asked to bring their work with them to the interview to act as a visual prompt when telling their story. Not all of the participants chose to do this, but those that did, brought visual timelines or written notes about their story. These proved to be somewhat useful but not absolutely necessary for the participants.

The recovery stories were collected in two phases. An initial round of interviews with eight participants was completed during my enrolment in a Masters Thesis programme. These interviews focused on the lived experience of doing in recovery. An initial analysis of these accounts was not submitted and I successfully applied to extend my study and transfer into a PhD programme. To add depth to the study I interviewed a further five participants and focused the conversations around some of the themes that emerged in the first round. The intent was to gain a deeper understanding of some of the specific factors and dynamics affecting doing and recovery, rather than simply describing the experience.

My original plan was to conduct two interviews with each participant. In the first interview I anticipated asking the participants to describe their experience of daily activities during their recovery from mental illness. The follow-up interview was to be conducted once some initial themes had been identified so that the meaning of significant experiences could be explored in greater depth. However, most of the participants felt that after the first interview they had told their story and that they did not have much more to say. Two of the participants agreed to engage in a follow-up interview but interestingly very little new information emerged.

True to the nature of phenomenological interviewing, I did not need to ask many questions in most of the interviews. I opened each interview by asking the participant to tell me about their experience of recovery from mental illness. While the participants were aware that I was interested in the relationship between doing and recovery, I did not ask them to describe recovery specifically in terms of doing. I was initially interested in understanding how they experienced their particular condition and their recovery from it. However, it soon emerged that they naturally talked about their journey in terms of a break down of their doing and the subsequent rebuilding of life through doing.

The questions asked during the interview encouraged the participants to describe specific situations or experiences in greater detail. Questions such as; “how did you feel when you were doing that?” or “can you tell me more about what that was like?” usually worked to draw out richer descriptions. If there were long pauses or digressions in the participants’ stories I used other questions to prompt and refocus them. These prompts were designed to get the stories back to the fundamental focus of the study and included questions such as “what activities did you do during that time?”, “can you talk about a time when doing things was particularly difficult for you?” or “was there a time when you found that doing something really helped you?”

All of the participants were encouraged to be descriptive and talk about actual experiences as much as possible. At times the participants did move from experiential descriptions to engage in conversation about the meaning of an experience. This was sometimes revealing but at other times moved the conversation away from experiential descriptions to a more analytical stance. The participants brought their experiences of psychiatric and therapeutic interviews with them and this naturally shaped their responses at times. For example, one participant had previously engaged in a series of cognitive-behavioural therapy sessions, leading him to occasionally analyse his occupational difficulties from this particular perspective rather than in descriptions of lived experience. I also sensed the possibility that some participants worked hard to say what they thought I wanted to hear, perhaps an important skill to have when being interviewed by health professionals. I endeavoured to assure these participants that I wanted to know how it was for them and that there were no wrong or right answers.

After interviewing thirteen participants in total, an adequate depth and breadth of experiences had been obtained in their stories. The final interviews provided similar information and experiences to those collected in the preceding ones and clear themes were emerging from the narratives. This gave me the assurance that sufficient text had been acquired to show the significant phenomena. All interviews and discussions were recorded on audio-cassette or digital recorder with the consent of participants and the resulting data transcribed verbatim. All participants were provided with a copy of the resulting transcript after each interview, to verify that it reflected their story. A summary of the overall findings of the research has also been provided to each participant in acknowledgment of their contribution.

Analysis as Phenomenological Reflection

As each participant interview was completed, it was transcribed directly from the audio-tape by a third party. All but one of the interviews was transcribed by the same person and all pauses, repetition and intensifying vocalisations were left unedited in the transcripts. Once the transcripts had been sent to the participants for verification of accuracy, I began the process of interpreting the narratives using Van Manen's (1990) principles for thematic analysis. According to Van Manen (1990) the theme is the means to get at the phenomena; it gives shape to the shapeless, describes the content of the experience and is always a reduction of the full meaning of the experience. As in the interviewing process, thematic analysis occurred in two phases, with the initial interpretation forming a platform for a second round of interviews and analysis with five new participants. The second phase of analysis led to a greater depth of hermeneutical interpretation. In general both phases followed the same process and this will be discussed now.

Firstly, I read through each entire interview several times to get a 'feel' for the data. After dwelling with the stories for some time I was able to draw out salient experiences. These experiences often announced themselves from within the text because they were particularly descriptive and often emotionally powerful. Naturally I was drawn to the participants' experiences of doing in various circumstances. However, as time went on I recognised that some of the less descriptive accounts and less active experiences also showed something of the meaning of doing for the participants.

Van Manen (1990) describes the hermeneutic phenomenological principles of 'tracing etymological sources' and 'searching idiomatic phrases'. Tracing etymological sources involves retracing the origins of words, in order to move beyond the covered-overness of their everyday meaning. When interpreting the participant stories I searched out the roots of several key words, helping to bring each word back to life so that it could once again "reverberate with lived meaning" (p. 58). Searching idiomatic phrases involved examining everyday expressions from the participant accounts to reveal key aspects of phenomena. For instance, 'cracking up' is an idiomatic phrase commonly used in reference to mental illness which may reveal something of how the phenomenon is experienced. These techniques added a depth of understanding and reveal further meaning in the participants' lived experience.

From this 'naïve' reading I recorded some initial themes in my journal so that I could visualise as a whole, the many parts of the texts which were considered to be

significant. Many of the themes at this stage related to the nature of the participants' occupation, such as 'doing as expression', 'doing as structure', 'doing as identity'. A few themes related to the influence of people and environments on the participants' doing also emerged. The credibility of the themes was checked by my supervisors.

Using these themes, I proceeded to extract relevant accounts from the transcripts by copying and pasting them onto a new document on the computer. As is acceptable when using the chosen methodology, the grammar and punctuation was edited where necessary to make the accounts more readable, although care was taken to retain the original words and essence of each story. The excerpts were then printed off and sorted into relevant themes. Smith (1998) suggests that "this 'segmentation' process frees the text temporarily from its context and allows the researcher to see the whole and parts simultaneously" (p. 215). In other words, the extracts were separated from the original transcripts but were brought back together as a whole, reconstructed in a thematic form.

Another layer of thematic analysis was added to the interpretation through the use of the Van Manen's (1990) life-world existentials. All of the thematic accounts described aspects of lived body, time, space and other within the participants' experience of doing. This was a significant turn in my understanding of the participants' experience as I began to see particular modes of doing within each of the stories. The life-world existentials seemed to take on a distinct character for the participants in different modes of doing. I began to write some initial interpretations of each account and followed Van Manen's (1990) principle of consulting phenomenological literature by exploring Heidegger's (1927/1962) notions of being-in-the-world. New understandings were gained from Heidegger's philosophy and incorporated in my analysis to add further depth. This writing was again cross checked by supervisors and re-writing completed as my understanding grew.

The next stage of analysis involved exploring and showing the themes that unified all of the participants' stories. With the earlier recognition of what seemed to be distinct modes of doing, this process took on a life of its own. I read a variety of literature including philosophical writing related to doing, first person accounts of mental illness and recovery, poetry about different modes of doing and psychological perspectives on intention and activity. The use of experiential descriptions in literature and art is regarded by Van Manen (1990) as sound method for uncovering new meaning in phenomenological interpretation.

One night while dreaming, the notion of using a metaphor to unify the stories found me

and I began a creative process of crafting the themes into a suitable image. The metaphor was then expressed through further interpretation in writing and re-writing. I dwelled in Heidegger's notions and the feedback of my supervisors throughout this process. Aspects of my findings were also presented to occupational therapists and discussed with people who had experience of mental illness during this phase. Feedback from people in these groups indicated that there was good congruence between my forming understandings and their experiences.

The last phase of analysis was the writing up of a final synthesised interpretation in the form of the following findings chapters. The essential themes have been highlighted as parts and their relationship to the whole is shown through the use of the unifying metaphor. In the presentation of findings, not all participants are represented equally with some having a stronger presence than others. This partly reflects my decision to use accounts that depicted the relevant phenomena most clearly, and inevitably the descriptions of some participants were more vivid than others. However, this does not negate the value of the stories that were not included, as these contributed to the understanding of the experiences and determined the final themes.

Van Manen (1990) stresses the importance of writing and rewriting as part of the interpretive process. In writing and rewriting the findings of this study I have attempted to attend to the speaking of language, to how the text "divines" and "inspires" understanding. I have written thematically, uncovered the lived existentials and provided varied examples of lived experience from within the stories. Ultimately, I aimed to go beyond the realm of what can be said clearly and distinctly to that which is difficult to articulate and often unspoken in the being of everyday life.

Establishing the Study's Trustworthiness

The notion of rigour in qualitative research has been widely discussed, and as yet no consensus has been reached regarding the most suitable way to assess the trustworthiness of studies (Rolfe, 2006). There has been a general movement away from the replication of quantitative criteria such as reliability and validity, and while no definitive guidelines exist, several writers outline possible methods for determining 'goodness' in qualitative methodologies (Emden & Sandelowski, 1998; Koch, 2006; Rolfe, 2006). In this thesis the term trustworthiness has been used to represent the overall goodness of the study's process and content. Aspects of trustworthiness will be discussed using the notions of reflexivity, credibility, transferability and dependability,

which were first proposed by Guba and Lincoln (1989) and then further described and applied by Koch (2006; Koch & Harrington, 1998).

Reflexivity

In the preceding chapter the interpretive nature of this study was laid out, including the assumption that meaning is interpreted through individual experience, within the facticity of being-in-a-world of others. This assumption holds true for the hermeneutic reflection within this study. The interpretation of meaning within the participants' experience is my interpretation, but at the same time the meaning is shaped by my world of involvement, and therefore contains many other voices (Koch & Harrington, 1998). In this respect it was essential for me to explore and make explicit the context in which I came to the study as well as my pre-understandings of the phenomena to be explored. This reflexivity is essential to the trustworthiness of the study and required me to make ongoing observations of myself as a researcher in relation to my pre-existing and new understandings. In the introductory chapter I outlined my involvement with family, church, and the profession of occupational therapy as well as various people with mental illness. The study findings speak of these experiences. The discussion of pre-understandings in this chapter highlighted other influential experiences such as reading powerful literature. The voices of the authors of that literature lie within my interpretation also. Of course the findings speak of my involvement with the participants themselves and my thesis supervisors who have also pointed to possible meanings within stories.

Recognising this fore-having, my own involvement was just the beginning of an important process of reflexivity in this study. As discussed earlier, my explicit laying out of assumptions and pre-understandings served as an entry into the hermeneutic circle by creating an outline of a "whole" from which the parts could gradually be uncovered, but then always brought back as a whole again (Van Manen, 1990). The use of a journal was an important strategy for maintaining entry into this reflexive process. In addition to journaling my thoughts and feelings, the reflexive process also involved discussion with peers and supervisors, extensive reading of Heidegger and other relevant literature, writing and rewriting and dreaming. I found that it was in the dream state between deep sleep and awakening that many insights arrived and many "a-ha" moments occurred. I also utilised poetry and art in reflecting on different modes of doing, some of which has been included at the beginning of each of the findings chapters.

Credibility

A study is said to be credible when it presents descriptions that are faithful to the participants' experience. It should be clear to the reader how the interpretation was derived from the collected stories, and readers should be able to recognise the experience described if confronted with it (Koch & Harrington, 1998). The method of data collection and interpretation for this study has been explained within this chapter and I strove to ground my interpretation in this material. The structural consistency of the data collection and writing process also assists credibility. Using audio-taping and a consistent process for interviewing, transcribing and thematic analysis ensured that a similar range of experiences was collected and that all narratives were treated with equal transparency and care. As mentioned previously, all participants were given an opportunity to check their interview transcript and request alterations. In supervision, my interpretation of stories was explored with both supervisors. My journaling also helped to maintain the credibility of the study as my own assumptions were identified and their influence monitored throughout the interpretation process. Other recovery literature and phenomenological accounts of mental illness have shown resonance with and informed the interpretation within this study. However, ultimately it is up to the reader to judge how credible the described experiences and interpretations are, based on what is presented.

Transferability

The findings of this study represent an interpretation of the unique experiences of thirteen people with mental illness. In this form of research, questions naturally arise such as; "can the results be generalised in any way?" or "can the conclusions be transferred to other people in other settings?" For the findings of this study to be transferable the reader needs to have some understanding of the context and experiences of the participants. If there is clarity in the accounts and interpretations, then the reader is able to make a judgement about levels of congruence or fit with other contexts (Koch & Harrington, 1998). The potential for transferability of findings from this study is increased through the use of purposeful sampling of people with severe and enduring mental illness and the rich and dense descriptions of lived experience. It is anticipated that in reading the stories, as well as the interpretation, the reader will have a clear sense of the key phenomena and the circumstances in which they occur.

Dependability

Dependability relies on the thorough and open reporting of the research process. The reader must feel confident that the way in which the data was collected, and the manner in which philosophical, methodological and interpretive decisions were made is trustworthy. The process of this study has been audited in several ways. I maintained a journal of ideas, insights, questions and feelings throughout the research process. I also kept notes and records of feedback from supervision sessions, which reflect the emergence of notions and themes. Interpretive decisions were made more explicit and refined through the writing and rewriting of findings, following reflection and feedback. As previously outlined, feedback was provided by academic and occupational therapy peers as well as supervisors. I presented preliminary findings to other students and staff at the university as well as to several occupational therapy groups. A decision trail can be identified throughout the research process.

Some evidence of the dependability of the findings already exists. Several therapists who work closely with people experiencing mental illness have commented on the resonance of the findings with their own experiences and observations of clients. People who have experienced mental illness have also indicated a fit between their experiences and those described in the stories and findings. One of the participants read some of my analysis and wrote to me stating “It was so interesting! I think you have done a great job. You captured my situation really well and I could really relate to the other stories as well”. After one presentation of findings a comment from a member of the audience has particularly stayed with me. It was made by a woman with experience of mental illness who said she did not see anything special in what I presented, “it was just commonsense”. I took this feedback as a phenomenological nod of sorts. She had experienced what the study was showing and therefore it was indeed ‘common’ sense to her. For other members of the audience who had not experienced mental illness, the sense gained from the findings was not common and so provided insights and new understandings of the phenomena. In this way the goodness of fit between the research question and the use of hermeneutic phenomenology as a methodology is affirmed.

Summary

This Chapter has outlined the design of the study, including the processes of recruiting participants and interviewing and analysing the participants’ recovery stories. The ethical considerations have been outlined and the trustworthiness of the study has been discussed using the notions of reflexivity, credibility, transferability and dependability.

Narratives have been shown to be a rich source of phenomenological material, effective for uncovering personal meaning related to people's experience of occupation as well as recovery. In the following findings chapters the discussion turns to the participants' stories of doing during their process of recovery, and it begins to uncover something of the meaning within their lived experience.

CHAPTER FIVE

BECOMING UNWELL AS UN-DOING

*The lizard on the wall, engrossed,
The sudden silence from the wood
Are telling me that I have lost
The possibility of good.*

*I know this flower is beautiful
And yesterday it seemed to be.
It opened like a crimson hand.
It was not beautiful to me.*

*I know that work is beautiful.
It is a boon. It is a good.
Unless my working were a way
Of squandering my solitude.*

*And solitude was beautiful
When I was sure that I was strong.
I thought it was a medium
In which to grow, but I was wrong.*

*The Jays are swearing in the wood.
The lizard moves with ugly speed.
The flower closes like a fist.
The possibility recedes*

(James Fenton)

Introduction

In Fenton's poem the overwhelming and pervasive nature of mental illness is captured, as even a beautiful flower becomes a closed fist as all possibility of goodness recedes. This chapter sets out to describe the participants' lived experience of mental illness, which appears to be characterised in the initial stages by a process of diminishing possibility. It is anticipated that in showing the relationship between doing and mental illness, a foundation will be created for understanding the meaning of doing in recovery from mental illness.

Participants' stories will be drawn on to show how becoming mentally ill is much more than a brain sickness. Indeed, to say that someone who is experiencing serious mental illness is unwell or feeling a certain way does not fully capture the extent to which the experience challenges and changes the person's being-in-the-world. The lived experience of mental illness is not a biomedical phenomena consisting of clusters of symptoms and changes in neurotransmitter levels. Nor is it simply a psycho-emotional or social phenomenon created by faulty patterns of thinking and behaving or specific

dysfunctional relationships. In acute periods of severe mental illness, extremes of emotion, thinking and perception are all experienced, and at the heart of the phenomena is the transformation of the individual's lived world as a whole. The experience is one of dislocation, where all one's possibilities recede, as the world becomes unfamiliar, ugly or threatening. A feature of the process is the change that people experience in relation to their engagement in the world. The transformation in the participants' lived world and changes in their everyday doing appear to be inextricably linked and their stories begin to show something of the relationship between doing and being-in-the-world.

In uncovering the structure of Being, Heidegger (1962) begins his analysis with everyday, practical activity. He suggests that our being-in-the-world is not so much a spatial relation, but rather it indicates the way in which human beings relate to other human and non-human entities in a familiar world of involvement. Our interaction with other entities is primarily through intentional doing, that is, the active and directed embodiment of our unique self within the world at hand. Doing is the interface between our self and the surrounding world, and it is at this interface that we are shaped and that we in turn shape our very being.

Taking Heidegger's analysis of being-in-the-world as a starting point, it might be said that doing is the fabric of all human beings' lives. The fibres, threads and strands of our activity which we weave through our everyday being-in-the-world, combine to form a rich and intricate fabric. To illustrate the nature of doing in relation to recovery from mental illness, the metaphor of 'doing as the fabric of life' will be utilised throughout this and the remaining chapters. At the most basic level our actions (e.g. hammering) form the fibres of the fabric. These intentional acts are the component parts of our deliberate engagement in the world. When woven together they create recognisable threads of activity (e.g. building a fence). In the language of Heidegger (1927/1962), the complete threads of activity are the "towards-which" of the fibres of our doing. In turn, these threads interweave with other related activity threads to form larger role strands (eg. the role of 'builder') that can be fabricated into a 'garment' or an overall lifestyle. A lifestyle has been defined as a distinctive mode of living that is both observable and recognisable and over which the individual has choice" (Christiansen, 2005, p. 80). Thus, it is in this way that the things we do everyday form the fabric of our lives – a fabric which ideally fits our unique selves in the form of lifestyle which we shape and get 'wrapped up in'.

The use of metaphor in phenomenological inquiry allows a phenomenon that is hidden to be shown and explored in a new light. Lakoff and Johnson (1980) suggest that the essence of a metaphor is understanding and experiencing one kind of thing in terms of another, which opens up new meaning and possibilities. The intention of using metaphor in the following chapters is to show the experience of recovery in a different light and open new ways of understanding the dynamics associated with the experience. However, the discussion in this chapter will first turn to the experience of having the fabric of one's life unravel and being left with a lifestyle in tatters.

The Experience of Un-doing

When asked to tell their story of becoming mentally ill, the participants in this study describe a distressing transformation of their being-in-the-world. The following excerpts from Kay and John's stories show how pervasive the transformation is when one is thrown into the world of mental 'illness'. Heidegger (1962) describes the notion of thrownness as a part of our everyday being-in-the-world. We are thrown into the world when we are born and without choice or planning, find ourselves taking on the values and expectations of that world through our interactions and engagement in doing. However, at times through life we can also find ourselves thrown into other precarious worlds where the certainties of our Being are challenged. Here, Kay explains what it is to find oneself thrown into a world of depression:

There's more to it than that, than the word depression. It's like I've got a ton of rocks on my shoulders and I'm being pulled down. Bursting into tears without having a reason. If I am reading a sad story, watching something sad on TV, I can understand those tears, but just wanting to cry for no apparent reason. Pulling the sheets over the top of my head and just wanting to sleep; 'stop the world I want to get off'. It's an effort to get out of bed, to think, to do, to survive. I'm tuned to people's aggressive, negative behaviour and it's not a nice place to be in. The world sucks.

In Kay's account, depression is more than a word or a feeling; it is a different attunement to the world. Kay is pulled down and oppressed by the world in which she finds herself. She finds it hard to cope with the demands of the everyday world which relentlessly carries on despite her wishes to stop it and get off. Kay is not in control of anything in her world, including her own emotions. For Kay this is not a being-in-the-world of everyday engagement as Heidegger described. She cannot actively engage with other people or things while everything is such a struggle. Kay's world is disordered and she no longer feels at ease in it. Heidegger (1962) describes this type of experience as *unheimlich* or 'uncanny' - a state of not being-at-home-in-the-world (p. 233).

John also experiences a form of existential homelessness as he finds himself in a strange world of psychosis while walking through the streets of his local neighbourhood. Although the streets are very familiar to him, he is not completely at home with his being-in-the-world either.

I liked to go for a walk around about when my illness started. I used to wander out at night. I went for a long walk and I saw these two fire engines driving up and down and I walked a bit further along and there was a 24 hour garage open and I bought a coke and as I was going out of the garage one of the fire engines drove along the road near the garage. So I walked a bit further along to the school and I could see one of the fire engines driving up the road and I saw one of the firemen and he asked me what the time was. I told him it was 4.00am, because when I was at the garage I looked at the clock and it was 4.00am. I walked a bit further and I turned around and he turned around and we were both looking at each other and I thought this guy must want a chat. So I got talking to him and he asked me where the motorway was and I said you go along Ridge Road into View Road... and we got talking, and as I was talking I suddenly realised that I had seen this guy in a dream at the fire station. There was a fireman out there in his uniform you know, he had this very deep voice, it was kind of like a twangy, winey, voice and, it suddenly hit me that I had seen this guy. His voice triggered it off. He seemed sort of a nice sort of guy, a nice friendly sort of guy and, and I eventually broke off and walked away. I was very puzzled after that and, so I was out all night, really strange, you know. I was only looking at the UFO's and man, that was when it happened you know, really weird you know. I must have dreamt it at the time, 4.00am and deep down in my subconscious thought more about it and, when I was speaking to him it might have triggered it off and I think that is what happened.

John's world is puzzling to him as the distinction between night and day, dreams and conscious perception becomes blurred. He finds himself in a world where objects and people take on an unnerving significance. However, the significance of people and objects is not a familiar or comforting one as the boundary between John's internal world of dreams and the external world begins to dissolve. John spends the whole night walking through the streets attempting to make sense of his experiences and maintain a sense of coherence in his shifting world. Later, John's lived world changes even more dramatically.

It speeded up around August 1985, it got worse, something about the aliens, demons. I was watching a lot of 'Doctor Who' and reading really horrible comics, revolting stuff about aliens and all that. I had so much to think about I got on a real high because I would think about this and think about that and think about the aliens and what they were doing on the planet and where that planet was and the demons. I got on a sort of high, a real over-excitement all of the time, you know I was really hyped up. Looking back now, thinking of going into the fiery pit with the demons I must be mad. Imagine those big flames, horrible - with the aliens.

As time goes on John's world becomes increasingly foreign but increasingly stimulating. His lived sense of time changes dramatically as his world gains momentum and everything speeds up. The line between John's internal and external world appears to have almost dissolved completely as comic and television characters merge into his lived world.

While all the participants' had unique experiences in the way their worlds changed through mental illness, every one of the stories reflects major changes to the way the participants engaged in the everyday world of doing. They invariably described the process in terms of what they were doing at the time and how their active engagement in the world changed. It is in this phenomenon that the relationship between mental illness and doing begins to show itself.

From the experiences described in participant narratives, it would seem that in mental illness there is a parallel process of change in doing and being in the world. This reflects Heidegger's (1962) notion that doing and being are inseparable as our very being-in-the-world is created and maintained primarily through our practical engagement in the world. Through doing we develop an understanding of the world and of our selves. According to Heidegger (1927/1962) our thinking and reflections are always secondary to practical engagement. Our doing-in-the-world is inextricably linked to our being-in-the-world. Major changes in our being will always result in changes in our doing and vice versa.

The accounts of Kay and John show something of how mental illness involves the experience of finding oneself in a different world than that of the everyday world of doing. Kay was weighed down and not in control within her oppressive world and could only respond by withdrawing to her bed. John found himself propelled into a fast paced world where aliens and demons became more significant than his previous everyday activities. The process of disengagement from the busyness of the everyday world is common to all the participants' stories. It appears to involve a loosening of the structures that support each individual's doing and being-in-the-world. Indeed, phrases used in everyday conversation such as "cracking up", "falling apart" and "losing the plot," reflect this disintegration of structure in one's being and doing during mental illness. The following passage shows the paradox of disintegration in mental illness. If it is the self that falls apart, then who or what is left to pull one's self together again?

Something has happened to me- I do not know what. All that was my former self has crumbled and fallen together and a creature has emerged of whom I

know nothing. She is a stranger to me....She is not real – she is not I...she is I – and because I still have myself on my hands, even if I am a maniac, I must deal with me somehow. (Jefferson as cited in Estroff, 1997, p. 40)

Pragmatically, undoing refers to the inability to engage in and interact with the world as one previously did. It appears to occur at several levels and results in a state of not being one's self. The process of undoing will now be considered further by using participant accounts to show the lived experience of body, other, time and space during the unravelling of everyday doing. The first aspect of undoing occurs at the level of specific actions and goal directed activities, which would normally form the building blocks of our being-in-the-world.

The Weakening of Fibres and the Unravelling of Threads

In the participant stories, it seems that the disintegration of their lifestyles begins when the basic fibres of action weaken, leading to the fraying and unravelling of activity threads. It would appear that this process occurs in response to either a specific event or to circumstances over time. Seidner (1997) suggests that situations that involve unravelling such as this also involve the threat of or the actual loss of the individual's usual life-world. Typically, it is the loss of meaningful interactions with people or places that were once experienced as anchoring one's everyday life. The participant stories in this study reflect this notion, as their unravelling is inextricably linked with social role loss such as marriage separations and loss of employment. However, it is not clear whether the unravelling of activity threads follows the loss of roles or indeed, the loss of roles occurs because of the unravelling activities. The participants' experiences suggest that either scenario can occur. It would seem that no matter what the initial trigger for undoing is; eventually the person's engagement in the world unravels dramatically and completely transforms their being-in-the-world. The losses can be overwhelming and the person, not at-home-in-the-world, is incapable of thinking about or doing ordinary tasks.

Initially, the process of unravelling may be subtle as specific action fibres weaken and the fraying of threads begins gradually. In the early stages others may not notice the fraying and it may be easily covered up. Looking back on his experiences, Mike describes how insidious and hard to recognise the process of unravelling can be in the early stages.

I think I first started to get depressed when I went to University. I was 18 and although I did quite well, I had started to get ill near the end of the year. Though nobody recognised it and I didn't really recognise it, I would just go

for long walks and wander around pretty aimlessly. Up until then I had played a lot of football, I had run. I stopped that year and never went back to it.

While he did not identify it at the time, Mike now recognises that as time passed his engagement in the world-at-hand changed. His sporting activities went from being social and goal directed to more solitary and aimless in nature. This loss of intentionality in the world is a common theme in the participants' stories of undoing. Later, Mike's fabric of doing becomes increasingly unravelled as his engagement in the world changes.

I used to love gardening. People would say that if I could, I would rig up lights so I could work all night in the garden. As time went on, I don't know what happened, I really lost interest. I brought some plants and I let them die, and that is just unlike me, so I don't know what happened.

I did have one bad experience where I was going to chop part of a tree out. I looked over, and I thought the people next door were talking about me. I had never had that kind of feeling in my life before, but it is galvanised with gardening in my head now and I went inside and couldn't do it.

In this account, even well established threads of activity begin to unravel as Mike's love of gardening is replaced by disinterest. The excerpt shows once again how familiar places and people can become strange and unfamiliar. The garden had long been a place in which Mike was at home; a place where he worked so comfortably that he could have stayed there all day and night. Now, there is nothing to hold his interest, the garden is not an inviting place and the neighbours have become suspicious and not to be trusted. After weaving the threads of activity related to gardening over many years, Mike finds that they have now frayed and unravelled. The activities of gardening seem to have been contaminated and detached and Mike's lived world becomes that much smaller as he retreats into his house. The unravelling of Mike's activity threads is a process that is common to all the participants in this study. Another feature of the process is the change in how one's body is experienced.

The Lived Body Becomes Unavailable

In the process of undoing the lived body takes on a different character. The participants in this study describe their bodies becoming increasingly unavailable to them for practical engagement in the world. An excerpt from John's story shows how embodied doing changes.

I couldn't keep still all the time, couldn't sleep at night, I found it really hard to sleep. You get really restless; I would walk around all the time. All your thoughts are speeded up, you can't concentrate, and you go from one thing to another you know. If you are waiting in a line, in the shopping line, you get really impatient and you get really irritable easily too. So, you can't keep still, you can't sleep, you get irritable, everything is speeded up and you can't concentrate.

John's fast-paced world makes his body restless and his ability to perform basic actions is reduced. He finds it near impossible to focus on any one thing and goes from one activity to another in an effort to maintain the structure and meaning of his everyday doing. He cannot sleep and he constantly walks to keep his body up to speed with his lived world. When John is forced to wait in line at the supermarket he is slowed down and becomes extremely frustrated with the pace of the everyday world.

The following excerpt from June's story describes the difficulty she has engaging in even the most basic actions.

Because my mind is confused, I can't concentrate on the alphabetical order of the phone book, the small print of the phone book, and the street numbers become confused. It would be the same reading a dictionary. When I was teaching German I had a pupil here, I can remember one day and we needed to look up a word in the dictionary. I couldn't do it, so she had to do it for me. I can't sort of explain how it is for me, everything just becomes confused, even taking a walk to the shops becomes confused - do I really know the route... you know? It is just a general confused way of thinking. I had a fear of the supermarket and still have. I still can't go because there is so much to choose from, I can't make the decisions and I get too confused.

During un-doing June is thrown into a world of confusion and uncertainty. Self-doubt and fear enter as she questions her ability to find her way to the shops and then becomes overwhelmed with the choices required in the supermarket. In this lived world, June's mind and body are not available as they once were. Here, Heidegger's notion of objects being ready-to-hand or unready-to-hand can be extended to include the lived body as an object. Heidegger (1962) suggests that unlike a rock or a tree, which are what they are, man is able to exit himself. This suggests that one's body can be objectified, particularly when it "breaks down" and requires monitoring. June's experience of her mind in

undoing is that attention and decision-making are no longer available. Her body is not ready-to-hand when she needs it and she loses faith in her own capacities as she asks for help with actions such as using the dictionary.

Losing trust in one's mind and body is a common theme in participants' stories of undoing. Having the basic fibres of one's doing weaken is unsettling and may lead to a questioning of the very fibres of one's being. In the following accounts Mary talks about the uncanny experience of having people on the television and radio talk about her.

I was watching TV one night and Penelope Barr was doing the weather. At the time I was pretty sick and I rang up the station and I say to this guy that answered, 'could I speak to Penelope Barr please'. Then he says, 'who is this, what do you want'? And I said, 'I would like to speak to Penelope Barr' and he goes 'who is this, what do you want? - this is a TV station'. I said, 'just tell that bitch to stop talking about me' and I hung up. They had traced the call and the cops came over the next day and the staff says to the cops 'oh, she is not very well, she is schizophrenic'. That really freaked me out. Another time I was asleep and I opened my eyes and I thought the guy on the radio said to me, 'oh, gee you can sleep, get out of bed' and things like that. These things are clearer to me now but at the time, I was a bit confused.

In her undoing Mary is unsettled and confused by the voices that speak to her through the television and radio. Looking back, she has a sense of clarity about what was real, but at the time of undoing she is not certain about her perceptions, and not able to fully trust her mind and body as she engages in routine activities.

In a similar way, Kay's mind and body are also unavailable to her as she tries to engage her listless body in activity.

I had no physical energy and no concentration. When I read a book it would take me four attempts to even get it to sink in what the story was all about. I have been a bit of a book worm from the age of 10 and for me to have to read a book four times to have any understanding [is just not right]. If there were too many characters in the book, it just wasn't possible for me to read. It was as if I was carrying 10 stones all the time, like I had been dragged down. It took all my energy to be even slightly enthusiastic about the sunshine outside.

Kay's body is not ready-to-hand as it once was. Her mind announces itself as unavailable as she reads and re-reads a book in an effort to follow the basic storyline. Notably, Kay's experience of mental illness is not restricted to impairments of the mind. Her entire body is burdened by an overwhelming heaviness, showing how the lived process of undoing involves a total transformation of body as well as mind. Thus, the embodied character of mental illness is that both mind and body are no longer available

to the individual in the same way. Kay struggles to find the energy to do the most basic actions and cannot muster any enthusiasm for the world.

Some participants also describe their bodies being unavailable as a result of medication they are taking. For example, Tim describes something of the experience when discussing a particular drug.

I also have the side effects from the Haloperidol, stiffness and so you get this sensation that you are going to swallow your tongue kind of thing. I was on Haloperidol for about a year before they took it off me. On Haloperidol, I'd try to get to sleep, I just couldn't sleep, so I used to stay up trying to cope with the side effects. The sensation of swallowing your tongue that was terrible, stiffness of the muscles and things like that. Apparently that drug has been out since the 50's. That was one of the first ones to come out. A lot of people told me that they had side effects similar to what I had, but it does work for some people. Having stiff muscles prevented me from doing things sometimes.

While medication may assist in reducing or halting the process of undoing at times it also contributes to the loss of engagement in the world and thus dramatically changes the individual's being-in-the-world. Mike also recounts experiencing bodily changes due to medication.

I realised that I had to do something about my weight because of the Lithium and Cipramil. The dose is not that bad, but put together they are a monster and they give you cravings for carbohydrates. I bloated out. I had never been that big before, I mean I was really big. It was horrid, feeling depressed and having that. I used to really feel like I was useless.

As the side effect of his medications leads to weight gain, Mike experiences himself as cumbersome and of no use in the world. It is interesting to note that Mike does not describe his body as a separate entity, an awkward object, but he feels useless in himself. This supports Heidegger's (1962) notion that we primarily experience our body as our self, a unified being engaged in the world. However, other stories of separated and unavailable minds and bodies highlight the paradox that exists in the lived body as it becomes un-ready-to-hand. Svenaeus (2001) suggests that while we are our own bodies, our bodies can also have a life of their own. My body "involves biological processes beyond my control, but these processes still belong to me as lived by me" (p. 111). Thus, the paradox is that as individuals, our bodies not only belong to us but we also belong to our bodies. In un-doing, the participants' stories seem to reflect what Fuchs (2002) describes as a gradual 'disembodiment of experience' in which the individual "does not 'inhabit' his body anymore, in the sense of using its habits or automatic performances in order to participate in the world... The tacit 'mineness' of

experience is undermined, and an alienation of perception and action results” (p. 322).

It would appear that in mental illness the body does seem alien, beyond one’s control and as having an uncanny otherness. It might take on the characteristics of being heavy and slow or it might become unreliable for planning, problem solving or perceiving the world. The participants in this study described their bodies as taking on the character of something other than themselves. At times, they had to monitor and question their lived bodies as something separate. However, at the same time it seems that they also experienced uncanniness as something located within themselves, not simply in their objectified bodies. The changes affected their very being, and it was possible for participants to experience themselves as useless, unreliable, slow or heavy in the world.

The Splitting of Seams and the Fraying of Strands

A second level of undoing that created significant difficulties and distress for the participants is the falling apart of the role strands within the garment of doing. Role strands are collections of related activity threads. They require the ongoing maintenance, and interweaving of activities to form a distinctive strand of doing. These strands are larger than the activity threads and are therefore essential to the garment’s overall structure. They are also more visible to others and it is through the formation and shaping of the role strands that a lifestyle is able to communicate the self’s uniqueness and make connections to its social and physical context. Once the related threads of activity unravel the disintegration of a role strand is inevitable, as the individual cannot perform various aspects of the role. When this occurs, the individual is unable to interact in the same ways as he or she once did. Thus, this aspect of undoing has strong influences on the social aspects of one’s being-in-the-world.

The Lived Other as Threatening and Distant

All of the participants related how the unravelling of everyday activity led to changes in the way they interacted with others. Starting from an early age Tim began to feel awkward around others as his ability to engage in social actions and activities weakened and then unravelled. This led Tim to a gradually withdraw from his social world.

When I was young, teenage years, I started becoming introverted, shy, and that sort of thing. I didn’t really want to go anywhere. From the age of 12 upward, I stayed at home, didn’t go out with my friends or anything like that, I just stayed at home. I had my breakdown in 1992. The stress built up over the years, it was just building up over the years. I was working in town, it was terrible, I was hearing voices and I thought my work mates were against me. I actually left my job around about that time.

Over time, Tim feels decreasingly at home in his relationships with others and as the unravelling occurs he experiences others as increasingly hostile and against him. In this hostile environment Tim can no longer manage the activities that make up his role as a worker and they begin to fray and come apart at the seams. In a similar way, Mary finds that her relationship with others changes as she comes undone.

Usually I was a very friendly person, but one night I was on a trip and I just stood by the bar with my drink. I didn't say hello to anyone, or stand by anyone, I was just standing there and I thought to myself, everyone is laughing at me but they weren't. Then I thought everyone was talking about me and it wasn't happening.

Mary's world also seems hostile. People talk about and laugh at her, making it impossible to be her normal friendly self. Looking back, she has a different view of the situation but at the time she is caught between perceptions from a mind and body that she cannot completely trust and a room full of others who cannot be trusted either. This inevitably changes Mary's being-in-the-world and leads to a withdrawing from social engagement.

In her story, Kay expresses how distressing it is to have activity threads unravel to such an extent that several role strands begin to loosen at the seams.

I had gone to an Overeaters Anonymous meeting and came home to find all the glass panels and doors broken, there was blood on the doorstep. I opened the door up to see [my husband] leaning on the bathroom door with toilet paper all over him, washing up blood on his arm and I thought I have got to hold it together. I took him to outpatients because he needed his arm stitching. There was me leaning against the house, I am not sure who was supporting who, the house me or me the house. I was falling apart at the seams. The emotional overwhelm of the dying husband leaving me... it started on the Sunday, he told me, and then he told the kids that the marriage was breaking up. He wanted two friends around to help referee us around a kitchen table. That night I remember trying to pull my hair out by the roots because it was easier to handle physical pain than emotional pain.

Here Kay is losing her grip on the threads of activity that create the strands of being mother and wife. She clearly experiences the lived phenomenon of "falling apart at the seams" in a real and painful way. This is more than losing the ability to perform specific or isolated activities, it is more than the unravelling of threads; this is the dramatic undoing of the larger structures that make up the fabric of her life and Kay struggles to maintain the interactions that once held her family relationships together.

Mike also experiences difficulties maintaining his marriage as his doing unravels.

I think once again in that marriage I had another quite serious episode of depression and was home again. She didn't really understand. I didn't understand it. I didn't treat it as a big deal in some ways, but she did and ultimately our marriage broke up. There were other reasons too, but I don't think depression helped. I don't think she really wanted to deal with some things. And I must admit, I was quite difficult at times, like she was sending out Christmas cards to people and I got really fixated on sending out Christmas Cards. I haven't seen her for years, if I ever saw her again I would apologise. I think I behaved like an absolute idiot. Even today I am still ashamed about how I behaved. I have never behaved like that since.

As he comes undone Mike is unavailable to himself but he is also unavailable to his wife as the husband she previously knew. His world of undoing is confusing and his wife does not understand it as Mike's threads of activity unravel over time. In a similar way, June's story shows the distress involved when one's larger strands of doing-in-the-world unravel.

That was a very traumatic, painful time in my life. Not so much the marriage breaking up, but handing my children to their father to look after. I could no longer look after them, because I couldn't look after myself. It was a very painful time... It was also a very confusing time. Once I learnt more about it I was able to educate my family about it because they were shocked. Here is a woman who had been to University, got a degree, teaching secondary school and all of a sudden, I was a crazed woman. It destroyed my teaching career in a way because I couldn't handle stress anymore and teaching is very stressful.

June's notion of self changes as her ability to perform tasks and roles fall away. She is certainly no longer at-home-in-her-world or in her self. June has become a stranger to her shocked family for whom she is no longer available as a mother and no longer recognizable as a teacher. June's lifestyle is falling apart in a confusing process, leaving her unable to communicate whom she is, or to connect with others in everyday ways.

Just as June finds it impossible to maintain her role strand as a teacher, John cannot maintain the activity threads of his work either.

It got to the stage where it started to interfere with my work. I had to keep taking breaks all the time and I found it really hard to cope so I took days off and I used to go to the pub and have a few beers down there. In 1986 I had an argument with my brother-in-law, he rang my mum, and she got a bit worried so they called the Police and they took me down to the station. This was on a Sunday night. They got about 3 doctors to examine me, 3 psychiatrists, and then I was taken to [the hospital] that night.

John finds it difficult to engage in the everyday world as his thoughts and perceptions dominate and his internal world takes on greater significance. John's ability to concentrate on work decreases until he can no longer manage it. The speed and

significance of his changed world is not compatible with the everyday world of work.

The significance of the falling apart of role strands lies in the relationship between our involvement in the world of social interactions and the maintenance of a coherent sense of self as being-in-the-world. An excerpt from Mike's story shows just how much one's perception of self is transformed through the loss of activity threads and role strands.

I just become chronically depressed, I don't get psychotic, I don't get manic, I don't hear voices, see things, none of those things. I just become a person I cannot recognise. I wouldn't even know how to demonstrate it. It is the most painful, painful process I have ever had in my life.

The process of undoing is extreme and painful as it strikes the depths of Mike's being and he does not recognise the person he has become. Even in the absence of psychosis, his reality is distorted. Mike's engagement in active doing falls away and he is no longer at home in his everyday world or in himself. One's sense of self is unavoidably acquired through one's doing in the world. The activities and roles that we consistently engage in are the structures by which others get to know us and we know ourselves. Zimmerman (as cited in Mitchell, 2001, p. 174) captures this notion when he writes "I come to know myself not so much by abstract self-reflection as by taking on roles in the various social groups into which I am born. I learn about what it means to be human from the very activity of being human".

The stories of the participants shed light on the experience of others in undoing. As the inter-actions that support relationships with others weaken and as the activities that create role strands unravel, then undoing becomes an increasingly distressing and painful process. Because the significant relationships and roles in which we actively engage anchor us in our world, when they fall apart we are set adrift and the overall shape of doing in the world changes also.

The Disintegration of Patterns

When individual threads of activity unravel and role strands begin to fall apart, the garment of doing can no longer hold its shape in the same fashion. The habitual patterns of activity disintegrate and the individual may struggle with the loss of structure and overall design in their lifestyle garment. Losses of daily structure or routine correspond to changes in doing across both time and space. The experience of lived time and space is directly related to one's experience of doing as it is our activity that marks the passing of time and alters our relative distance and direction to entities within the world.

The Lived Time and Space Ruptures

It would seem that in undoing, time is distorted as one's ability to engage in the uniformity of routine activity falls away. In an undoing world it is possible for time to gradually slow down or increase dramatically in relation to everyday doing. This change in speed has a significant effect on the structuring of one's day. The consequence of warped time can be seen in June's account of being thrown into the world of mania.

The structure of my day, if I was manic, would go out the window. I wouldn't be able to hold fast to it. You just do bizarre crazy things all day, you forget to eat, and you forget to sleep. I can go 3 days without sleep, doing things. I can remember one day I didn't have a vacuum cleaner, so I spent all day picking up grit from the carpet and putting it in a little bowls and then I would tip it all out again and start again, it was crazy.

June struggles to maintain the structure of her day as her world speeds up and the threads of activity slip beyond her grasp. Even the basic routines of eating and sleeping are lost and June cannot stop the process in the confusion of her manic world. Without her everyday habitual doing, not only does June lose important roles but she also cannot maintain even the most basic necessities of her being. In desperation, June struggles to hold on to a single thread of doing and engages in the world by picking up dirt from the carpet and tipping it out again for hours on end. June's account shows a loss of synchronicity with the world, she is out of time with the normal temporal structures. In June's world there is no night and day and no meal times or bedtime. This overwhelming distortion of time in response to a life-changing event has been described as temporal rupture (Larson, 2004). The rupturing of time is an intense experience for June as the seams holding the pattern of her garment split open and the shape of her day is gone.

Tim's account of unravelling also describes a change in everyday structure and doing.

When I first got unwell, I used to go to bed about 6.00pm in the evening and wake up early in the morning. Then I sort of changed around. I used to go to bed late and get up probably mid afternoon. I just completely changed around for some reason, I don't know why. When I wasn't in bed I was watching TV and reading magazines and stuff like that. I couldn't concentrate on watching any programmes. I couldn't stay in the room for 5 minutes. I used to change around to different rooms in the house. I couldn't even watch a movie. I used to watch about 5 - 10 minutes turn it off, go into another room, the voices were all around me and I was trying to get away into different rooms in the house. It was terrible hearing voices.

Without knowing how or why, Tim's routine is turned upside down. He stays up at night and sleeps for half of the day. Tim is unable to maintain a regular pattern of

activity and without its familiar structure his lifestyle garment provides no comfort. There are no quiet corners to hide in within Tim's shapeless day, and no habitual activities in which he can find respite. The experience of space has also changed for Tim, as even in his own house he is not completely at home. With the falling apart of role strands Tim's lived world has become increasingly smaller and now he is trapped, restricted to his house and wandering from room to room trying to escape the voices that dominate his space. Heidegger's (1962) writings point to the lived experience of space as a sense of familiar and attuned association with the beings encountered within the world. That is, lived space is not related to the objective position of things in "world space" but it has the character of circumspect approaching (called de-distancing) and turning towards (directionality) the things that are at hand in the surrounding world. That which is supposedly "nearest" is by no means that which has the smallest distance from us. Initially, we always overlook and fail to hear that what is measurably "nearest" to us. It is what we are drawn to or concerned with most, that is experienced as being closest in lived space.

In undoing, once meaningful people and objects may become distant over time. Indeed one's whole world may seem remote and dislocated. The patterns of doing in time and space are distorted in Sam's world as he sits at home struggling to structure his engagement in the world.

When I was 20 and at home I would relax, watch some TV and my days would get out of proportion, until I started to learn how to deal with it later. There's less interest, less care, to keep you well. To stop it getting out of proportion the illness can be turned around. I think what it might have been was a lack of, sort of like lack of trying, like when you try and nip the illness in the bud. The illness makes you go down, stay down for awhile and then you can bring yourself up slowly, sort of like that you know, like you go down and if you are not very happy, you feel really ill, and you feel like you are being left out.

Sam describes his days as out of proportion, suggesting that somehow they are not balanced. The sense that one gets from Sam's account is that some days are overwhelming, and his lack of interest and care in things changes his experience of space and time. The lack of structure in his day seems to create a heaviness, as time drags and the space closes in on Sam. The weight of the day takes Sam down and in some way traps him, just as Tim was trapped within his own house. In this state, Sam also feels left out which suggests being removed and separate from others and the everyday world. However, while Sam finds himself in a heavy and cut off world, if he can turn things around he is able to bring himself up and out of it again.

Paradoxically, the following account from June shows that when time and space ruptures, the lack of structure can be liberating rather than confining.

I can remember leaving the house wide open. There was a lorry outside and a deliveryman and I went and said to him that I need to get out of my house for a while can I drive with you, and he said yes, and I did. I went all around Auckland delivering parcels with my house left wide open and I never thought about my safety or the house's safety, how crazy.

Here, instead of shutting down, time and space open right up for June as she goes with whatever possibilities arise. Perhaps the patterns of doing can sometimes be too tight around our selves and the loosening of seams and unravelling of the garment can create a sense of freedom for the self within. When June finds her self in routine patterns of doing, she sometimes wishes for the freedom and excitement of being un-done.

Occasionally, I think, God life's boring I am in a rut I can't wait for a high. Occasionally I have thought that, but it is a very silly way for me to think really, it is a very silly way for me to think because followed by that high will be a depression that could last 6 - 7 - 8 months, not worth having that.

Despite the sense of liberation that undoing brings, June is aware that following the loose knit, high-speed world of mania she will inevitably find herself in the painful world of depression again.

When individuals become extremely undone, admission to a hospital or some type of mental health service is common. Hospitalisation can further distort one's experience of space and time and add to the sense of dislocation because the hospital spaces and time structures are removed from those of the everyday world. For example, Tim finds his short stay in hospital an unsettling one.

I have only been in hospital once; my only admission into the unit was for 2 weeks. I was hearing things and seeing things as well. It was scary at first, I didn't know what to expect. Every night someone was shining a torch on me every 15 minutes. It was a bit scary and some of the other people weren't that well either. Some of them were quite aggressive.

Tim's account shows that admission to hospital can be distressing, as one is required to be around strangers, some of who are hostile, and follow the routines of an un-homely place. However, despite the unfamiliarity of the hospital space, removal from everyday spaces may also allow one's unravelling activity threads to be disentangled if certain forms of support are present. Specific ways of supporting people in their recovery will be discussed in later chapters.

At times through life most people have some sort of experience of cracking up, falling

apart or of being fragmented in some way. Becoming un-done is part of human experience. The extent to which people unravel varies greatly in relation to both the length and severity of the experience. A person who experiences a nasty flu or a moderate emotional upset does not fall apart or unravel fully but may become frayed at the edges. In these cases, recovery is relatively straightforward and the loose ends are sewn up again in a matter of days or weeks, tears in role performance are mended and the patterns of life resolved. From individual accounts of severe mental illness it would seem that the experience is a much more extreme and long-term form of undoing. In this type of undoing the structure of one's being-in-the-world is at stake. That is, when our doing falls apart at the level of role strands and daily routines then so does our being. The unquestioning securities of daily life disintegrate with the unravelling of the structure and patterns of our doing.

The participants' stories show how the progression of mental illness involves an unravelling of doing and being in the world. The fibres of one's very being weaken as actions become too difficult and intentional activities cannot be maintained, resulting in the falling apart and disintegration of the larger structures that shape one's fabric of doing. It would appear that when role strands and habitual patterns collapse, then being-in-the-world takes on quite a different character. In the following chapters, the discussion turns to other modes of doing and being-in-the-world experienced by the participants throughout their recovery. First, however, we will re-turn to the metaphor of 'doing as the fabric of life' and its relationship to the recovery process.

Recovery as the Re-fabrication of Everyday Life

The preceding accounts show how in mental illness, the fabric of one's life can be put under strain as the interwoven threads of everyday activity fray at the edges and begin to unravel. The process may be gradual or swift, and it is inevitably a time of great pain, confusion and uncertainty as the structure of one's being-in-the-world comes undone. If we can understand the process of becoming mentally unwell as an unravelling of the threads, strands and patterns of one's previous life, then it should be possible to conceive recovery as a re-fabrication of a meaningful life. Understood in this way, the recovery process involves the gradual weaving of activity threads into role strands and eventually into a pattern that 'fits' the weaver. To transform this fabric of doing into a lifestyle that fits the unique self, it should be structured to suit the individual's shape, character and context. The weaver must find a rhythm and regularity in the weaving of threads and have some sort of design in mind. In addition to its pattern, the garment will

also have hues and textures that reflect something of the weaver and the context in which the garment is made.

To explore this process more fully, it is important to understand just where and how the weaving takes place. Drawing on Merleau-Ponty, Frykman and Gilje (2003) provides some insight into this.

The researcher's attention should neither be put on the individual nor on the surrounding, but just on the intertwining – the interwoven tapestry between the body and the world. In this more or less diffuse space new combinations constantly appear. Something new is created all the time with the point of departure in the very bodily intercourse with the world around. (p. 42)

What this passage points to is the shifting back and forth that occurs between our embodied being and the world in which we act. Through our actions, an *interweaving* occurs that extends our being into world and brings the world into our being. This is the 'to and fro' of weaving - the passing of the shuttle from one hand to the other and the interplay of warp and weft from which a pattern emerges. Thus, it is through our daily engagement in this reciprocal relationship between self and world that we form consistent ways of doing and being. Over time this consistency develops our capacity for basic actions, as well as our patterns of activity and overall routines. Regularity provides us with stability, as well as a foundation for opening up new possibilities of being. It is in the space between embodied being and world that new combinations appear and new meaning is created. McGruder (2004) supports this notion when she says:

The meaning of acts cannot be derived in isolation from either the social or from the psychophysical. The meaning is created with the act by the actor. The action stands between the world of the body and the social world and makes sense of them both. (p. 63)

This highlights the significance of the 'to and fro' that occurs as we weave threads of activity through our lives. It is only through this ongoing inter-action of embodied self and world that one makes sense of being-in-the-world.

While the to and fro of weaving is important, another significant consideration is the space in which the weaving takes place. According to Heidegger we need the space that forms between our being and the world in order to encounter the world at all, as it provides room to move and allows the free inter-play of self and the things-at-hand (Inwood, 2004). In his writing, Heidegger refers to this lived space as *Spielraum* or 'play-space' because it is here that human beings play out their lives with the diversity

and variability of a game (Inwood, 2004). What is important in play is the *mood* one is in, although it is not simply a matter of being light-hearted or enjoying oneself. Heidegger points out that in every mood there lies a sort of play and play can be as equally serious as joyful. That is, when we are in a particular mood we find ourselves in a certain *type* of space, in which the world is disclosed as being a certain way and we engage in the play accordingly. As we have seen in the participant accounts, in a depressed mood “things jostle each other hard in space” and in a euphoric state space opens wide and things “recede and make room” (Schiller as cited in Bollnow, 1961, p. 38).

If different moods and modes of being-in-the-world can open or restrict one’s room to move, then there is always the possibility of losing the play-space altogether. In the following passage, Miller (1996) recounts a conversation with Gadamer who explains this issue using the analogy of a bicycle wheel.

He asked me about the front wheel, the axle and the nuts. He remarked that I probably knew that it was important not to tighten the nuts too tightly, else the wheel could not turn. ‘It has to have some play...and not too much play, or the wheel will fall off.’ (p. 8)

Like Heidegger, Gadamer points to the notion of play as a form of leeway that allows movement to occur but is ‘tight’ enough so as not to lose the play space altogether. It seems then that the play of any particular mode of being-in-the-world may be either restricted or opened up to such an extent that the play-space is lost. With the loss of leeway, the opportunity to encounter the world in a particular way and to uncover possibilities of being-in-the-world may also be lost.

Another significant aspect of the play, other than how much room to move there is, is the movement of the play in relation to one’s sense of self. As discussed previously, lived space is less about quantitative distance or direction and more about what one is turned towards and closest to out of concern. According to Bollnow (1961), in lived-space the reference point from which we experience distance and direction is not our physical bodies but our feeling of ‘being-at-home’.

It is characteristic of lived-space that human beings are able to move to and fro within it. This means that the space where a man finds himself at the moment may not be the space to which he belongs. There is what we may call a natural place to which he belongs, and only this can properly be called the zero point of his reference system. All live movement in space occurs as a going away or a coming back. (p. 38)

Here Bollnow suggests the space in which we find ourselves at any particular moment can vary in its distance to where we feel most comfortable or at-home-in-the-world. Weaving any kind of lifestyle involves a shifting back and forth between familiar, comfortable being-in-the-world and the unfamiliar and disconcerting. Another passage from Bollnow (1961) explains why going away from one's dwelling place is necessary.

Though the house is an area of security and peace for man, he would pine away if he locked himself in his house to escape the dangers of the world outside; his house would soon become a prison. He must go out into the world to transact his business and to fulfil his role in life. Both security and danger belong to man, and consequently both areas of lived space, as life develops in the tension between outer and inner space. (p. 34)

While leaving the space where one is most comfortable and engaging with the uncertain and threatening is important to one's fulfilment, coming back home is also essential in the play of living. To come home is to return to security, a space where one can naturally grow or dwell, in other words, a true habitat. Interestingly, the words habitat and habit have the same origins, creating a link between Heidegger's (1927/1962) notion of being-at-home-in-the-world and our patterns of activity. The origin of both words lies in the Latin *habitus*, meaning condition or character, which arises from *habere* meaning to have or hold. A habit is "a settled tendency or usual manner of behaviour" (Allen, 2000, p. 625), and just as we feel we belong in certain spaces, we can feel at home in our daily patterns of doing. Further meaning can be found in the fact that a habit is also a person's state of mind (as in a cheerful habit of mind), a costume characteristic of calling, rank or function (as in a monk's habit or a riding habit) and as a verb, to habit is to clothe or dress somebody, especially oneself (Allen, 2000). Thus, in the origins of language we find clear links between feeling at home, our condition or mental state, the patterns of our everyday doing, as well as the costume or garments in which we dress and express ourselves. The image of a well fitting lifestyle that we weave through patterns of activity reflects a way of being-at-home-in-the-world where we can naturally grow and live if our doing fits us, and we fit our doing.

Summary

This chapter has described the process of becoming unwell as an unravelling of the threads and strands of activity that make up one's lifestyle. This un-doing involves a breakdown of the inter-play between embodied self and the world in which one acts, leading to changes in the experience of one's body, time, space and others. When the to and fro between self and world breaks down and the patterns of one's life unravel, one

may be left feeling homeless, with no safe place to turn and no sense of a way back. An understanding of the back-and-forth nature of play and the room to move created in the play-space provides a foundation from which to begin exploring recovery from mental illness. If becoming unwell involves an un-ravelling of one's previous life then recovery involves the re-fabrication of a life through the gradual weaving of activity threads. In each of the remaining findings chapters, different modes of doing and being-in-the-world will be explored in order to uncover the lived experience and to show something of the factors at play in each mode. The intention in this discussion is to offer a greater understanding of the dynamics of each particular mode and to identify key considerations for professionals, families and friends who are supporting people as they try to find their way home.

CHAPTER SIX

UNCOVERING EXISTENTIAL BEING IN NON-DOING

*I've made friends with nothing and have found
It is a husband. See the wedding rings?
Two eyes through which I see everything
But not as I used to. Importance leaves me cold,
As does all information that is classed as "news".
I like those events that the centre ignores:*

(Gwyneth Lewis)

Introduction

The analysis in the previous chapter showed something of what it is to become undone and have the foundations of one's being-in-the-world completely shaken. Despite the desire to 'hold things together' there seems to be a point where the participants need to let go of their entangled everyday engagement in the world. In the accounts, a common consequence of the unravelling of everyday activity is a mode of non-doing which is characterised by the complete absence of routine doing. The discussion in the latter half of the chapter sets out to explore the factors at play in this non-doing mode. However, first the analysis turns to the extreme experience of disengaging from the everyday world of doing all together, often for days or weeks at a time.

The Experience of Non-Doing

While non-doing is a state of almost complete disengagement from the world of everyday doing, it appears that the existential self continues to be very much present in the lived experience. Although aspects of one's being may become exposed and vulnerable, the basic threads of doing are still present, despite the apparent detachment. As Svaneus (2001) points out "no transcendence and no illness is entirely somatic or entirely mental" at the level of meaning (p. 112). This suggests that one's entire being-in-the-world is always involved in the disorder and that the lived existentials of body, time, space and other are still experienced by the non-doing self. However, the participants' stories do show particular changes in the presence of these fundamental structures as their everyday engagement in the world ceases.

The Lived Body as Senseless and Sensitised

In the previous chapter, the participant accounts show how one's body can become uncanny and somewhat untrustworthy as one tries to engage in practical activity during

un-doing. However, in non-doing, any sense of embodied involvement in an engaging world seems to cease and the lived body becomes increasingly detached and unresponsive.

The senselessness of non-doing

Several participant accounts describe a form of disembodiment as part of their non-doing experience. For example, Sara says; *“I have had a couple of times when I have just stopped... it is just like the electricity is turned off and I am just sitting in the chair waiting for the [power company] to finish the pylons or whatever”*. Here Sara describes a sudden halt to the flow of energy in her being. She is left inert and unable to do much but await the return of this embodied energy so that she can resume her usual modes of being-in-the-world. June also describes the heaviness of non-doing.

I don't want to do anything.... I just lie in bed all day and night. I don't do anything. I feel dead, well, I don't know what it feels like to feel dead, but you're dead, you have got no senses. You don't want to see anyone. You don't want to talk to anyone. You don't want to do anything. You just want to be left alone and lie there.

June's body has become an unfeeling dead weight as her depression presses her down. It seems that in non-doing, her embodied being has lost all intentionality in the world. June does nothing and there is nothing for her to do, as she finds herself disconnected from the everyday world with no sense of agency. As her embodied being-in-the-world is numb, the closest June comes to feeling is the feeling of death, of doing and being nothing. This experience of nothingness is akin to Heidegger's (1962) description of existential angst or anxiety, in which everyday meaning is stripped away and ordinary being-in-the-world becomes sense-less.

The inner activeness of non-doing

It appears that the lived body in non-doing feels like a dead weight that cannot be inhabited comfortably. The participants describe a lack of habitual responsiveness as their bodies become senseless and completely separate from the everyday world-at-hand. However, other excerpts suggest that despite the outward inertia there may be at the same time an inner activeness. Amy describes her engagement in an internal struggle, while her embodied being remains numb.

I didn't want to do anything. I mean I had a lot of emotional things that I had to deal with and try to come to terms with. I was really disconnected from people emotionally. I am having trouble explaining this, that feeling in my

head. I thought it was just my head talking and it didn't relate to my feelings. My head didn't want to be hearing any more either.

Here, Amy has the experience of only her “head talking” showing how she is not only disconnected from the everyday world but there is also separation within aspects of her embodied being. Her emotions seem somehow disconnected from the talk that persists in her head as she tries to escape her painful feelings. Amy tries to come to terms with her past experiences, which are obviously still present and very much at play in her non-doing state. According to Heidegger (1927/1962) most thought is *re-covering* or *re-presentation* of one's previous experiences or engagement in the world. While thinking is not the primary foundation of our being-in-the-world, in the absence of doing, Amy re-presents or ‘goes over’ her past to try to make sense of events and experiences that have shaped her being-in-the-world.

In the following account, Kay also experiences separateness in her being as she engages in an inner struggle.

I was continually like a volcano. I would block everything up until some silly little thing, and then I would explode and boy did I explode and then I would put a cap on it again. I was like an ostrich, bury my head in the sand and let the world go away, so yes I would have been very shut down. There'd be a lot of self-talking, like there's half of me that's good and the other half is bad, and the negative voices needed a voice... 'oh you are stupid, you have got no confidence'. The internal self-doubting - it is self-loathing, not being good enough for anybody, not being lovable. If a bomb had gone off beside me, I would not have been sorry that it happened. It's such a fight to keep alive, to do anything. I want to hide in bed, pull the sheets over my head, and let the world go away.

Here Kay shuts down and lives in a world of thinking separated from the everyday world of engagement as she “lets the world go away”. With the break down of her doing, Kay is in no position to meet the expectations of the everyday world and she struggles to counter the negative talk in her head which calls for the meeting of everyday standards. It seems then that despite being numb and senselessness in non-doing, one's embodied being may not be completely passive. There may be painful efforts to come to terms with one's undoing as well as a struggle between the desire to forget one's being-in-the-world and the need to maintain one's commitments in the everyday world.

The paradox of sensitivity in a senseless body

Interestingly, further accounts of non-doing point to a paradox in the embodiment of the mode. In her account Sue describes being stuck in a non-doing space, numb to the world but at the same time highly sensitive to it.

Part of the illness for me is hypersensitivity to light, to noise and to people. I couldn't bear people around me, couldn't bear the noise of television, even music which I adore - couldn't bear the sound, it just sounded like distortion. Television is the enemy, because it is loud, phones, phones, phones - I just wanted to have it cut off. I couldn't read - even a book would become an enemy. When I picked it up it proved that I couldn't do it.

Here Sue is extremely sensitized to the world around her as it threatens her quiet, dark space and makes demands of her that she cannot meet. It seems then that it is possible to be separate and senseless, while at the same time being highly sensitive to the world-at-hand. An excerpt from Kate supports this notion as she describes the vulnerability of the non-doing mode.

I think that is what people think 'Oh she or he is just sitting in the corner saying nothing', but believe me, you may be numb to the world but in actual fact there are other parts of you, like your subconscious, your protection side is all working overtime because you are in a vulnerable position. When people are vulnerable like that - your sensors are out so much and you pick up a lot of what happens almost by - it is a vibe thing, an emotional thing - you are picking up all the vibes. You seem as though you are cut off, but at the same time, you have this heightened awareness at an emotional level....

Despite her apparent distance and numbness to the everyday world, Kate is extremely attuned and hypersensitive to what is going on around her. She says that her “protection side is working overtime” as she picks up emotional and subconscious “vibes”. While in some ways Kate is disembodied, in other ways she is fully present as she experiences the world in a non-cognitive but highly embodied way. Like Sue, in non-doing Kate attempts to preserve her vulnerable sense of being-in-the-world and is alert to entities in the world that threaten it.

In non-doing the active to and fro between embodied being and world comes to a halt, leaving the fabric of one's life seemingly in tatters. The unravelling of everyday patterns of doing results in a dis-integration of embodiment, as one's body, thought, emotion and world seem to disconnect. While participants describe themselves as 'living inside their heads' because of the numbness to the everyday world, it is important to note that at the same time non-doing is a highly sensitized mode, which is lived in an embodied way rather than purely through cognitive reflection. This paradox

will be explored further in second half of the chapter, but now the discussion turns to another paradox which is to be found in the experience of non-doing time and space.

The Lived Time and Space as Insular and Infinite

As we have seen, the experience of non-doing amounts to a halt in the free play between one's being and an available world. With the disintegration of everyday embodied activity, the non-doing person may come to a place of suspension, a temporal and spatial transit lounge that completely interrupts the flow of his or her life. This suspension of movement appears to be associated with a shrinking of the play space for interaction with the world.

The non-doing space closes in

In his account Mike describes how in non-doing he closes himself off from the world to create his own space. *"It is very insular, the phone would ring and I would just ignore it. I would get quite jumpy if the phone rang....All I could do was just lie down and sleep. I just wanted to avoid things"*. In non-doing Mike avoids engagement in the world and like Sue and Kate he is sensitive to any potential demands such as phone calls. He creates an insular space which closes in on him as he tries to escape everyday demands. Sue's account also points to the closed nature of the mode as she says; *"You know the space that you are in at the time - you are not rational, you are not seeing things clearly and you are not looking at the big picture... So, everything became meaningless"*. Like Mike, Sue points to the space of non-doing as being insular as there is no 'big picture'. Additionally, Sue indicates that the space is ambiguous with no clear structure or sense of everyday meaning within it.

The paradox of distance in a restricted space

While space closes and becomes insular in non-doing, other accounts show how the loss of structure and everyday significance means it can also be infinitely distant. This phenomenon is pointed to in Amy's story as she recounts the vulnerability she experienced after coming undone.

In the depth of my depression I was pretty non-functional. That led on to flash backs and a diagnosis of Post Traumatic Stress Disorder, which really floored me. The nature of abuse when you are young and that coming back to you sort of takes the floor out of your foundation. I lost all my trust in people. I was totally withdrawn and I kept myself away, very isolated. Bed was my safe place. When you go to bed that it is your own private time, the world goes away. They are not going to interrupt you. The comfort of snuggling in blankets makes this little womb, and I could sleep and it was amazing how

much I could sleep, and be oblivious. That is what I lived for. It was as far away from the world as you can get really.

With the re-living of traumatic experiences from childhood, Amy's ability to trust and interact with others has unravelled. She describes being knocked to the floor, only to find that the floor has been removed from underneath her. The foundations of her world have disintegrated and there is nothing left for her to stand on. Amy enters a groundless space that is characterised by a sense of nothingness as it is empty of the meaning and structure that everyday activity provides. Here Amy lives for oblivion, a state of forgetting and being forgotten. She says that when she is in the womb of her bed, she is "as far away from the world as you can get". So while Amy and the other participants' worlds close in and leave little room to move, it seems that at the same time the world can be experienced as infinitely distant and empty. Heidegger's (1927/1962) writing related to existential angst reflects this paradox of distance. He suggests that in the state of extreme angst, both time and space are transcended in that both are infinitely remote and close at the same time.

The non-doing time is endless and oppressive

Further excerpts show the nature of time in the non-doing mode. Clearly, part of creating an insular space is achieved through disengagement from the temporal present. Most participants achieve this by lying in bed and sleeping, including Mike.

When I was really ill, I would get up; have breakfast, have a shower. In the early days I would be lying down by 10.00 or 11.00 having a sleep or if not I'd have a sleep in early afternoon. It was really a very much an occupying thing of my time. I could spend a whole weekend sleeping. I really did need it.

In the non-doing mode Mike's time is largely occupied by sleep, which seizes and fills his day. On the days when Mike sleeps all day there is no marking of time through activities. Here, time is infinite, an endless series of 'nows' that seem to go on and on. However, like the participants' paradoxical experience of space, time also closes in and becomes oppressive as it slows right down. There appears to be a preoccupation with the passage of time in non-doing, as without activity time may be experienced as standing still. However, Amy finds that sleep aids the passage of time.

The only thing I found that I could do was stay in bed all day. I'd sleep most of the day and then sleep at night and it was the thing I lived for – 'yes I can go back to sleep now'. I would wake up in the morning with disappointment and look forward to going back to sleep again. There really wasn't much will there for living or any hope. I just wanted the time to pass and sleep did that. It was get another day over and done with, as opposed to the rest of us now,

how can we fill our day? It was a good 6 months or so before I started taking small steps, making myself get out of bed.

Amy's lived experience of time is altered in non-doing. She is stuck in an endless present and as the days drag on, sleep is the only thing that will speed time's passing. Without active engagement in the world Amy's past and possible futures cannot be authentically integrated in her present being-in-the-world. That is, she cannot maintain her former self without repeating previous patterns of doing, nor can she create her possible future self while disengaged from the world. She attempts to forget her past being-in-the-world by detaching her embodied-being from that which has gone before and also feels disconnected from future possibilities.

In her account, Kay shows that the inner talk that may be experienced during non-doing explicitly brings her past into the present. However, it is kept as the past and not integrated into her current and future being.

I was living in the past, and blaming, and if I wasn't blaming that person I was blaming me and with that comes shame and guilt. I lived in the past too much, too much pain, too much guilt. 'Why did this have to happen to me'? 'It's all their fault, they shouldn't have done that'... forgetting what today's all about. Not even being in today. Hamlet's got an excellent saying – 'Yesterday's history, tomorrow's a mystery, live in today'. I have been doing most things but not that; it's a real battle.

As she lives inside her head Kay struggles to move beyond past events and forgets what is available to her in the present. Ironically, while she forgets "what today is all about" Kay creates an infinite and endless present that she cannot engage in. In order to reconcile the past and move into her own possibilities of being, Kay needs to link what came before and what lies ahead by being engaged in a world of involvement.

The shutting off from everyday engagement appears to modify the non-doing person's expectations for the future. Heidegger (1962) suggests that this type of awaiting is depressed or confused and can be clearly distinguished from pure expectation. This is shown in the following excerpt from Amy's story. "*It was too painful, and not being able to take my own life it was 'well I am stuck here'. So I suppose one was waiting for a miracle at some time.*" Amy is suspended in an interstitial mode with no clear sense of future possibilities. Her awaiting is for an elusive miracle, some intervention from an outside force to release her from her inert state.

It appears that in non-doing, space and time take on a distinct character and are experienced as being infinitely remote and near at the same time. In this existential

waiting room, the world is both numbingly distant as well as oppressively close. Each day hangs loose, as the fabric of one's life loses its shape and detaches from the self. Just as the participants' experience of embodiment dis-integrates in non-doing, it seems that so do time and space. Past and future being-in the-world is not clearly integrated in present being and lived space is disjointed and empty.

The Lived Other as a Threat and a Lifeline

It is clear that the non-doing self feels completely disconnected from the everyday world, including the network of relationships that form role strands and shape one's everyday life. Without an active embodiment or recognisable temporal and spatial structures, the participants cannot interact in everyday ways and are limited in their ability to communicate their vulnerability and pain.

The disconnection of non-doing

In her account Amy captures the complete lack of connection to everyday others that seems to be experienced in the non-doing mode. *"You don't want to see anyone, you don't want to talk to anyone, you don't want to do anything, you just want to be left alone and lie there"*. She wants nothing to do with the everyday world and becomes unavailable to others. In her account, Sue also describes a necessary withdrawal from other people.

People are the enemy because they are intruding - you just want to be left alone.... There comes a point when even people that you love - they become the enemy too. They are either expecting you to do things that you can't do or they are wanting you to make decisions about your care when you are totally beyond making decisions.

Sue shows how others can become a threat in the non-doing mode because they intrude into the detached space and expect things of her. These expectations add to her sense of oppression by overwhelming and closing the space that she finds herself in. She cannot meet others' expectations or make decisions, so Sue simply has to withdraw further and become even less available.

The need for some connection to others

While even very close others can become threatening in the non-doing space, they can also be an essential link to the everyday world. Kate says of one of her carers *"He would just come and check on me and make sure I was alright. That was all I needed, just to know there was someone who cared who was actually out there"*. Clearly, despite needing space, it is important for Kate to know that she has someone "out there"

in the everyday world, and she is not completely abandoned in her detached state. Because of their extreme disengagement, non-doing individuals also require others to do essential things for them. Family, friends or the staff of mental health services are required to take up the enactment of care that cannot be maintained by the self. These others may take some of the strain off the individual's role strands and maintain threads of activity when he or she cannot. Mike provides an example of this as he describes his return home from hospital. *"When I came back I went through a really bad patch...I would just hang around home. I was very well cared for by J, catering to anything that I wanted. I slept a lot - I was encouraged to sleep"*. At home Mike has more time to engage with in his immediate environment than when in the hospital, but he still finds himself in a non-doing mode. He is allowed the space and time to shut off from the everyday world as others encourage him to sleep. He is not required to be productive and the essential threads of doing are picked up and maintained by his support person.

June also experiences helpful others who create the time and space for her to withdraw from activity in the everyday world. *"I had wonderful neighbours. One...used to do my shopping for me and the neighbour on this side was very supportive and caring...The neighbourhood has changed now, but those people are still there, they watch out for me"*. Here June thinks back to a period of her life when she was unable to maintain threads of everyday activity. However, others in her life take the strain off by taking up the weaving of the threads for her. June's neighbours watch out and care for her as she finds it increasingly difficult to do so for her self. By maintaining essential activities such as shopping for June, the neighbours give her space to enter a non-doing mode and perhaps prevent further unravelling of June's previous lifestyle. As well as being a threat to the non-doing space, it seems that others can help to preserve it by picking up essential threads of activity for the non-doing person when they cannot maintain them.

The presence of others as a call to care

Another significant feature of the participants' experience in non-doing is the vital connection certain others provide in the form of a 'call to care'. Several of the participants faced the possibility of death because of their desire to escape the detached painfulness of extreme non-doing. However, they did not follow through on their suicidal thoughts because of certain people that they felt could not be left behind or hurt. Kay describes this experience during a dark period of non-doing.

When the marriage broke up I had the kids living with me. I was not quite 13. D was coming up to 12. They were my safety line. They kept me going until I

went over that thin line. Suicide doesn't solve the problem. I've got grandchildren I want to see grow up.... Deep down inside there simply had to be something better than this.

At a low point, when her major threads of doing have unravelled, Kay is close to death. She is on the verge of committing suicide but her children provide a “safety line” which provides some sort of meaningful connection to the everyday world. Perhaps Kay’s concern for her children and grandchildren provides threads of possibility for Kay by calling for her to care when she has otherwise lost all hope.

In the following excerpt Amy touches on the huge internal struggle she undergoes as she faces the possibility of bodily death.

I went through a very bad patch of being suicidal. My son’s best friend had committed suicide about 3 months before and my son found him. I saw what that did to him and it was like ‘I can’t do that to him but I want out’, so there was a big struggle.

Amy struggles with her being-in-the-world and desperately wants to put an end to her painful nothingness. She lies in bed; completely undone and face-to-face with death. Death holds the promise of escape that Amy is looking for, but she manages to resist its seduction. After seeing her son devastated by the suicide of a friend, she struggles to stay alive for his sake. Finally, Mike also holds himself back from committing suicide because of his concern for another.

In the beginning I had the Rapid Response Team ringing me every day, twice a day. I used to say to J, ‘some days being me is very hard’. Some days I have thought about it, but I don’t really want to do it for funny reasons. One of the reasons why I won’t do it is that I think it is a shocking way to treat J.

In this account Mike’s mode of being-in-the-world is extremely concerning to those around him. It seems that, like Amy and Kay, Mike is finding life too hard and he is on the verge between life and death. However, he too has a ‘lifeline’ that binds him to the world and prevents him from taking his own life. The concern of the participants for specific others is significant not only because it keeps them alive but it also shows them that they do care about something in the world and that there is something to live for.

The participants’ stories show that others can be a real threat to the non-doing person, as the usual interplay of self and others breaks down and the undone person withdraws. However, certain others can also be supportive in their being-with. Others may hold on to hope for the non-doing person when he or she cannot see a future. They may provide essential care for the person’s being-in-the-world when he or she is unable to and others

can create a space that allows for non-doing. Critically, others may also help the non-doing person come to terms with his or her undoing and provide a life line back to the everyday world.

Understanding the Play of Non-doing

The preceding participant accounts show something of what it is to become un-done and thrown into the mode of non-doing, in which the certainties of being-in-the-world unravel and give way to an overwhelming sense of detached meaninglessness. For those in everyday modes of being it can be difficult to see any way of connecting and interacting with people in the non-doing mode. Carers may wonder how one possibly ‘gets in touch’ with a person who is so unavailable and increasingly dead to the world. There appears to be little room to move for someone in the non-doing mode, as he or she feels trapped and helpless to change the situation. Those supporting the person may also experience this helplessness and hopelessness, as their efforts to engage the non-doing person seem to produce little effect. With the notion of play in mind, we now turn to the nature of the non-doing space and the forces that are at play within this space. Understanding how the non-doing person encounters the world and what possibilities may arise in this particular mode may allow us to find where the leeway is for being-with someone who is seemingly dead to the everyday world.

Withdrawing as Turning Away from Care

Heidegger (1987/2001) asserts that any disorder such as that experienced in undoing is fundamentally a loss of freedom to project one’s being-in-the-world into its own most possibilities. This appears to ring true for the participants as their accounts point to multiple losses of freedom, including the freedom to act in the everyday world, freedom to connect and find meaning with others, and freedom to live in hope and hold a sense of the future. It is understandable then that the unravelling of one’s everyday being-in-the-world and the subsequent loss of freedom can lead to the turning away and withdrawal of non-doing.

The interruption of everyday activity in non-doing results in the world having the character of complete insignificance. A primary way of detaching oneself from the world so that it can slip away is to turn away from the things and people that usually matter, that is to lack *care* (Heidegger, 1927/1962). For Heidegger (1927/1962), care is the existential meaning of being-in-the-world. Indeed, it is possible for humans to engage with the world in such a way, that our whole existence is structured according to, and given significance by, what we most care about. It is through care that we create

commitments to others as well as to our own being-in-the-world, and it is through these bindings that we have a sense of obligation to act at all. However, through the process of coming undone the participants seem to lose sight of what they care about, leading to the loss of everyday structure and meaning for being-in-the-world.

The Vulnerability of Doing Nothing

It is not difficult to see how the non-doing mode is a vulnerable space to be in. The participant accounts show how being unable to act in the everyday world leaves one's very being exposed and under threat. Understanding the vulnerable and embodied nature of non-doing provides insight into the play of this mode. It seems that a particular disclosure of the non-doing mode is the reality that one's being-in-the-world can become sense-less, characterised by numbness to the aesthetics of the everyday world. Without the interplay between self and world, a person may find his or her embodied being-in-the-world to be a heavy, numb weight that feels separate and dead to everyday matters. In effect, without care the non-doing person is anaesthetized to the everyday meaning and significance of the public world. This is a powerful experience of being out of touch and unable to grasp the things at hand. However as we have seen, at the same time as being anaesthetized to everyday meaning one can be painfully sensitive to the real or potential demands that the world-at-hand makes.

The weight of expectation in non-doing

It seems that the weight of expectation which plays on the non-doing person's mind is a significant force that may restrict the room for play in non-doing. Drawing on the work of Bollnow, Fujita (2002) points out that because expectation locks one's focus onto a specific future event or outcome, it shuts out other possibilities and has the characteristic of "enclosed time" (p. 129). He states that "In expectation; there is a strong inner activeness in spite of outward passiveness; there is a belief in the occurrence of the expected event; and the expected event is sensed to be imminent and clearly imagined (p. 129). It seems that expectations from the everyday world lead to an oppressive closing in of non-doing space and reduce the disengaged person's sense of safe respite from a world that demands and judges. Fujita (2002) highlights the inner activeness associated with expectation despite outward passiveness. Perhaps the inner dynamic of needing to let go of one's commitments on the one hand, and feeling the weight of expectation on the other, is indeed part of the play of non-doing.

An excerpt from Sue shows that even when one is given space and relieved of the weight of everyday commitments the weighed down-ness lingers in non-doing.

It is very hard to hold onto the belief that you are worthwhile, that you have a right to be here and doing nothing is okay, because it is what you need at the moment... My family never said I was a hopeless case but they must have thought it. I mean they weren't sort of saying 'Get up and wander around', I mean they weren't doing that, they knew that this would be a long painful process so they weren't sort of overtly expecting things of me. But your family, because you know them so well, you read their expectations or you read their sort of anticipation or 'Wouldn't it be great if mum could...' or maybe you just put that on yourself, I am not sure which - so you have your own expectations of yourself to live up to plus theirs.

Here Sue suggests that the space created by doing nothing is what she needs at this moment, indicating that there is indeed something beneficial in the play of this mode. However, Sue's account also indicates how difficult it can be to let go of the threads of one's everyday lifestyle and all of the expectations that go with it. Even though Sue's family allow her space and do not explicitly ask her to get up and do things with or for them, she feels bound to them through her role strands of mother and wife. Significantly, the weight of expectation comes from Sue just as much as it does from the world around her. It appears that despite the distancing and turning away of undoing, one does not completely break free from the care for others that structures so much of human being-in-the-world. After meeting the expectations of others for so long, it is hard for Sue to let go of the threads of a life she has spent so long weaving together. However, in feeling unable to meet the real or perceived expectations of others, Sue is left vulnerable and the safe leeway of her non-doing space is jeopardised.

The absence of selfhood and the possibility of despair

Heidegger (1927/1962) suggests that the 'who' of our being-in-the-world is very much related to the usual and consistent ways we engage in the world. Both what we do and how we do it form consistent patterns in our lives that shape how we see ourselves and how others see us. However, because much of one's everyday selfhood is based on the bindings one has to others through routine patterns of activity, being unavailable to the everyday world can reduce one's sense of self. This is reflected in some participant accounts. For example, Kate states: "*Your world is so limited and so contained and you have no freedom and you have lost so much confidence - you have lost so much about yourself.*" Kate suggests that a loss of freedom and limited room to move inevitably results in a diminished sense of worth and identity. In her account Sue points to the possibility of becoming a non-person.

When you're completely devoid of motivation or ability to do anything you almost feel like a non-person. It is like you have no purpose, you have no

identity, and you have nothing to define yourself.... I am the same person as when I had a hugely successful career, the same person when I was a complete mess, and I am the same person now - and that is actually quite hard to keep hold of at times.

In their statements, Kate and Sue show how holding onto one's own sense of being-in-the-world when detached from everyday being is an issue. It seems that not only are bindings to others strained and vulnerable in non-doing, but one's inner bindings to particular ways of being-in-the-world are also jeopardised. Sue indicates that there is some sort of essence to her being-in-the-world that is present no matter what mode or form of activity she is engaged in. However, it is hard to keep hold of this essence when one's everyday sense of meaning and purpose has drifted away. Part of the vulnerability within the non-doing play seems to be the participants' struggle with grasping a sense of selfhood when they are no longer meeting the obligations of their roles as student, mother, worker, friend and so on. If they cannot see what aspect of their being-in-the-world there is to hold onto and that it is still of some worth, people in a non-doing mode are at risk of falling into deep despair.

Perhaps the particular dynamics described in the preceding discussion explain something of the vulnerability in the play of non-doing. The to and fro between one's being and one's world that characterizes the play of ordinary life ceases in non-doing, leading to a potential absence of meaning and loss of selfhood. The everyday play-space shrinks and the non-doing person's embodied awareness is largely attuned to the threat of expectations and demands to which he or she cannot respond. The usual inter-play of self and world is largely replaced by a one way stream in which the world bears in on the self who is numb and inert and cannot act to shape the world in return. The possibility of absolute despair and a complete closing down of the play is an ever present reality in non-doing.

The Security of Doing Nothing

The need for the quiet, dark sanctuary of sleep and bed in non-doing is understandable in light of the hostile nature of the everyday world. It seems that the extremely vulnerable space of non-doing in which one's sense of being is under threat, needs to be guarded. This leads to an embodied hyper-sensitivity towards that which threatens it, including everyday expectations that have the potential to close the play space of non-doing down. Kay captures an aspect of this dynamic when she says; *"I was building up a fairly good shield to keep the world out, but the reverse side of that shield was that it was keeping me in"*. Kay's withdrawing from the demands of the everyday world

creates an insular space that protects her from it, but at the same time it imprisons and restricts her. However, Harman (2007) suggests that “concealment is not just something that robs or deprives us of beings; it also preserves what is proper to the things” (p. 93). Perhaps then, the withdrawing of non-doing is not only a concealing of one’s being from the everyday world; but it also protects and preserves what is core to one’s being at a time when it is under threat.

The preservation of being through non-doing

Like the other participants Beth identifies the need for an insular space in which to withdraw and conceal herself away. In order to create this space she needs to let go of some of the threads and strands of doing that bind her to the everyday world.

When you can't take care of yourself, and you have to take care of other people and there is no relief from that it is an impossible situation really. Something has got to give. When you get to that stage it's like you can't be responsible for anybody else whether you have got responsibilities or not. I think it is a particularly hard one for women, I mean there is lot of responsible guys around too, but women have the children and responsibility with the children... I just had to stay focused on me and I really really needed that.

In the non-doing mode Beth struggles to bear responsibility for her self, let alone for others. Her ability to be responsive to the world or her *response-ability* is severely diminished. Beth’s account suggests that she needs space in which she can face the responsibility of her own being-in-the-world at a fundamental level. That is, she first needs to answer the call to care for and preserve her own being. The loosening of threads to her previous lifestyle creates the potential for some leeway in her dishevelled world. The “lee” is the sheltered side of any object; it is the side of the ship that is turned away from the wind (Miller, 1996). If others allow Beth some space to do nothing, the distance from everyday demands may provide the sheltered safety or leeway that she desperately needs.

It appears that while the loss of freedom to act inevitably shuts down the free play of being-in-the-everyday-world, it can also *create* freedom from everyday commitments. The creation of space by withdrawing from everyday commitments not only prevents further unravelling but it allows room for reflection on one’s fundamental being-in-the-world. The leeway is significant because it loosens the hold that the everyday world has on one’s ordinary being and frees one to turn to other ways of being-in-the-world. Heidegger (as cited in Inwood, 2004) indicates that by holding the structures and commitments of their everyday being-in-the-world at bay the participants are

paradoxically able to get closer to them.

[One's being-in-the-world] has to remove things to a distance, beyond the boundary of its elbowroom, to get them near enough to deal with. Only 'relief', taking our distance, from the beings that 'besiege' or 'beleaguer' us enables us to engage with them as beings (LXV, 482). Having cleared a space around itself, a space that it can never cross or escape, [one's being-in-the-world] can occupy a place within that space. (Heidegger, as cited in Inwood, 2004, p. 200)

It seems that non-doing can be seen as a clearing of space around one's being, which not only provides some relief from the demands of the everyday world, but also allows us room to get some perspective and deal with what calls for everyday activity. While non-doing disconnects people from what they normally do, perhaps it is a sense of their essence or fundamental ground of being that needs to be guarded and preserved in the mode. Although the restriction of the non-doing play through diminished selfhood and overbearing expectation can lead to despair, if some secure space remains open then there is indeed room for the non-doing person to preserve and then uncover a ground for the recovery of everyday being-in-the-world.

Reawakening Responsibility and Hope

The inability to act freely and find meaning in the everyday world is a significant issue for people in non-doing. The restricted inter-play of self and world may lead to a profound sense of helplessness and hopelessness. Nevertheless, in every concealment there is also unconcealment, and in turning away from certain possibilities there is always a turning towards other possibilities of being. Heidegger (1925/1985) suggests that the anxiety created through the existential struggle of non-doing serves to reveal that we *are* caught up in a structure of care about the world; that it is not a matter of indifference for us.

We then speak of the anxiety of death which must be kept distinct from the fear of death, for it is not fear in the face of death but anxiety as the affectedness of naked being-in-the-world...There is thus the possibility, in the very moment of departing from the world, so to speak, when the world has nothing more to say to us and every other has nothing more to say, that the world and our being-in-it show themselves purely and simply. (Heidegger, 1925/1985, p. 291)

In non-doing the participants come face to face with the possibility of literal death as well as the passing away of the activities, roles, and relationships that they once cared for. The unravelling of the fabric that makes up their everyday life may leave them in a state of "naked being-in-the-world". As indicated in the preceding section, stepping out

of their dishevelled lifestyles has the potential to provide a detached perspective from which to view the laid out fabric and somehow make sense of its meaning structures. To 'make sense' in the senseless space of non-doing involves actively entering into the play of the mode to reawaken a sense of responsibility and hope.

The need for responsibility in non-doing

Several of the participants' stories show the struggle between total despair and finding a way to answer the call to care for something in the world again. According to Heidegger (1927/1962), the call to care originates from one's own being and ultimately the responsibility to answer that call also lies with one's self. Kukla (2002) captures this notion highlighting the need for responsibility in being open to the call.

[One's being-in-the-world] calls itself out of its uncanny distance from its own situation. The uncanny demands of me that I find a way to close the gap between my situation and myself by responding to it and taking responsibility for it, but it does not provide me with any determinate way of acting. It is this very lack of determination that enables the uncanny to call upon me to responsibly choose my actions. (p. 11)

As we have seen the distance from the everyday world creates leeway and perhaps it is in this safe space that the non-doing person is asked to respond to the question of his or her own being-in-the-world. If our being-in-the-world is structured by what we care about, then finding the room to care for one's self must surely be a starting point for re-fabricating a meaningful life. However, this is easier said than done when there is no sense of future possibility and the way ahead is not clear. But Heidegger (1927/1962) shows that it is this very uncertainty and groundlessness that engages the person in the play and asks him or her to make a stand on being-in-the-world by choosing one course of action over another.

In her account, Kay describes how she has been in deep despair several times and does not want to sink down again. In the excerpt she points to the need for self-responsibility in lifting her being out of despair.

I think having hit rock bottom, not once or twice but three times...I'm not going to be suicidal again. I found that the only way out of this was up... to be better in a better place. Being sick and tired of being sick and tired all the time and emotionally held down by depression. I think there's a lot to that old quotation, 'You can lead a horse to water but you can't make it drink'. A person's got to want to get there. It's no good looking for that magic pill because nothing will fix it.

Here Kay indicates that the only way to overcome the weight of expectation and despair

is to actively push against its heaviness. It seems that taking responsibility for one's being-in-the-world is essential if one is to move beyond the detachment of the non-doing space. The vague awaiting characteristic of non-doing must be played against a sense of responsibility for one's being if the play of non-doing is to remain active. Marcel (as cited in Randall, 1992) emphasises the link between responsibility and one's sense of self by suggesting human beings most fully realise their selfhood by accepting responsibility for their actions.

I claim to be a person in so far as I assume responsibility for what I do and what I say. But to whom am I responsible? We must reply that I am co-jointly responsible both to myself and to everyone else... Let us repeat that I tend to establish myself as a person in so far as I assume responsibility for my acts. (p. 217)

As discussed earlier, holding onto a sense of self is difficult when one is distant and unable to respond to the call of everyday expectations. Taking responsibility means to 'answer the call' (Fredriksson & Lindstrom, 2002), and so recapturing a sense of selfhood appears to require the non-doing person to answer the call to be responsible for his or her own being. So, while being answerable to the call of everyday commitments is too much for the participants in non-doing, it seems that somehow they need to take hold of their own essential being if they are to find a way back to everyday existence.

The possibility of turning things around

In making a stand and taking responsibility it seems that the person must first have some sense of possibility other than the oblivion of sleep and non-being. Several participants remember a specific turning point where their sense of possibility opened up in some way. For example, Kate recalls being at one such turning point.

My big fear was that the black hole was so bad that what stopped me in the end from committing suicide was my belief at that time that if I committed suicide it would be like that forever. So that in a way was so bad that it made me think that there must be something better somewhere. I just have to hang on for a while.

There is a sense of being at a 'dead end' in Kate's account; she is completely undone and her being-in-the-world cannot unravel any further. The fear of being stuck in eternal and meaningless non-doing prevents Kate from taking her own life and after facing the possibility of death, she turns to the possibility of another better way of being, if only she can hang on and wait for something to change. Beth also shifts from having no sense of possibility to having a sense that things could be different.

I didn't have a religious experience at all, but at one point there was sort of a sense that I could actually believe that things could go right for me and that if I put effort in and if I had a positive belief, that things would actually work out. I had this kind of 'click' thing happen - that if I have confidence in myself and in the world around me that generally things will go well. It is pretty simple, but it actually has made a huge difference because I never really believed that at all. I didn't have any confidence and things would usually go bad. When I came out of there, it was and still is the thing that I hold on to.

Beth experiences a turning point in her attunement to the world as she has a flash of insight that things could be different for her. She sees that with effort and some confidence in her self, there is a possibility of finding a liveable way of being-in-the-world. This moment of vision opens up Beth's world and she too has a renewed hope for her future. Hope does not provide Beth with a plan for the future or a specific pathway to take, but it is something that she holds on to when she feels out of touch and the everyday world is beyond her reach.

While turning towards the possibility of an active existence does not provide any specific course of action, some accounts suggest that former care-structures can act as reference points to a previous life. In her account, Kate discusses how her previous bindings in the world assist by indicating a way back to everyday-being.

I fortunately had a world to go back to. For some guys they have never had a lot because they came with such difficult backgrounds or maybe got so unwell when they were young. A lot of people might have been unwell when they were 16 or 17. They didn't feel like they had anything to build up against, because they didn't have it in the first place - they spent their teenage years and in their 20's being unwell, so that is really all they learnt. I had a reference point whereas some people have an extra hard turning, they don't have things to remember, the feelings that they had, knowing that they did have good relationships with people, or that they had family who had cared about them.

Here, Kate shows that being able to get in touch with the things and people that once structured her world can act as a signpost indicating a way back to previous forms of being-in-the-world. Perhaps re-awakening these feelings of care and concern is part of Kate's "turning". The sense that one is indeed bound to things and people in the everyday world may provide a framework within which one can reawaken care and begin to engage again. Earlier in this chapter, the participants' accounts of facing death showed how it is care for others that is often most powerful in pointing people back to the possibility of a meaningful existence. Turning towards a sense of possibility is akin to reawakening hope for one's being-in-the-world, and it is hope that prevents the play of non-doing from shutting right down.

The opening up of play-space through hope

Many of the participant stories point to the significance of hope in maintaining the play-space of non-doing. Hope, says Marcel (as cited in Randall, 1992) is not so much thought, perceived or felt, but rather it is lived. Living in hope is active, unlike the listlessness of despair. Marcel states:

To hope is to carry within me the private assurance that however black things may seem, my present intolerable situation cannot be final; there must be some way out...It is an activity of human will - at the most basic level, the will to live. (p. 336)

The earlier accounts showed the inner activeness of non-doing and this passage from Marcel suggests that part of this activity may be the play of hope within the passivity of despair. If the participants are called to take a stand by the uncanny space of non-doing then living in hope is one way to respond to the weight of expectation and the loss of self-hood.

Fujita (2002) discusses the distinction between the enclosed nature of expectation and the openness that characterises hope.

Both hope and expectation refer to the future... However - hope differs from expectation in that there is a kind of relaxation as seen in the fact that no hope is unendurable and unbearable; the exact occurrence of the hoped for event is not definitely known; the hoped for event lies at a certain vague moment in the future; and the image of the hoped for event is indeterminate. (p. 129)

While expectation encloses and weighs one down in its specificity, it seems that hope has the potential to open and uplift one's being-in-the-world because of its uncertain sense of possibility. However, the vagueness of hope does not necessarily mean that it involves passive waiting. As Marcel highlights, hope is an active *response* to the realisation that all certainty and meaning has disintegrated with one's undoing. The hope that the participants must hold on to is the possibility of a life worth living for and the possibility of finding a way out of their suspended state.

From the participant accounts, it seems that non-doing does not involve constantly living in the brilliance of absolute hope, but is more of a shifting back and forth between listlessness and hopefulness of darkness and glimpses of light. It seems then that the play of non-doing remains active only if one is able to keep a sense of hope alive in the closed space created by expectation and despair. Understanding the relationship between expectation, despair, responsibility and hope appears integral to supporting people in the non-doing mode. There is a certain dissonance or uneasiness in the play of

doing nothing; a shifting back and forth between despair and hope for one's own being-in-the-world and between shutting down and opening up to the everyday world of others. The to and fro that lies in any play is where new meaning is created and leads to new insights and change. Miller (1996) proposes that meaning lies not in things but in between, in the interplay, the indirect reflections and broken glimpses of light. Perhaps it is the darkness of non-doing that allows even glimmers of meaning to emerge, as Marcel (as cited in Randall, 1992) indicates:

It seems to me that the conditions that make it possible to hope are strictly the same as those which make it possible to despair. Death [is] considered as the springboard of an absolute hope. A world where death was missing would be a world where hope only existed in the larval stage. (p. 338)

Thus, without the death of a previous life and the possibility of further deaths, the particular play of non-doing would not exist. In her earlier account, Kay says she has hit rock-bottom several times and this has given her impetus to not go back down there again. By sinking down to the very bottom of despair she has something to push off from – a “springboard” of sorts. That is not to say that one cannot be drawn to the light of hope when floundering just under the surface – but it is the density of the rock-bottom that allows one to push off towards that light. It seems that in the play of non-doing a sense of new meaning and hope is held only fleetingly as it emerges out of the nothingness and returns to the nothingness (Miller, 1996). The paradox here is that the darkness of non-doing not only preserves one's selfhood by concealing it, but also allows the revealing of one's possible selfhood in the form of a faint flickering hope.

Uncovering the Existential Ground of Being

It seems that in the non-doing state individuals remain separate from the everyday world and their tattered lifestyles lie detached, not providing the protection and comfort they once gave. If the unravelling of the participants' activities and roles began an *uncovering* of their usual being-in-the-world, in non-doing the uncovering is complete as their lifestyle falls away. The significance of the nakedness of the non-doing mode lies not in the disclosing of the self who is indeed exposed, but in the disclosure of the structures of one's doing and the meaning that this holds within it. The fabric no longer forms a well-fitted garment but falls loose and shapeless around the self. In this state it is possible for the self to view the detached fabric from a different perspective, as it is laid out around him or her. This is a new way of seeing the structure of one's being-in-the-world which already existed, but was concealed because the self was so ‘wrapped up’ in it. Thus, while unravelling may leave the self painfully vulnerable and exposed,

Heidegger (1927/1962) indicates that experiencing the nakedness of non-doing can free the self to get in touch with something essential, in the form of care.

The participant accounts show how the ‘death’ of their previous life does indeed take the foundation of their very being out from underneath them as they lose sight of all care and meaning in their suspended and removed space. Both care and meaning are created and lived out in the play of active-being-in-a-world, where one makes commitments to other people and things. Paradoxically, it seems that in withdrawing from the binding of these commitments one creates leeway for gaining perspective on what really matters. It is in the active play of the non-doing space that the essential ground of care can be uncovered. The uncovering of care is not so much a grand unveiling, but occurs as reflections and glimpses in the to and fro of despair and hope, and expectation and responsibility. It seems that within the painful process of undoing and non-doing there lies the possibility of re-fabricating one’s everyday life-world in a new form and this begins with getting in touch with the existential ground of being, which Heidegger (1927/1962) describes as care.

Summary

Despite the experience of detached numbness there appears to be some play space in the non-doing mode. It seems then that the binding of commitments, the weight of expectation and the call for responsibility from the everyday world are all forces at play for the non-doing person. The facing of death and the anxiety experienced in non-doing is a disclosure of the world rather than a feeling that one has. It is a way of looking at the structure of one’s being-in-the-world, but without the familiar feeling of being at home (Heidegger, 1962). However, if the play space of non-doing can be protected and maintained, it seems that it is possible for the undone person to find glimmers of hope, the courage to take responsibility for being-in-the-world and a sense of direction in the form of care. It is in this way that the person who is existentially lost and homeless opens up the possibility of creating a place to dwell again.

CHAPTER SEVEN

RECOVERING EMBODIED BEING IN HALF-DOING

*My action is my possession,
my action is my inheritance,
my action is the womb which bears me,
my action is my refuge*

(Anguttara NiKaya)

Introduction

Buddhist philosophy holds that our actions are central to our very being-in-the-world. The above poem reflects this philosophy and captures the essence of doing as a foundation for being and becoming across the course of time. The following chapter lays out stories of re-engagement in the world after periods of non-doing and shows the centrality of action in opening up being during recovery from mental illness. Heidegger (1927/1962) indicates that a key process in recovery is finding concern for that which has become visible through the taking apart of one's previous lifestyle.

All preparing, putting to rights, repairing, improving and rounding out, are accomplished by taking apart the 'in-order-to' of that which is circumspectly available in the world. We concern ourselves in accordance with what becomes visible through this process. (p. 189)

It may only be after making sense of one's undoing that the preparing and then repairing can occur. In the unsettled suspension of non-doing, the dishevelled fabric of the participants' lifestyles is detached and "laid out". The apparent death of a lifestyle forces reflection and a contemplation of the meaning in it. This chapter shows what happens when a person who feels exposed in non-doing begins to re-engage in an uncertain world, so that a re-covering can begin. The discussion focuses on the experience of being half-engaged in the everyday world and then explores some key aspects of the play in this particular mode.

The Lived Experience of Half-Doing

In their recovery stories most participants describe periods of time when they were able to engage with their immediate world in some way, but could not involve themselves fully in the everyday world. In this mode of partial engagement single activity threads

may be picked up and the weaving resumed. However, the multiple threads of activity that interweave to form roles and an overall lifestyle cannot be maintained. It seems that through half-engaged doing the participants are able to reconnect with the people and things that are immediately available, and reacquaint themselves with what Heidegger (1962) calls the *umwelt* or the “world around” (p. 93). This involves a gathering up of one’s activity threads and a gradual drawing in of the world-at-hand. At the heart of this process is the struggle to engage one’s embodied being-in-the-world.

The Lived Body as Resistant and Re-engaging

A change in one’s lived body is central to the half-doing mode, as re-engagement in the world requires a fundamental shift in the way one perceives and responds to things in the immediate environment. The participant accounts show how a significant shift in embodied attunement can be brought about through simple engagement with the surrounding world, but after the detachment of non-doing this process can be challenging.

The struggle to overcome embodied resistance

It seems that a significant struggle occurs within the participants’ embodied selves, as they move from being a lacklustre weight to active beings-in-the-world. An excerpt from Kate’s story shows how getting out of bed and engaging oneself in the immediate world understandably takes a great deal of effort. *“The struggling to get out of bed is really hard - medication is largely responsible for that. It’s also because...often you have nothing to get up for, or you feel so bad. I think that needs to be respected”*. Here Kate indicates that her difficulty acting in the world involves a complex combination of poor sleep, feeling physically and psychologically heavy and drained, drowsiness from medication and feeling detached from any sense of specific life purpose or projects. Without the structure of a meaningful lifestyle she has no reason to get up, which makes it very difficult to drag her medicated and weighed down body into the everyday world of busy involvement.

Difficulty engaging is not simply something cognitive or psychological; it is an experience of one’s whole being failing to respond. An excerpt from Sara shows something of this mode of embodiment. *“I remember not being able to get up and do what is so obvious. It is just like - you are aware that all these things require doing but it is just like nothing operates, nothing is instinct”*. Despite seeing the need to engage in the world around her, Sara cannot find a way to do so. Her embodied being will not act in a natural manner; there is no “instinct” or habituated responsiveness to things in the

world-at-hand. It seems that the smooth interplay between one's body and the world that disintegrates in undoing and ceases in non-doing must be re-collected in the half-doing mode. However, Sue's description shows how thoughts can also contribute to the resistance experienced when re-engaging with the world-at-hand.

When you have been unmotivated and incapable of doing things for a long time the thought of having to do something becomes far worse than actually doing it. It is like a barrier that builds up so getting rid of the barriers for me was quite gradual and for some reason I would be quite resistant. It was a gradual thing - it required encouragement.

Sue experiences an embodied resistance that must be overcome gradually. It seems that Sue's struggle is in part due to the *thought* of having to engage in the world. By contemplating an activity too much the anticipated effort required becomes larger than it otherwise would have been. Perhaps contemplation creates expectation, and as we have seen in the previous chapter, expectation can be a burden that weighs one down.

The automated plodding of half-doing

Overcoming their embodied resistance to engage in the world-at-hand appears to be a significant feature of the participants' experience in half-doing. It seems that if they are able to struggle with and respond to familiar situations then the "instinct" or embodied knowledge that is missing in non-doing can gradually return. However, even though a form of embodied responsiveness returns, it is not that of busy everyday engagement. Mike shows something of the half-doing mode in his recollection of gardening.

I can think of specific day when I was just finishing a half round path. I had to shift the soil into another plot and I was filling it right up to the edge of the garden. The ground was quite hard, so I was chipping away at it. Every shovelful was hard work. I was just plonk, plonk, just plodding along. I just did that, shifted that from there to there, did that, and then I shifted that from there. It was really plodding type of work and that was how I felt in myself. I just felt heavy and slow, really heavy and slow and I just did it. I mean it was like I was walking through mud. Everything was difficult. Everything was hard. It was just plodding, mindless, bloody mind numbing type of work. ...It wasn't my most pleasurable time. There was no excitement at having got it done. There was no wow, this is finished or anything, no satisfaction at all. I didn't go inside and think, doesn't that look fantastic.

Mike's vivid description shows the effort required to engage one's body in half-doing. He is moving and there is even a halting rhythm in his repetitive actions, but it feels like he is wading through mud, an embodied resistance to being-in-the-world. From Mike's account one gets the sense that the resistance lies in both his being and in the world with which he engages. The ground is hard, the shovel and dirt are unusually heavy and even

the space through which Mike moves is thick and resistant. Mike describes the doing as “mindless” suggesting a certain amount of automation in his actions and a lack of attunement to the world around him. If being mindful is associated with a higher level of concern for one’s doing, perhaps being mindless relates to only a partial sense of care or concern in the half-doing mode. All the same, the participants’ stories show that if one is able to fight the inertia of non-doing, changes in one’s being-in-the-world can occur in the half-doing mode.

The reawakening of being-in-the-world in half-doing

A key feature of the experience of half-doing appears to be the sense of reconnection to one’s embodied being and the surrounding world. Most of the participants described particular activities that helped them to reconnect to their embodied being-in-the-world after undoing and non-doing. For example, Beth describes being drawn into engagement with the world-at-hand through the activity of painting at a mental health day centre.

I used to come and use the paints and that was probably the only thing that I was doing at all. The only time I was leaving the house was to come and do that. There wasn’t any satisfaction - there was just a kind of enjoyment in the actual doing - I think. It was just the painting...I wasn’t too worried about how they would perceive it. I can remember a miserable painting - a crucifixion type of thing and it was a bit abstract - that is how I felt at the time. So it was like just putting that on paper you know.

The activity of painting allows Beth to enact her being-in-the-world in an embodied way as she puts aspects of her self out into the world again. Beth is not painting for others here and the outcome of her painting appears to be less important than the process. With each brushstroke Beth not only re-engages with the immediate world around her, but also gets in touch with and expresses abstract and painful aspects of her embodied being in a concrete and visible way.

For Sue walking is a useful activity in half-doing as it re-engages her with the immediate world.

I used to walk a lot - it meant that I was outdoors which had to be better. It meant that I was getting some exercise. It is an activity, something that you are actually doing. You have to put on your walking shoes, you know, and you have to get the dogs lead, you have to decide which direction you are going to go in, you have to dress for the weather, whatever it is. We live on a country road with no footpaths and you have to have your wits about you, it is not just like walking along a pavement, it is watching for trucks, people on horses, mad motorist, you know although you are not doing anything difficult or intellectual or anything like that - it takes a little bit of planning. It is like re-engaging with the world even if it is not person to person, but you are out

there you know and life is going on around you. When you are at home it is very easy to forget that there is actually a lot of stuff going on out there.

Walking is a habitual activity and not too demanding, which seems to be important for the person in the half-doing mode. However, walking does require Sue to prepare herself and make basic decisions about what to wear and which route to take. As she steps out into the world she is not yet ready to engage in everyday ways - “person to person”, but the immediate world outside Sue’s home calls for the re-engagement of embodied responses which were forgotten in non-doing. She needs to attune herself to traffic and other entities in the world-at-hand and be ready to act if needed. In half-doing, simple re-engagement with the immediate environment allows a reawakening - not only of one’s embodied being but also of a world that was previously distant and meaningless.

It seems that in half-doing one’s body may initially be a slow and resistant mass, requiring familiar and repetitive movements to re-engage in the world. There may be little satisfaction in doing, as even once highly enjoyable activities feel like a difficult struggle. However, in the process of engaging in simple activities there seems to be an opening up of being-in-the-world. Through involvement with things in the immediate environment the half-doing person opens the possibility of reintegrating embodied thoughts, feelings and action at the same time as reawakening what is available in the world-at-hand.

The Lived Time and Space as Drifting Movement

The preceding discussion shows how the re-engagement of embodied self can lead to the opening up of being-in-the-world for people in a half-doing mode. With this changing sense of embodiment and as new possibilities of being are disclosed, inevitably alterations in lived time and space also occur. However, the shared time and space of the public, everyday world and a sense of the “bigger picture” of one’s life seem to remain out of reach and distant in half-doing. Sue’s account shows how a lack of commitments after undoing leaves her with little sense of direction.

I got to the point where I could get out of bed and I still wasn’t seeing anybody or doing anything but what was the purpose of it all? There wasn’t any purpose. I had lost my career, you can’t just go back to something you have built for 30 years, so what do you do? I didn’t want to start again, so I didn’t consider the possibility of a different career. I didn’t think I had any options.

Even though Sue is able to get out of bed and engage at some level in her immediate

world she cannot see any possibilities or purpose for her being-in-the-everyday-world. She has not only lost a career, but has lost the structure and meaning of her whole world, a world that was fabricated over many years and borne of a commitment to those that she taught and those that were entertained by her dance productions. After extreme undoing and the loss of these bindings, Sue cannot simply slip back into her previous life with all of its fast paced busyness. As she tries to re-engage in the world, things may call for her attention but not necessarily in a way that fully engages and projects Sue towards larger outcomes or distant goals.

The half-doing space provides loose structure

It seems that lived space in half-doing is somewhat limited and is focused on what calls for a response in the immediate world-at-hand. A lack of clear direction and a weakened sense of proximity to everyday things appear to be factors affecting the participants' experience of space in half-doing. This phenomenon is shown in Amy's account of being half-engaged.

When I am in that state I am usually very physically laid back, I am sort of tired, I haven't got much energy, so I will potter around the garden...It is a very slow mode, in a very withdrawn slow, just get through the day, don't do anything sort of thing. It is sort of like, mental and emotional time out. Not like in the bits of depression where I sleep all the time. There may be some resting, and I may have a nap but it is certainly sleeping - it is not that blocking everything out... I do want some sort of connection at the time and it is...with nature. It is a place that I feel more contentment. I don't know if it is that back to nature thing, or some sort of primitive thing. I feel good in my garden so it is emotional or spiritual - there is something there that happens.

Here the physical listlessness of non-doing seems to linger, but Amy has enough drive to engage loosely in the world-at-hand. The half-doing space provides a mental and emotional time out for Amy; she has a break from living largely in her head and allows herself to partially engage in the world. This is not the "blocking everything out" of non-doing but it is also not the full engagement and focused doing of the everyday world. The description points to half-doing involving a diffuse attention to things, a being open to the things immediately available and simply being-alongside-them. What Amy describes is a mode of letting the things in the world around her just 'be' and in turn she can 'be' herself for awhile. She is open to some engagement if she feels called to interact but there is no great sense of purpose.

Significantly, Amy is open to some sort of connection when she is in a half-doing mode. Interaction with the everyday public world is too difficult, but in the garden she is able

to connect with the natural world and experiences a sense of being-at-home emotionally and spiritually. Amy suggests that pottering in the garden takes her back to something primitive, a fundamental ground for being-in-the-world. Other participants also point to the experience of being grounded and re-connecting with some fundamental aspect of being-in-the-world while in a half-doing mode. For example, an excerpt from Kay shows that being grounded also relates to time and space.

Music is [good] because you don't have to do anything and you really are grounded. Let your fears go away. Listen to what the music is doing, feel the environment. This is something I still need to work at. It really comes down to being grounded, being in the now.

By listening to music the surrounding environment is drawn close and the worries, which dominate Kay's thoughts, are distanced. For Kay, being grounded involves getting in touch with the world around her and being in the "now". Being present is both spatial and temporal, involving an attunement of one's embodied being to the 'here' as well as the now. However, this attunement is not easy to maintain in a half-doing mode as worries, fears and listlessness call one's attention to other spaces and points in time. Nevertheless, it does seem that simple engagement in certain activities can re-connect people in half-doing to fundamental aspects of being-in-the-world.

The half-doing time passes in a halting rhythm

The previous chapter showed how a lack of engagement in non-doing creates a suspension of movement in time and space. It seems that in half-doing, engagement in the present creates progression and continuity in time by reconnecting past and future in current activity. For instance, the slow steady pace of Mike's digging shows something of this temporal movement.

It just gave me a plodding, doing, had to be done, I have got to get it finished, just go out there and do it type activity. I was plodding, but I didn't want to stop it, I was just plodding. I felt like at that time it worked, I mean it worked, and it kept me occupied. It was mindless activity that I really didn't enjoy. I had to keep on; it took me 3 days, just to get it finished.

The slow, steady movement of time in half-doing is reflected in Mike's use of the term "plodding". Although digging is a repetitive "mindless activity" Mike perseveres because it occupies him, holding his attention in the present and providing structure for engaging with the things around him. Digging creates movement in time and space in a very concrete way, as with every spade full there is visible progression and this pulls Mike forward in time for three whole days. Elsewhere in his account Mike describes

how continuing this activity is a struggle because it is such slow, heavy work and the temptation to lie down is strong. The struggle to remain engaged in the immediate world has implications for the flow of time. In her account Kate says; “*Sometimes you can only stay up for 2 to 3 hours and you have to go and lie down again because you are still feeling like crap physically and psychologically. It is too much - you just have to escape*”. Here Kate can only engage in the struggle of half-doing for so long, before needing to return to the relative safety and relief of her bed. The need to escape the demands of the world can interrupt the half-doing space and the weaving of activity across time, which subsequently makes striving to achieve specific outcomes difficult.

In her account Amy shows how the achievement of specific outcomes may be less important than the actual process of engagement in the world, however halting.

I don't know what I actually do all day long when I feel like that because I am certainly not very active, but then I am not conscious of the day dragging. It is a pretty laid back, just potter around, but I mean I could do that for hours on end. Pottering is something that you can stop or start, there is no pressure with it. It is something that I might even do in the house when I am in that mood, potter. Not that I have to do the housework or I must achieve this, just potter from one thing to another without putting any great stress on any of them.

It is clear from Amy's description that time passes and there is some momentum in her being-in-the-world but the weaving of threads does not follow any particular pattern. Activities can be stopped and started with no pressure to maintain her involvement, allowing a certain freedom in Amy's engagement but preventing her from developing any overall rhythm or continuity in her day. It seems that a lack of tethering to everyday commitments in half-doing creates a drifting movement in time and space, and action is mostly responsive to what arises in the immediate world-at-hand.

In the half-doing mode the self tries to establish a structure to hang some simple activity threads upon. It seems that by acting in the world the participants experience an opening up of movement in time and space. This movement may not be at the pace or with the sense of direction as people engaged in the public everyday world, but it does open up the interplay of self and world through a turning towards immediate concerns.

The Lived Other as Separate and Supportive

As we have seen, by attuning to and re-engaging in the world-at-hand the participants experience movement in time and space and open up different possibilities of being. However, in half-doing involvement in the world does not extend to full engagement

with others in everyday ways. The complex interactions and expectations of others in the public world are too overwhelming and remaining separate from this entanglement seems necessary.

The need to avoid everyday others in half-doing

It appears that because expectations of doing what is right and what is 'normal' weigh heavily and create pressure, the busy public world remains a threat to people in the half-doing mode. In his account of plodding in the garden, Mike describes a distancing of himself from the everyday being of others. *"In some ways it [digging in the garden] took me away from everything and it didn't involve me in anybody else and I was just left alone to do it. It was my way of avoiding everyone I suppose; it worked, they all left me alone"*. Here, Mike cannot cope with the everyday entanglement and busyness of everyday interactions and values the space created by being apart from others. Amy is also averse to engaging with others while gardening.

If I am in the garden that is a little bit more vulnerable because of the situation. If you arrive, you are going to see me, so that has a risk with it, you know. I am so anti people when I am like that, not anti them but I just don't want to be around them. It is just - needing to be for a while without actually doing anything or living up to anything or having to give anything out. Sometimes I feel that I have got nothing to give, or that if I do give anything it is like I can't afford to lose that.

Amy is not ready to enter the everyday public world of others, who go to work and have structure and routines. Being in the garden is on the edge of public space and involves the risk that people of the everyday world will inadvertently draw her in to their world, where there are expectations to live up to. It seems there is vulnerability in half-doing as opening one's being up to the world involves the risk of failing and being judged if one cannot live up to expectations. Similarly, Beth explains why after moving home from a mental health service she still needs to maintain distance from others.

For quite a while...I think I was still quite distant for people. I had like this big shake up and after I felt really self protected not wanting to let people in my life and I would say that was for about a year. ... The thing about all of this is that living is so hard that really the only person you can concentrate on is yourself. Anything else is like really really hard work.

Beth shows how despite being able to engage with the immediate world and move from a mental health service into her own place, she still avoids involvement in everyday being-with others. For some time Beth needs to maintain space away from the expectations and judgement of others, which allows room for her to focus on her own

being-in-the-world and engage in the struggle of half-doing.

The need for others to provide structure in half-doing

One of the risks involved in moving from non-doing to a half-doing mode seems to be the creation of links with at least one significant other. This requires the non-doing self to de-distance herself and allow the other to step into her suspended world. In the following excerpt Amy shows something of this as she talks about her relationship with a therapist.

It was a very small step at a time. ...For possibly 6 months, I think I just went to the therapy sessions. I think deep down I knew I had to do something. I didn't know how to do it. I wasn't actually sure that I wanted to do it, but that was just my one link. It was through her [the therapist's] suggestions or challenging me a little bit at a time that I started taking small steps. It was probably my first mixing, with people. It was she that made the suggestion of going to the day centre and so that was my first step. It was like 'hello everyone, goodbye I am off now'.

In recounting this narrative, Amy shows the importance of the connection with another person in rebuilding structure in her everyday doing. Amy allows the therapist into her world through simple activities, which create a link to the immediate world and by which the therapist can gradually draw Amy out of her enclosed world. Amy is asked by her therapist to commit to taking small steps into the everyday world. Amy is not sure that she wants to engage in the world again and feels like she cannot, but something drives her to try. Perhaps it is Amy's link with her therapist that creates enough concern for her to follow through with the commitments that she makes.

The half-doing self may feel unable to make decisions and organise situations for engagement in the immediate world. Having others make decisions can create a turning towards and a drawing near of entities in the surrounding environment. This provides structure in both time and space and allows possibilities to arise. The plodding self cannot necessarily create this structure alone, making some dependency on others essential in gaining momentum for one's being-in-the-world. At one stage in his story Mike spends many hours sleeping in a non-doing mode. However, his link to a support person allows him to move beyond this suspended being-in-the-world.

Slowly I weaned me off sleep and we would go out and do things together. So I got up every day and had a shower, would do some things, a little bit of gardening, go for a walk or do something. But I would be in bed by 8.00 or 9.00pm.

The same person that created the space for Mike's non-doing gradually encourages him

to re-engage in the world-at-hand. Mike describes this as a weaning process, a withdrawal from the soothing oblivion of sleep and a turning towards the activities of everyday being-in-the-world. It seems that Mike's support person does things alongside him at his pace and brings him into a different mode of doing.

An excerpt from June shows the benefit of having others provide simple activities in a hospital setting.

People came in and did crafts. That was important for my recovery, to feel that I was doing something, making something. I made some silk scarves, they had silk material and we painted the scarves and dyed it and I made those and I made 2 and I gave each to a friend and they have got them to this day. I met them last year sometime and she was wearing hers, so that really sticks in my mind.

June values the sense of movement that painting silk scarves provides in the limited structure and space of the hospital. Others provide the materials and space for June to engage in something simple, which requires no planning and little precision from June, but the activity draws her senses in and allows June's being out into the world. Successfully producing silk scarves with their luxurious touch and colour not only reinforces June's fundamental existence, but it also strengthens her connection to certain others in her immediate world, as she gives the scarves to friends.

While being-with others in everyday public ways is too much in the half-doing mode, the involvement of trusted others appears to be essential in supporting the opening up of active being-in-the-world. Others might initiate or drive an activity and hold interest in it when the half-doing self cannot. Others might also plan and provide structure in time and space so that threads of activity can occur. When the individual connects to significant others through re-engagement, tethering points are made in the immediate world-at-hand. It is in these bindings or commitments that the call to care for something can be heard and responded to, and structure for the re-fabrication of meaning develops.

Understanding the Play of Half-doing

The preceding accounts of half-doing show how changes in lived space and time occur as the participants begin to develop a more active embodiment in the world. The following discussion sets out to explore the factors at play in half-doing in order to shed light on the dynamics of the mode. The questions that arise here include: what occurs in the half-doing space to open the interplay between embodied self and the immediate world and how can the play of half-doing be supported?

Taking the Leap into an Uncertain World

It seems that the half-engaged mode is a state of living on the fringes of the everyday world. As we have seen ‘turning one’s self around’ in non-doing can open a sense of care and possibility in the form of responsibility and hope, but it does not provide any specific sense of *how* to re-engage one’s being-in-the-world. At the fringes of being-in-the-everyday-world, the weight of expectation and the need to do nothing are still significant forces at play. As the preceding accounts show, in half-doing one’s body is still heavy and slow and re-engagement involves a significant struggle.

It seems that there is no one point when the way is clear and the non-doing person feels completely ready to engage in the world. When discussing progression from non-engagement to engagement Sara questions “*when are we ever ready?*” suggesting that it is not possible to simply wait for a state of complete readiness. Rather one has to force oneself to act within the world again. Perhaps what is needed is more like the *leap of faith* that Marcel (as cited in Randall, 1992) points to when he says “we must often live experiences more than understand them” (p. 356). That is, sometimes what is required is the courage and hope to take leaps into the unknown, as we cannot always find the answers to issues of being-in-the-world through rational problem solving. Making the leap means going past fear and the threat of failure to step beyond known boundaries and patterns of existence. Perhaps this is the key to moving from non-doing - not a feeling of strength and ability to engage in particular activities, but an opening up of oneself through hope and courage to step into the unknown and to engage in the struggle of half-doing.

The preceding participant accounts suggest that making the leap into engagement is easier said than done as there is little sense of direction or care and the temptation of sleep and detached oblivion is ever present. One excerpt from Sue highlighted how the thought of doing something can become bigger than the act itself. However, Linschoten (1968) suggests that having an idea of something before one does it can help in making the leap. He indicates that this ‘ideomotor’ activity allows the thought or representation of a movement to be collected, which provokes the embodied action - as illustrated in the following example:

We know what it means to leave our beds on an ice-cold morning in a room that is not heated. The thought of getting up is simply unacceptable as long as we lie under the warm covers...we try to stretch the time out to another five minutes, but a sense of duty calls and rather than making a decision to arise, we suddenly notice that we are up. (p. 273)

Just as one never feels completely ready to get out of bed on a cold morning, people in non-doing do not feel prepared for involvement in a threatening and senseless world, but at some point a sense of obligation calls for engagement and the metaphorical leap into being-involved-in-the-world is made. It seems that no amount of thinking will provide answers to fundamental problems of being-in-the-world. Perhaps what is important in half-doing is for the person to have a mental image of what is to be done, but not to dwell in thinking about a task before taking the leap into engagement. To re-engage with the world the participants need to take the risk of opening themselves to various possibilities of performance and outcome, and thinking may prevent this if it involves rigid expectations. That is, the half-doing person may anticipate certain failure, overwhelming difficulty, or feel the pressure of performing at a certain level with particular outcomes. While both success and failure are always possibilities, it is taking the risk and making the leap into an uncertain struggle that is important for opening up the play-space of half-doing.

In her account Beth describes a struggle to engage with the world and says *“Basically it was like if I wanted to get through it I just kind of had to make myself - I needed quite a bit of space”*. Beth needs to ‘make herself’ as she fights the urge to simply do nothing. As in the non-doing mode, the responsibility for creating her being-in-the-world lies with Beth. Others may provide support but ultimately it is the person in the half-doing mode who must answer the call to overcome the resistance in his or her being and leap into engagement with the surrounding world. Beth says that she needs “quite a bit of space” to engage in this struggle and the nature of this space will be explored now.

Reconnecting with the Immediate World

In their accounts several participants used the word *respite* when discussing environments that would help their recovery. For example in her account Kate says: *“I love the idea of environments of true respite...providing environments where people have freedom, you know.”* This excerpt points to the need for a particular kind of space to support the recovery of being-in-the-world. Kate suggests that places of true respite are supportive if they allow freedom to set one’s own pace and choose one’s own way of being-in-the-immediate-world. Sara also discusses the need for respite.

I would love to see a whole lot of respite places.... Respite might be in a house up at a beach or something and I just go there and help do whatever is done there, but it is away from the environment that I am having trouble getting engaged in. Then you would be also preventing the opportunity for being an isolated situation.

Sara points to respite as being places that are removed from the play of everyday life, but at the same time do not leave one completely disconnected. For Sara having something to engage in and be part of is important, even if it is a temporary structure to support her being-in-the-world. While Kate and Sara's accounts refer to respite as a service or a physical space for recovery, they could equally be indicating the need for respite as a form of lived space. Interestingly, the word respite comes from the French *respit*, to linger, or tarry. These origins suggest that being in respite is not a completely passive state, but rather dwelling in a space of slow plodding and meandering. Perhaps then, respite is also a lived space in which one feels free from everyday commitments and free to linger with what is immediately present.

The need to abandon one's being to the world-at-hand

The significance of respite as a lived space for plodding becomes evident with an exploration of the notion of *tarrying*, which Heidegger (1927/1962) suggests is a way of being that *abandons* one to the immediate-world-at-hand. Bollnow (1961) uses the metaphor of rambling along a hiking path to capture the experience of tarrying. He says of the path:

It is not cut hard into the countryside like a rationally laid road but clings to the natural landscape. It curves and winds where the auto road goes straight, it leads thoughtfully around a tree which the road builder would consider an obstruction and tear away. Movement on such a path is different and the feeling of space is different. (p. 36)

It seems that the person in half-doing travels a hiking path rather than the straight highways of everyday engaged life. At times the path may be particularly uneven so that one has to watch one's step for fear of stumbling, and it is only in the pauses that one can look up to admire a tree or a glimpse of a larger panorama. Even so, despite the need to carefully place one foot in front of the other, Bollnow (1961) indicates that there is some purpose to this slow mode of being-in-the-world.

This jettison of rushing to goals, this inner aimlessness, is really the life function of rambling. Man steps back from the rational goal-striving to which the civilisation presses him, back into an earlier...almost prehistoric state in which he can freely enjoy the pure present. (p. 36)

Bollnow (1961) asserts that the slow plodding pace of tarrying returns human beings to the origin or basis of all things. Being in respite allows one to step off the straight and fast paced highway and to get in touch with the basis of being-in-the-world as embodied involvement, interacting with the immediate world. This notion of getting 'back to

basics' is captured in a rich description from Sara in which she recounts how she would go to stay with her mother when she felt like the pressures of the everyday world were too much.

My Mum used to invite me down for the weekend.... [She] was always like an anchor for me. We would do shopping, walking, go see one of my aunties and I would go to the movies, and while we were doing all of that we would also be drinking tea and coffee and talking and catching up... [We would] sleep like a log and eat too much tea. They were just ordinary necessary things. We didn't walk any marathons you know climb any mountains, it was just a time to be and just go with the flow and do what comes up and nothing much is planned. You don't think of much until whatever happens – it's calling the tune you know - like if you open the pantry and there is no raw sugar left, well you go down to the shop and buy some, it is just a responsive kind of opportunity. Because when you are working with those sort of [everyday, fast] paces as you well know, you don't think about that, do you. I bet you didn't think this morning when you were driving down the motorway 'how much raw sugar have I got left at home'? ...It was being away in a totally different environment, you know - it is, kind of [being] unreachable. There isn't any level of availability to anything or anybody because you are not home.

Here Sara enters a type of half-doing mode after becoming overwhelmed with engagement in the everyday world. She describes escaping the goal oriented everyday world and going back to a way of being that plods along at a pace in which she can get in touch with and respond to the basic things of life. She interacts primarily with the world-immediately-at-hand and responds as and when the need arises. In this account Sara does not struggle to engage in the world in the same way as she and the other participants describe after periods of non-doing. She *makes* herself unavailable rather than being unavailable through complete undoing. However, the pace and attunement of the experience is still of a plodding nature, suggesting that half-doing is a mode one can *return to* from the oblivion of the fast paced everyday world as well as from the inert space of non-doing.

The possibility of getting back in touch with the world-at-hand

After the concealment and forgetting of non-doing an important part of the half-doing play is the potential in it for remembering the world-at-hand. It seems that the lived space of respite not only allows freedom from the everyday world of others but it also allows freedom for 'getting back in touch' with what is available in the immediate-world. Touch is important in the half-doing mode as one strives to understand and grasp what is within reach. For Heidegger (1987/2001) "Grasping is only possible when something is nearby to be grasped... [therefore]...touch is called the sense of

proximity” (p. 83). In grasping, the hand is in immediate contact with what is available; resulting in a *taking hold* of what is present in the immediate world.

Kay reaches a point where she is ready to get in touch with the world again: “*I was ready then to be more tuned to the sensation of working with my hands, whereas before the head was really in the past and I always struggled in the now*”. Kay indicates that by engaging with what is present around her she is able to be more at ease in the now rather than living in the past. As she reaches out and involves her hands in practical activity, Kay re-connects with the sensuality of the world-at-hand. It seems that getting in touch with the things immediately at-hand opens the possibility of *making sense* of an otherwise senseless world. That is, one comes to ‘grasp’ or understand the background structures of being-in-the-world through hands-on practical involvement with things.

It appears that the slow pace of half-doing is important in that tarrying allows one to return to and grapple with what is immediately-at-hand. If after a period of non-doing one was able to slip back into old patterns of engaged doing simply by falling into line with the busy pace of everyday life, the nature of the world would not be recalled in the same way. Significant aspects of being-in-the-world, which lie at one’s disposal, would remain taken for granted and forgotten. As we have seen, in half-doing the bigger picture of everyday care structures remain somewhat concealed, resulting in the inner aimlessness that is characteristic of tarrying. However, because the half-doing person feels somewhat resistant and without purpose, he or she is at the same time freed from being or doing anything in particular. Hence, it is the open aimlessness of tarrying combined with the struggle to overcome resistance that creates the critical dynamic of the half-doing mode. The leeway between the complete detachment of non-doing and the entangled pressure of the everyday world provides a potential space in which to explore and grasp new understandings and possibilities of being-in-the-world.

Overcoming Resistance to Being-in-the-Immediate-World

Having noted the importance of respite for getting back in touch with the world-at-hand, the discussion now turns to look more closely at the play of half-doing. As shown in the earlier accounts, the leap into half-doing requires opening one’s being up to what is immediately present. However, abandoning one’s being-to-the-world or ‘going with the flow’ may first involve overcoming a certain amount of resistance. For Heidegger (1987/2001), resistance is a mode that can be understood as a particular way of being addressed by, and of responding to, what is present in the world. In half-doing, the world-at-hand resists engagement and things are made conspicuous and somewhat

obtrusive in their heaviness, awkwardness or complexity. However, as in any mood or mode, resistance does not just exist in the world-at-hand but it also lies within the person's own embodied being as he or she struggles to overcome the heavy numbness and loss of care that lingers from non-doing.

It seems that if new possibilities of being are to emerge in the half-doing mode, both the resistance within the world and in one's embodied self must be overcome. By abandoning oneself to the world-at-hand one opens up opportunities for receiving and perceiving situations that matter and call for an active embodied response. Through the 'getting-in-touch' and 'making sense' of tarrying one may become caught up and occupied by whatever arises in the world-at-hand. For Heidegger, intention is not so much about cognitive awareness of wanting to do something and planning how to do it, but rather it is engaging practically with things and responding to them for a purpose (Dreyfus, 1991). Thus, while tarrying creates time and space for half-doing, it is in the struggle to overcome one's resistance and respond to what arises that the active to and fro between embodied being and world-at-hand is restored.

The recollection of a world by occupying one's being

Opening up the play between one's being and the immediate world allows two important processes to occur. The first of these is the *re-collection of the world*, whereby things in the world emerge as being present and available again. For example, in the previous chapter, we saw how Sue found even her favourite books to be resistant and a threat in non-doing because they demanded engagement that she could not contemplate. However, in her account as she gradually re-engages in reading she goes on to say: "*I have started reading again and it is like this whole world has come back to me*". Here Sue has overcome the resistance to reading that was previously so strong and gradually an important aspect of her world comes back to her.

Merleau-Ponty (1999) states "the body is our general medium for having a world" (p. 146), suggesting that our body is a fundamental means of communication through which we create and shape a world. This notion highlights the significance of active embodiment in recollecting one's immediate world after the disconnection of undoing and non-doing. By engaging in the struggle of half-doing the participants begin to *occupy* their embodied beings again. That is, they take hold of and in-habit their body once more through familiar interaction with the world. In overcoming their embodied resistance the participants open space for allowing the world to come back to them.

Heidegger (Inwood, 2004, p. 117) states that "letting-something-be-involved is the

condition for the possibility of encountering anything available” (p. 117). That is, for things in the world to be available as meaningful objects we must actively *make* them present by engaging with them in a way that lets them come forth. For example, an account from Kay shows how things in her immediate world become available to her as she engages with them and makes them present.

Walking is very good for sorting out the head rubbish and being attuned to something natural. It sorts out the head stuff... it's coming back to natural things, the sun on my face, feeling warmed by it, enjoying the sensation, stopping literally to smell the flowers, being aware of one foot being put in front of another. Hearing the environment around me, whether someone's mowing the lawns, dogs barking, children playing, hearing voices, cats singing, stopping to listen to their singing. The texture of a leaf, when it's smooth on one side and you can feel the veins on the underside, anything natural because this world's too artificial. I look at the ducks, other people; see what the children are doing. Ten years ago, I would have been in front of the TV and been quite oblivious to my surroundings. TV is a load of rubbish now - it doesn't hold me.

While walking Kay's worrying thoughts are pushed away as she becomes engaged in and attuned to what is available-in-the-world around her. All of her senses are involved and it is through the senses that lived space is experienced and transformed. Entities in the environment are drawn near as Kay gets in touch with and appreciates their qualities. In turn, the world-at-hand draws Kay in and holds her, showing the opening up of the inter-play between self and world. Watching television does not hold Kay in the same way as she sits there passively, forgetting what is immediately available to her, while through walking she is able to recall the nature of the world as rich and full of possibility.

Van Manen (1999b) argues that knowledge of the world is retained within our embodied being. This knowledge typically remains overlooked because we utilise it so routinely in our everyday relations and actions. We acquire embodied knowing, according to Gadamer (1975), through transient but meaningful experiences which leave within us “a yield or residue that acquires permanence, weight and significance” (p. 55). Perhaps then, it is through overcoming their bodily resistance and engaging in plodding activity that the participants are able to retrieve embodied understandings of the meaning and significance of things in their immediate worlds.

The recollection of one's being by occupying the world

The preceding discussion described how the participants were able to gather in and reconnect with the world around them by taking hold of their embodied being. This

involved *occupying themselves* and calling for the world's return by actively engaging with it. Another key process that seems to occur in the play of half-doing is the recollection of one's embodied being by *occupying the world*. Occupying the world means actively taking hold of it and shaping a space for one's being-in-it. Bachelard (as cited in Frykman & Gilje, 2003) suggests that it is through the use of tools and materials for specific purposes that human beings take hold and create a world for themselves. He suggests that chains of personal meaning and memory are stored in the world-at-hand and particularly the tools being used, just as much as they are in one's embodied being. "Overcoming the thing's resistance makes us conscious of our strength. It awakens the exciting realisation that we can become something more. That something more is created by man's active provocation of the world" (Bachelard, as cited in Frykman & Gilje, 2003, p. 39). Thus, as one takes hold of the world and occupies a place in it, one arouses a residue of understanding about oneself that is held within other people, objects and places.

Through engagement and dealing with entities in the world, the participants were able to have *glimpses* of themselves as being a certain way; including being in control of their embodied being, being contented or pleased, or having some sense of movement forward. Jim shows something of this as he describes his engagement in activities within an occupational therapy room.

We could go unattended; do what we had to do, whether it be carving leather belts or stuff like that. I would do my carving, hand bags; you get them off imprints of anything you want. I have got an artistic eye so I'd do an imprint; transfer it onto the leather and 'poof' it is looking back at you, 'yeah this is mine!' It was really cool because whatever we made we kept.

In this excerpt, as Jim engages with materials and equipment to carve leather belts and handbags he creates something that he says, "is mine". He not only possesses the items that he makes in that he can keep them, but each object that Jim makes is his in another sense. That is, it his work "looking back" at him, an expression of his artistic eye and careful hand. Aspects of Jim's being-in-the-world are reflected in the objects he makes and each one has the potential to remind Jim of whom he is and who he might become. The mode of half-doing allows an integration of familiar sights, sounds, tastes, movements and feelings to occur and active ways of being-in-the-world are opened up. The residues of embodied knowledge and habitual responses which normally sit in the background of one's awareness are retrieved as the participants re-occupy a place in the immediate world.

Recovering the Embodied Ground of Being

In her account Amy provides a rich description of how the play of half-doing not only creates movement and understanding, it may also lead to significant turning points in the recovery of one's being-in-the-world. The power of tarrying and the reconnection to her immediate world allows Amy to see beyond her existence in half-doing and to turn towards other possibilities of being.

I was really at a point of, 'I don't know what to do'. I went to a retreat at a beach and I went in there saying, 'look obviously I need to stay somewhere but I don't want to have my meals with other people' and what I did was, I walked the beach. This was a pretty rugged beach. I was able to get rid of a lot of responsibilities and worries. I just left it all behind and for a long time I had just felt terrible about everything but this gave me an okay feeling. It was possibly all I could cope with at the time, you know this is it, this is the essence, I could feel some goodness. I don't even think I did a lot of analysing or working on it. I just 'was' - I just was with it for a week. It had a sense of spirituality about it, it had a goodness and I was part of it. Belonging, I think that would be the strongest and the easiest way to explain it. I was part of the natural cycle of things, the tide coming in and the wind blowing through my hair and being active in it. I just had to do it. I would walk for 6 hours, 8 hours, 10 hours. I will never forget the experience; it was a very deep thing for me. I think it was a bit of a turning point, it showed me, it gave me hope. It let me touch on some of the goodness of life. It was just, 'wow - I can go do this'. It was temporary as you would imagine but it really lifted my spirits. The negativity went away, well it didn't go away, it faded a little bit and I could see a light at the end of the tunnel.

Within this story Amy is clearly still in a half-doing mode in that she doesn't want to be around other people and she needs to leave everyday worries and responsibilities behind. However, rather than retreating to the oblivion of non-doing Amy abandons her embodied being to the immediate world and achieves a powerful shift in her being. Walking is an activity that literally and existentially produces movement for Amy. The action creates a rhythm which connects Amy to the world outside of her head as she becomes part of the natural cycles of the sea, sky and land. She leaves her fears and worries behind as she engages with something much bigger than her self and she is allowed to just "Be". Amy says that the experience shows her something of the goodness in the world, but also that she can occupy a place within it. She has a renewed sense of embodied agency and connection as she says "wow I can do this". Amy indicates that the turning point is a moment of vision, a glimpse at the possibility of belonging in a world and although the moment is temporary it puts Amy in touch with something significant. It seems that after the suspension of non-doing, Amy's week of respite brings her back to the ground of her existence as an active embodied being,

occupying and being occupied by an immediate-world.

The participant accounts suggest that certain forms of activity are particularly useful in ‘grounding’ one’s embodied being-in-the-world-at-hand. While one can abandon oneself to any activity, many of the participants appeared to find activities in the natural world such as walking and gardening particularly useful. They also discussed the benefits of creative activities such as painting, writing, clay work and playing music. These forms of activity have been used for their healing qualities for centuries and there seems to be something deeply intuitive about human beings’ consistent return to them. A final excerpt from Amy shows how she reconnects with the ground of her being as embodied involvement in a creative activity.

I got into using chalk pastels and those are very tactile things you smudge with your fingers and that. I just get in there with my hands. I don’t know how that works but it’s very very beneficial, just the rubbing of colours in and moulding, you are sort of connected with it, not at the end of a pencil or a paintbrush. It’s sort of like gardening, I find that tactile as well. You are in contact with what you are doing. I don’t know the fundamentals of it, but I was able to connect with it. I didn’t actually feel at the time that it had great benefit, but I definitely felt calmer at the end and I would go back and do it. Obviously there was something working even if I didn’t want to admit it or I couldn’t see the benefit of it. It is not a pleasure thing it is like a connecting thing, it is the right thing to do. It isn’t, ‘this is really great I am enjoying it’, but things come naturally, the natural thing. It does promote calmness in me, peaceful, quiet things.

Once again Amy shows the significance of being in direct interaction with the world around her. She experiences a certain amount of freedom in using her hands and acting out her thoughts and feelings through doing. Creating art grounds Amy by drawing the world in to her as she connects directly with the materials she works with, while at the same time it also draws Amy out of herself and acts as a release of tension. By engaging in tactile activities Amy has an immediate and primary experience of embodiment, quite different from the world of secondary experience, which occurs when one dwells in thinking only. Amy’s experience seems to involve less of a cognitive awareness of how enjoyable or otherwise the activity is, but it is an embodied calmness. She experiences her interaction as being natural – “the right thing to do” and it seems her embodied understanding of being-in-the-world as habitual action returns. Perhaps having things “come naturally” and feel “right” is a moment of being-at-home-in-the-immediate-world again; achieving what has been described as the experience of “maximum grip” (Dreyfus, 2002, p. 13). As discussed in this chapter, retrieving one’s grip on being-in-the-world seems to involve first getting in touch with what is available, grappling with

things and finally taking hold of the world-at-hand and one's being-in-it.

It is in the moment of maximum grip that one feels most connected and grounded in one's body. When grounded, one has something to "stand on", a way of being that feels secure, and that supports movement towards particular possibilities of being. Amy's account also indicates that a sense of being grounded in one's immediate-world creates an outlet for the release of energy, in the same way that energy is discharged from an electrical circuit through its grounding (Lowen, 1993). While no one activity will be meaningful for all people in the half-doing mode, it seems that activities that stimulate the tactile and kinaesthetic senses are helpful in the play of reaching out and getting-in-touch with one's world-at-hand. Familiar activities with regular or rhythmic patterns seem to assist the retrieval of embodied responses and in turn allow expression of one's embodied self. By providing opportunities for familiar activities that are deeply rooted in the half-doing person's previous doing, carers can invite a re-turn towards active being-in-the-world. Polt (as cited in Frykman & Gilje, 2003) points to the significance of active engagement for grounding one's being: "The activity of using and making is a better clue than the activity of studying and knowing.... The everyday environment provides an excellent opportunity to recognise ourselves as engaged actors who dwell in the world as a significant whole" (p. 42). Thus, it is through dealing with things in half-doing that the process of re-integration occurs. However, the inter-weaving of being and world in simple threads of activity is once again a gradual and partial disclosure in the course of a sometimes difficult struggle.

It seems that not only can human beings be provoked by the world and drawn into practical involvement; the world can in turn be called on by human beings and equally drawn into involvement. In this to and fro process, aspects of both the world and one's being are made present through practical engagement. Perhaps then it is through the tarrying struggle of half-doing that the world is disclosed in such a way that what threatens and what opens possibilities are brought into sharp relief. The blueness of the sky, the kindness of others, the warmth of the sun, the captivation of a good book and the heaviness of a spade may all be re-called as aspects of the world are made present again. Additionally, one's potential for being a particular way; including being strong, creative, connected, kind or able can be recalled in the play of tarrying engagement.

Summary

The focus of the half-doing mode seems to be the re-engagement of one's embodied being with the immediate world-at-hand. The closing down and forgetting,

characteristic of non-doing is replaced with a remembering of possibilities. This involves a reciprocal letting one's self out into the world and a letting the world into one's self. In half-doing, the to and fro between self and world is re-awakened and the dynamic structure of life's fabric begins to re-form with the weaving of simple but meaningful activity.

CHAPTER EIGHT

RECOVERING SOCIAL BEING IN ENGAGED DOING

Introduction

The stories in the previous chapter show how the essence of half-doing is the re-embodiment of one's self through basic involvement in the world-at-hand. The focus of this chapter turns to *engaged doing* where the emphasis lies in moving beyond the limitations of half-doing, to test out one's being-in-the-everyday-world-of-others. Here, the re-covering of the exposed self continues, and in particular the mode involves recovery of one's social being-in-the-world. A feature of the mode is the gradual return of understanding and an attunement of care for everyday ways of being. As Heidegger (1927/1962) reminds us, we cannot fully see or understand something unless we experience it in action and so a turning towards busy interaction with others is required in the engaged mode. While half-doing allows a 'getting back in touch' with what is available in the immediate-world-at-hand, as the following discussion shows, engaged doing opens up the dynamic interface between self and a wider public world.

The Lived Experience of Engaged-Doing

In the preceding accounts of half-doing, the participants avoided engaging with everyday others, not ready to live up to the expectations of the public world. However, there were times in the collected accounts when the participants did feel able to respond to everyday demands. If meaningful role strands are to be re-fabricated, engagement with the wider world is necessary for those recovering from undoing. Heidegger (1927/1962) points out that being-in-the-world is essentially being-with-in-the-world. That is, in everyday life our being and doing is always in relation to others, even when we are in the physical absence of others. Thus, a significant aspect of the engaged mode of doing involves finding a fit between one's own embodied being-in-the-world and the being-in-the-world of others.

The Lived Body as Responding and Understanding

The experience of one's body in engaged doing appears to have a different character from that of the slow, deliberate half-doing mode. It seems that the re-collection of everyday ways of being-in-the-world can lead to a renewed sense of agency and connection to others. One aspect of this process is achieving an embodied sense of

understanding within the everyday world and a renewed ability to respond to it.

The embodied understanding and responsiveness of engaged-doing

Within most human engagement the lived body recedes into the background as the responses required are familiar and habitual. However, after prolonged disconnection from everyday being-in-the-world the participants do seem to notice the renewed sense of bodily understanding and responsiveness as they re-engage. For example, Sam's understanding of his potential for being-in-the-world develops through regular engagement in horticultural work.

All parts of the job are interesting; pulling out the vegetables, working in hydroponics, being in the shop too... It helps me sleep and it helps me focus - to be aware. Being aware that you're unwell or things are turning right for you, or sometimes not. On the odd day you have an excellent day - if you keep at it, it keeps getting better. It won't get boring and you know you can do it. If you focus and you have a good day, you have achieved something. When you are not doing it right or not focusing you tend to sway and when you sway it takes about an hour to get back to what it was [you were doing].

By engaging in regular work Sam is able to see how he is within himself, in a place where there are everyday expectations and standards to meet. Sometimes Sam is attuned to the work he is doing, the work is interesting and he says "you know you can do it", showing an embodied sense of agency. On good days Sam also experiences a sense of achievement. The focus, interest, agency and sense of achievement that Sam experiences all seem to be features of an engaged mode of doing. Sam also describes how on other days his being-in-the-world turns away from the everyday requirements of his work. Here he sways into what seems to be a half-engaged mode as there is a struggle to stay on task. To remain in an engaged mode Sam needs to continually make the world of work present by actively involving his whole being in it. This does not involve an intentionality whereby Sam cognitively plans what to do and then does it. Rather it is a struggle to turn his whole embodied being-in-the-world towards a concern for and responsiveness to the everyday requirements of his job.

Mike's account shows how his embodiment is transformed through engagement in practical everyday activities. The following passages describe his experience of helping to build a house, first by carrying large sheets of board for wall lining and then by nailing wooden panelling.

When I first started I would be carrying sheets with somebody up the stairs. By the time I had done one room I really surprised myself. I was able to get a sheet on my own...I would grab it, throw it up in the air which was higher

than the stairs, hold it, turn it on the stairs and carry it upstairs and I couldn't believe that. I got really strong and I lost a lot of weight and I was very happy doing that...

We had all this beautiful panelling and they had to be nailed in a very thin part, and it took quite a lot of doing. It was not easy, but that was my job...It was the precision of each small piece - get it in perfectly, make sure that the piece was straight, make sure everything was fine, getting it in right...Each one took quite a long time - the precision of it was something that really appealed to me. I am not usually good at that and I became very good at it and to some people they go 'oh yeah, that wasn't much', but for me that was just unbelievably good. It became a task that I took immense pride in.

In both excerpts Mike experiences the impact of his actions on entities in the world-at-hand and discovers the potential he has to literally shape the world he lives in, that is, to build a place to dwell. He reshapes his embodied self through regular activity and his change in capacity for work marks the progress as he goes. This account is not simply about physical strength, co-ordination or concentration though; it reflects a reduced resistance within Mike's being-in-the-world as a whole, in which heavy plodding is replaced with a focused freedom to engage in the world. Mike engages in the activities with great care and concern and his skilful precision provides a sense of enjoyment and pride which was not present in the half-doing mode.

The return of circumspect being-with others

Another primary change in embodiment that seems to occur as the participants engage in the everyday world is a sense of being-comfortable-with other people. However, after extreme undoing, the recovery of a dynamic being-in-the-world may be a gradual process. Amy shows something of the shift in her sense of embodiment as she gets used to interacting with others in the everyday. Initially she is extremely uncomfortable:

In all honesty over the whole period my major problem was not actually doing the job, the practicalities of it, it was the people interaction - it was being part of the world. It is not feeling like you fitted in it, I must do this and it was going against the grain. It was literally like doing something totally against your grain. It would be a bit like prostituting yourself when you are not like that. That is what it felt like. It didn't seem to affect my reasoning or anything like that, just people and being out there and part of life was the difficulty....

Later there is a tangible change in Amy's experience of being-with-others:

I can remember going in once, like "oh that wasn't so bad" I could actually feel that difference. I didn't really do anything different. Something inside must have settled a little bit or I relaxed more, or I was getting more comfortable with the people. I would go in and think 'oh that wasn't so bad this time' - it was quite noticeable.

Amy's initial sense of not fitting in is deeply embodied and being-with-others in everyday ways goes against the grain for her. She goes through the motions and does the job, and in doing so she sells her self to the entanglement of the everyday world, making it impossible for her to be wholly present in the experience. However, by engaging with others in everyday interactions a change in her embodied being occurs as she lets go of the fear that previously overwhelmed her. It is a slow process that requires the repeated experience of doing with others, but eventually the shift occurs and something in her "settles".

While Mike's account of building shows how engaged doing allows the development of new skills and capacities, several participants also indicate that by reopening themselves up to everyday situations, their *previous* sense of agency was re-collected. An example of this is shown in Sue's story:

I actually sort of surprised myself but I did do a little bit of teaching, like free lancing. Someone said 'would you come and take this class'? The first time I went I got to the door, sweating, shaking but I did and I found that yes I could still do it and I actually was very good at it still and the kids responded to me even though they were kids that I didn't know.

As she engages with a class of students, Sue's sense of uncertainty and fear dissipates and she recalls the feeling of being an effective teacher. Sue is pleasantly surprised as the children respond to her, reinforcing her sense of skilful embodied being-with. Heidegger (1927/1962) uses the term '*circumspection*' to capture this mode of skilfully dealing with specific things and situations in the world. The participants' stories show how circumspect engagement in the practical world allows one to experience, and therefore to understand, everyday practices through embodied actions. Some experiences confirm the presence of previous capacities; others show new possibilities of being, while others still show the limitations of one's being. This renewed perspicuity provides a foundation on which to further develop embodied action and creates the ground for being-with-others in the everyday world.

The Lived Other as Connection and Belonging

As we have seen, in the engaged mode there is a shift in embodiment towards a responsiveness that was absent in half-doing. This includes a change in circumspection in relation to others. In Beth's account she says: "*You are starting to think about other people - you actually have enough strength to concentrate on other people. ... I am starting to be a lot more sociable. I am starting to want to go out more - to go and do things*". Here Beth echoes the shift shown in the preceding accounts as she builds the

strength needed to get out and interact with others in everyday ways.

The reconnection to others through engaged doing

Expanding one's world towards others is not simply a physical movement of being-in-the-world, it involves an altered attunement. Mike shows something of this as he recognises the reciprocity of being-with-in-the-world. In the excerpt Mike refers to the women he was living with, who had provided him with so much support.

One of the women loved soup; I would make it for her. Sometimes I would be up in the morning making soup. It just gave me something that I could really look forward to, and I had some meaning. One of the women's sons would come around on a Thursday night so I would make soup for him to take away. He actually liked it so much that when it came to Mothers Day he gave me a card for Mothers Day. I felt like I was actually doing something. It gave me a real purpose, it made me feel very good, like I was needed and wasn't useless.

Here, Mike has the energy to expand the focus of his concern to the being-in-the-world of others. By making soup for those around him Mike experiences himself as not only a recipient of others' solicitude but he too is caring and useful and able to contribute to those who support him. This reflects Heidegger's (1927/1962) notion that being-in-the-world is a dialogue, an ongoing and dynamic process of actively shaping as well as being shaped by the other entities in one's world. It seems that the everyday dialogue that appears closed in non-doing and half-doing opens up in the engaged mode and the connection and meaning in one's relationships can be expressed more freely.

Along with doing-*for*-others, another significant aspect of the engaged mode appears to be doing-*with*-others. The interweaving of one's own activity threads with the threads of others forms bindings that reflect shared concerns. In the following passage Amy discusses the process of weaving together threads of activity as she begins her role as a worker in a day centre for people with mental illness.

I would go and offer my services and do little bits. I think just to be part of something - part of it a little bit, maybe not so strongly. I would go probably twice a week maybe... It was a slow climb up, but in giving back I knew that I was getting something.... I do remember sitting there, not saying anything, because I was out of my depth really. I didn't know what they expected of me or anything, but obviously I think the interest was strong enough or there was some sort of connection to it because I kept going. Then I found that I was able to contribute intellectually and I would have started doing some practical work on the business plan and could give my two pence worth and that seemed to be valued.

At the day centre Amy volunteers to help out with small tasks. She understands that in "giving back" to others, she receives something in return and she is "part of something".

In directing her doing towards others her being moves beyond herself and she begins the process of weaving a new role strand for herself – a strong binding to a shared world of concern. Initially Amy is unsure of what is expected and of her capacity to contribute, but by remaining engaged she eventually comes to understand that she does have worthwhile skills and knowledge. It is important to note here that Amy's doing is valued in the eyes of others. Her understanding of herself develops not only through practical engagement in specific activities but also through the responses of those around her.

The sense of fitting in with everyday others

Like Amy, Beth finds that as she re-engages in the world of work, the response of others opens up her being-in-the-world, saying *“gradually I had more trust put in me and recognition that I could do more and be given opportunities”*. It seems that not only do the participants come to see their own possibilities through doing, others also recognise possibility for them and this encourages a stronger sense of their belonging as a valued part of an everyday world. Indeed for all human beings it is the support and commitment of others that makes being part of a wider world possible. For example, despite the possibility of not meeting others' expectations or being judged, Mike finds support at a gym.

Having put off my joining the gym for 3 weeks, I finally turned up. I had already cancelled one appointment. I was really quite frightened - so apprehensive that I almost didn't go in the door. I met a really young guy who was really fit and I thought he would just treat me like an idiot and he didn't. I told him why I was there and told him all about me. He was really interested in how I would go and he still checks up on me. He was so reassuring that I joined...He just treated me like I was ordinary - he developed what I wanted to do.

Mike is afraid of going in to the very public space that is the gymnasium. At the gym there are expectations about how people should look and what people should do. Mike takes a risk and opens himself up to the young trainers at the gym even though he fears being judged and treated like an idiot. Mike is pleasantly surprised when the trainers treat him in the same way as they treat the other members by reassuring and assisting him towards his goals. Through their supportive being-with the instructors help Mike to be at home in the gym and he feels more like an ordinary person who belongs.

Another excerpt from Mike reveals a sense of belonging in his work place. Mike's use of the word 'we' when discussing his work shows the development of his sense of being-with others in everyday pursuits. *“We are bringing this whole new culture, and I*

am on the committee which actually oversees it and makes it work - we will make it work. It was very exciting... so that was good - I got a real buzz". Here Mike's being-with-in-the-world is brought into focus. The activity threads he engages in at work are interwoven with and towards the same end as the activities of the other people in his team. This shared understanding and projection into future possibilities creates a common ground for Mike and his colleagues to work from. There is a synergy and belonging in this type of being-with; it extends Mike's world of work and strengthens his commitment to it.

The sense of not fitting in with everyday others

While some accounts point to an increased alignment with others, several participants discussed the experience of not quite fitting in as they re-engaged in everyday spaces. It seems that shaping a lifestyle in the everyday public world can involve considerable struggle and risk. Not surprisingly, participants describe experiencing a lack of confidence and sense of anxiety when having to re-engage with people in everyday ways. In half-doing the participants risked the possibility of being thrown into the everyday world with all of its demands. However, in engaged doing one enters the play of the everyday willingly, but still risks failing to meet expectations and subsequent judgement from others. The fear of being judged is a concern that affects some participants' experience of others, as the following excerpt from Kay shows.

I am very choosy who I speak to. It's easy to speak to a stranger because they don't know me, they can't judge me. Whereas people I've known fairly well, I am still shy talking mental health because of their reaction and their idea of a joke...To a degree, people have heard I am depressed and it's like I have got a cold.

For Kay, being judged by strangers seems to be less of a problem than the judgement and lack of understanding she experiences from others who are close to her. Her experience of others' reactions is one of deliberate distancing, as if her undoing was contagious. The revealing of previous or potential undoing is an issue that Kay and the other participants face as they re-enter the everyday world of others. At times Kay has to be guarded in her being-with-others as she takes care not to reveal too much of her experience. The risk of judgement, stigma and rejection are very real for the participants as they re-engage in regular forms of being-in-the-world, where sameness is so important. Amy captures the sense of risk in the following excerpts as she describes her return to activities and roles in a world of others.

You are out there - people would look at me, and I didn't want people looking at me at all. I lived all that time putting up a good front with people - outside of my therapist. I was never trusting enough, or able to be up front with people and say like 'I am not feeling great today' as I must look good here, I must be seen to be doing this properly, to be coping - 'yeah I am great, how are you'? - you know 'yap, yap, yap', but feeling miserable.

Here the everyday world is uncomfortable for Amy, a place where she needs to put up a front or wear a disguise in order to fit in. Heidegger (1962) describes idle chatter as a feature of interaction in the everyday public world, and Amy understands this as she engages in it despite feeling miserable. Perhaps Amy's description of being "looked at" reflects the experience of becoming an object under someone else's gaze (Merleau-Ponty, 1999). When others direct their attention towards her, Amy feels vulnerable and unable to trust them with how she really feels. Instead she feels different, an object under inspection, to be judged, criticised or ridiculed rather than a human being.

However, due to her thrownness within a particular social world Amy has the same expectations of doing and being-in-the-world as the public others she is fearful of. She says to herself "*I must be seen to be doing this properly*" and as her account continues, Amy shows that she too judges her doing and being-in-the-world against how 'one' should be. "*If I am honest a lot of that was even stigma and discrimination within myself. That I shouldn't be like that, and this is shameful. I mean you don't think it at the time but I think that is what it is*". Being part of the public world means having to meet expectations as to what one does and how one does things. Amy feels a sense of shame as she differs from the 'average' person who goes to work and copes in the everyday world of engagement. It seems that in engaged doing one has to not only contend with the expectations and judgements of others but also one's own self stigma.

A stigma is a mark of difference, of not fitting in. The following account from Mary shows how feeling different in one's own eyes or under the gaze of others, can be a barrier to re-engaging in the everyday public world.

I felt uncomfortable at the Warehouse and McDonald's - I just felt like I was doing things wrong or not acting properly... When I went to work for McDonald's it ... was just sort of in my head that everyone knew. If they looked at me 'oh I must be doing something wrong', 'oh they are looking at me because I am a schizophrenic'. I was meant to be there a while but I could only handle that day. The only reason they gave me that job was because he knew that I had a mental illness - but he wasn't going to give me the job. He was going to let me work there as long as I wanted, giving me work experience.

Mary has a heightened awareness of her differences as she tries to engage with others in

the public world of work. She too feels objectified – “a schizophrenic”, rather than a human being. She wonders if people are looking at her, if she is doing something wrong, or if they know that she has schizophrenia. This hyper-awareness of her doing and being-in-the-world creates immense pressure for Mary as she tries to match the doing of everyday others. Mary is further discouraged from continuing at the workplace because the manager knows that she has schizophrenia and she believes that she will not be offered a job because of this. It appears that whether it arises from oneself or from others, stigma and discrimination changes one’s attunement and does indeed close possibilities of being for the recovering person.

Engaging in the everyday world of others offers the participants a ready-made structure in which to act. Heidegger (1927/1962) suggests that we are always already situated in a social world, where norms provide boundaries for what to do and how things should be done. It seems that by re-engaging in shared concerns the participants have a meaningful ‘for-the-sake-of-which’ to direct their activity towards. The formation of role strands allows an outward expression of a ‘social self’ within the public world and this is reassuring for the participants as they find ways to belong in the everyday world again. Over time the interweaving of activity threads with various others creates a network of binding relationships, which create ties and tether our being-in-the-everyday-world.

The Lived Time and Space as Synchronising with Others

As we have seen, a feature of the re-engaging self is the development of doing that fits with the ordinary routines of others. The synchronising of one’s own activity with the activity of others involves getting into the rhythm of everyday life, and engaging in shared temporal and spatial structures. In her account Amy states that to re-cover she goes through a process of “*getting back into the habit*” of doing things. This resonates with the notion that one’s doing forms an overall “habit” or garment that can unravel and be re-fabricated. Mike also says “*I got into the habit of trying to work and then I would sleep all weekend*”. Here, Mike gets back into patterns of doing shaped by the everyday world of work. The excerpt suggests this is not easy and he needs to build periods of non-doing into the structure of his weekend in order maintain the overall shape of his lifestyle.

The structuring of time in engaged doing

It seems that through persistent activity in the mode of engaged doing one’s patterns of being-in-the-world come to align with the common structures of the everyday world. In

his account Mike's typical day becomes increasingly structured around his work role.

I am usually up about 6.00am, no later than 7.00am. I have breakfast and get ready. If I don't need to be at work early I don't come in early, because the traffic is horrendous. I am spending more and more time at work, I mean that is my average day. My days are usually meetings, doing some work on the computer, talking to people, and now that I have this office here I spend more time here than I get paid for but I think it is better that I am here...well I might as well be here.

The pattern of doing through Mike's day is largely synchronous with the everyday pattern of other people his age. He arises early, has breakfast and prepares for work. He follows the clock time of the public world and like the average person spends most of his day engaged in busy and skilful activity at work. This is the shape of the average day for the average working person, forming quite a different pattern than that of lying in bed all day or mindlessly plodding where one is oblivious to clock time and it has little meaning.

All the participants referred to clock time when describing a typical day of engagement in the everyday world. The shared temporal structures of the public world bring regularity to the organisation and flow of the participants' doing. June's average day contains a mixture of interweaving activities and roles.

A typical day now is getting up around 8.30; go to work for a meeting at 9.30, then maybe another meeting, then maybe a group of mixing with consumers, or interviewing staff for positions. I'd come home and enter my data of what I have done on a time sheet. The rest of the day is my own, cup of coffee somewhere, sleep, some days... A typical day is probably 2 hours of work and then the day is my own. I may go and visit someone. I am fortunate enough to have a car, maybe I will plan something in the garden, ring my mum every day, the day goes. I'm never at a loose end, some days I go and have a wee rest - it is pretty structured. I do like structure in my life, I don't like not knowing what I am doing when. [Without structure] I get very anxious and I feel like I can't cope. If things are structured and I do what I have to do when I have to do it, everything is fine.

Time passes in June's world as she weaves the threads of activity that make up the role strands of work, home and family. She moves from acting as a consumer advocate, to being a home maintainer, then a tutor, mother, daughter and gardener. June's day is not entirely filled with a work role but there still seems to be a pattern to her daily doing. She finds a sort of rhythm in the weaving of activities, with the mornings being structured and following clock time and the afternoons more flexible with space for June to structure activity as she wishes. For June, there are no "loose ends" though - she keeps her anxiety at bay and manages the demands of the practical everyday world by

ensuring there is enough structure. Having a regular pattern to guide her activity threads provides stability for her being-in-the-world. It is within the relative continuity of routine structure that the everyday meaning of one's doing and being can be recovered.

The possibility of shared space in engaged doing

Becoming engaged in the world of everyday doing not only brings the participants into line with temporal structure of the public world, it also structures lived space. Renewed concern for ordinary being-in-the-world brings things in the everyday world closer and as we have seen, sharing those concerns with others creates common spaces, both physically and in embodied attunement. This is illustrated in Sara's account where she describes the experience of a young man who she supported to re-engage in a work environment.

This work place was kind of like an engineering type place and they were all men, and nobody said 'would you like to do so and so'? ...he would be just told to do it and he got back in the pattern of it. It helped him develop a routine. He had been a night person, like he would be partying or doing whatever he was doing through the night and then in the day he would be sleeping some of it and just wandering the rest but he got into this real 'with the men' pattern - morning tea, lunch and he worked hard all day and he was capable of doing it. He liked being with other men. He could talk men's talk which you can't do unless you are with men. He had the physical capacity to do this all day. A lot of the modelling that those men were doing would not be intentional, he would be more copying, he would be seeing what they were doing - welding or whatever it was.

Sara's account shows the significance of being able to engage in an everyday workplace with its structured time and space. Despite being given no choice in the matter, the man in Sara's story seems to thrive in the masculine and structured environment, where skills and work ethic can be observed and a sense of connection to others is created as they engage in common projects. The opportunity for observation and working alongside the other men in a natural way is central to creating this shared space. Heidegger (1987/2001) asserts that in copying others, one orientates one's being-in-the-world *toward* and *takes part in* the others' being-in-the-world. It seems that by becoming absorbed in the everyday comportment of others, it is possible to enter a shared space where common structures of concern and meaning form a basis for re-fabricating everyday being-in-the-world.

As the participants' stories of engaged-doing show, aligning one's activity within the structures of everyday time and space can help to synchronise one's being-in-the-world with the being-in-the-world of others. The common structure provided by the public

world appears to have benefits for the recovery of one's sense of self and a further opening of possibilities. The dynamics of this re-engagement in everyday doing will be now be explored further as we turn to the play of this mode.

Understanding the Play of Engaged Doing

The previous discussion shows how the mode of engaged doing involves participation in the things and ways of the everyday world. This is more than simply remembering one's being-in-the-world as an embodied agent. Being involved in the everyday world requires being-with-others in everyday ways. This can be a daunting prospect for people who have been socially unavailable through undoing. Heidegger (1927/1962) discusses the mode of everydayness suggesting that in this mode our being-in-the-world is given over to others. What we do and how we do it is mostly determined by others – not definite others, but nameless others or 'the public', also referred to as 'the They' or 'the One'. In this mode we measure our being-in-the-world against the being-in-the-world of our contemporaries. We try "to keep up with them, catch them up or outdo them. We always have an eye on what others are doing and how they are doing it" (Inwood, 2004, p. 212). Because ordinary, everyday existence is interpreted in relation to and governed by what the majority in one's world does it is associated with a uniform 'levelling out' of being-in-the-world. Most human beings are familiar with average, everyday modes because being part of the everyday with others is in effect the default option for human being-in-the-world. However, as we have seen, through coming un-done people find themselves thrown into situations of being estranged from the comfort of ordinary existence. The particular aspect that is of most interest to us here is the dynamics at play for those *re-engaging* in everyday spaces after periods of being undone.

Leaping into the Ordinary by Opting in

The play space of everyday engagement is one that is largely shaped by and shared with others in ordinary everyday situations. In this space, the touchstone that the participants refer to in their accounts is '*normality*'. Three participant quotes show something of how this factor influences the play of the mode. Mary says: "*If you talk to a lot of patients they say 'I just feel really uncomfortable around normal people' "*". Here Mary highlights the discomfort of being-in-the-world as being different. It seems that normality can be threatening if one does not measure up to it. In his account Mike says; "*In 2001 I hadn't felt normal for a long time, because I was either depressed, things weren't working or things weren't right. Sometimes when working on things I forget about it, but it is not a total [forgetting] "*". Mike feels the burden of not being normal but

sometimes when he is engaged in work, he can feel normal for a while and forget about being different. Here normality is something desirable to be aimed for. Finally, Beth says; *“That was gradual stuff I suppose...I think it probably took a year after that to start to be normal”*. Beth achieves some kind of normality and by measuring up and fitting in, she feels normal. It seems then that normality is something that can be threatening, but is also a desirable and achievable end in the engaged mode of being-in-the-world.

Like all leaps of faith, there are risks involved when throwing one's self into the struggle for normality. As we have seen the threat of failure and judgement are at play in the engaged mode. Another risk is the possibility of losing a sense of one's own Being in the averageness of everyday being-in-the-world. For Heidegger (1962) leaping into the ordinary is falling into and becoming dissolved in the “They”. In falling into line with the “They” one also hands over choice and responsibility for what one does and believes. As Inwood (2004) points out: “It is not I who decide what a hammer is for or to wear clothes in public. Nor does anyone in particular decide this. It is just what one, the One, thinks and does” (p. 213). The desire to be normal is the desire to fit in with the average and ordinary person, to not be marked as different, to do what ‘They’ do. Normality structures everyday time and space and creates the bounds of possibility for one's being-in-the-world. That is, when the focus of one's concern is being ‘normal’ then distance and direction is determined by how far from the average person one's being-in-the-world is.

Even though we might fall into line with this constant background of averageness, we always retain some choice in relation to our fundamental being-in-the-world. My being is ‘always mine’, “it always retains the choice of opting out of the One; it can choose to choose” (Inwood, 2004, p. 213). Ultimately we can choose whether we opt in or out of everyday average ways of being-in-the-world. The decision as to whether one opts in or out appears to be significant in the play of re-engagement in the everyday world. This is shown in Jim's account which focuses on his return to everyday life in the community after being estranged from mainstream society through drug use, psychosis and incarceration for much of his adult life.

The hard work is making a choice, making a decision...You are going to have to want it and not think – ‘Oh well I will give it a go, if I fail I fail’ - that is the wrong attitude man. If you want to get into the mainstream and work in mainstream, you have to make some decisions man. I think the turning point was definitely taking responsibility. There are a lot of people who want to reach out to you but you know you just don't see it or you just flick it off you

know. You have to want to make a change, you have to want to learn, to pick up skills, to survive out here. You have got to change the whole way you think, you have got to change the whole way you see things if you want to make a better quality life.

Jim suggests that after being withdrawn from the everyday world for so long it is not possible to plod mindlessly back into it. If one is to engage fully and keep up with the mainstream of others, one has to actively opt in and make a commitment to being-in-the-everyday-world. Opting in involves making decisions and choosing to go along with the ways of the shared public world rather than remaining on the fringes. Jim decides that he wants to make changes and actively turns towards the attitudes, skills and knowledge he needs to survive in the mainstream. It seems that as in the play of non-doing and half-doing, taking responsibility is a key aspect of the engaged mode. However, here the call that needs to be answered is the call to fit in and follow the ways of the everyday world.

Reconnecting with the Everyday Ways of the World

In an earlier excerpt Amy described her experience of fitting in with the norms for interaction at work as a prostitution of herself to the everyday ways of being-in-the-world. The questions that arise here are why is the desire to be 'normal' so strong? And why open oneself up to the possible judgement, failure and loss of one's own way of being in the play of engaged doing? The participants' stories point to several benefits of opting in and reconnecting with the shared uniformity of the everyday, and particularly the world of work. For example, after re-engaging in work again Mike says; *"I started to feel like I had a purpose and I brought some new clothes. I wouldn't work long, but I would be given things to do and I would achieve them - that was one really big step"* and Jim says *"You know working makes time fly which is cool ...I have got a lot of respect from the rest of the team and I have got a good crew... it gets me out of the system, getting back the basic skills."* Sue states: *"Accepting the job, was actually a huge turning point in the way I felt about myself, self esteem, the feeling of worth, feeling that I was actually contributing to the world. That was huge absolutely huge"*. Thus, there appear to be some benefits of reconnecting with and re-engaging in the public world. One is provided with stability and structure as well as a sense of purpose, identity, achievement and worth when meeting expectations and fitting into the everyday world of others. The chance to belong and return to the common ground of the 'They' makes the pull to opt-in a very powerful force.

Being open to the call of the everyday

While there seem to be important reasons to reconnect with the ordinary world, in order to be responsible and answer the call of the everyday, one first must be open to hearing it. In her account Sue is initially closed to the idea of entering the workforce, but with the encouragement of a nurse she gradually does open up to mainstream employment.

I said 'no, no, I am not interested' - I didn't think I was in anyway ready to go back to work. I said I didn't want a job and she said 'no darling this job wants you. We have your C.V. here, why don't we send it off and see what happens'? They sent the C.V. off and...they asked me for an interview. I thought 'oh that is a whole other side of life...I will go along out of curiosity'. I went along for the interview...The next day they offered me the job. I was absolutely gob-smacked because I couldn't imagine why they would want me. It is funny how things come along - even that I put down to [the nurse's] instincts, as well as opportunities that come up.

This account shows how when opportunities arise one must be prepared to make the leap, to put oneself out into the world and in the way of possibilities which have the potential to pick up one's being-in-the-world and carry it forward. Of course, opportunities such as the one that arises in Sue's story can just as easily crush one's sense of being-in-the-world as it passes by, but the risk must be taken if a way forward is to be found. Sara indicates that by opening one's self up to ordinary situations one can be drawn into everyday being-with.

If people have children [and they go] to watch their children or even grandchildren play netball and get nattering to the person standing beside them, it's the beginnings of that movement... It is sort of like natural...Often it is the other people who are already there who just pull that person in by a smile or they will chuck a ball at them.

Here Sara gives an example of an everyday situation that becomes an opening into the public world of being-with others. It seems that if the participants can open their being to the world of everyday interactions, then the everyday world can reciprocate by opening up and drawing them into the play. As Sara suggests, the opening up of this interplay between a social being and a social world is the beginning of movement, the first weaving of threads of activity that if repeated over time form bindings that connect one's own being to the everyday being of others.

Recollecting one's social senses

The accounts of half-doing in the previous chapter showed how getting in touch with the proximal world-at-hand brings into play the tactile and kinaesthetic senses. However, it is the senses of *sight* and *hearing* that are significant to the opening up of

the everyday world in engaged-doing. These are senses of distance rather than proximity and Heidegger (1987/2001) stated that “no one wills except when he sees” (p. 274). In other words, one must have an understanding of or be able to see what possibilities are present to be claimed or motivated by them. Additionally, one must be able to hear the call of the wider world across some distance: “Only the ability to hear into the distance brings about the awakening of the answer of those men who should be near to him” (Heidegger, cited in Inwood, 2004, p. 138). Thus engaged doing is not so much about feeling one’s way into the-world-immediately-at-hand; it is more akin to having a clarity of purpose and direction through hearing the call of everyday life and seeing how one fits into a larger shared world.

In his account Mike describes how after being disengaged from the public world for so long he experiences a real uncertainty and struggles to see how he fits in.

You have to learn what is ordinary. I felt upset about something and I said ‘that is ordinary, people who haven’t been depressed get like that’ and I said ‘how do I know?’ I really don’t know what normal people do...what is normal - you know, ordinary, average, everyday person? Do they go through all these kind of things? Do they have all these hesitancies? Do they procrastinate? Do they fail to get the work done on time? Do they? I only know what I am, so maybe I need to find out what is normal. It is not that I want to pass being normal.

Mike longs for the sameness of the public, everyday world. He wants the average, ordinary, involvement of ‘normal’ people, but cannot see what this means in relation to his own experiences. Mike’s everyday actions seem clouded by uncertainties related to his depression. It is clear that Mike will not find answers to his questions of “what is normal” and “what do ordinary people do?” while in the removed world of half-doing. These questions require Mike to regain an everyday view of things through practical dialogue with others in the wider world.

Amy does hear the call to fit in and be part of the wider world but finds her embodied being is not able to meet the expectations of the everyday world.

I am one of these responsible people that want to work and to be responsible and support myself and to be independent. A little bit of that is my sense of ‘I must do this’, ‘you must get to work you mustn’t be on the benefit’... I did struggle with that, it was in my head, ‘you should’, but there was no way I could do it. I proved it when I did crash at the job, it was just too much.

Here Amy’s sense of independence and responsibility for making her way in the everyday world emerges as a significant force at play. In the senseless mode of non-

doing, this dynamic was not present as Amy could not hear this call in the same way. However, despite experiencing the call to be productive Amy is unable to fully recall the embodied being-with that was forgotten in undoing and non-doing and finds she cannot cope with the everyday expectations of the workplace. Bourdieu (as cited in Csordas, 2002) suggests that human beings have deeply embodied understandings of what being-with others requires, beyond simply hearing the call to engage or seeing possibilities. Amy's sense of responsibility and independence is only part of what Bourdieu describes as a "socially informed body":

...with its tastes and distastes, its compulsions and repulsions, with, in a word, all its senses, that is to say, not only the traditional five senses – which never escape the structuring action of social determinisms-but also the sense of necessity and the sense of duty, the sense of direction and the sense of reality, the sense of balance and the sense of beauty, common sense and the sense of the sacred, tactical sense and the sense of responsibility, business sense and the sense of propriety, the sense of humour and the sense of absurdity, moral sense and the sense of practicality, and so on. (as cited in Csordas, 2002, p. 63)

Perhaps then, recollecting an understanding of what is normal is to re-member one's sense of social embodiment through being-with-others in everyday ways. However, gaining a sense of the ordinary by leaping into everyday being may be easier said than done, as the participant stories show.

The play of fear and uncertainty in engaged-doing

A lack of confidence and the presence of fear are significant barriers to the participants' reconnection with the everyday world. In his account Sam says; *"If you lack confidence, it just plays on you..."* suggesting that lacking faith in one's ability is a force that creates uncertainty as to the direction of one's being-in-the-world. John shows something of this when he states *"I haven't got enough confidence to go out there and get a job. I tend to make comparisons I suppose with other people. I feel lost and empty sometimes - you don't know where you are or where you are going"*. John is afraid to step out of the safe space of supported work into a more public workplace. When he compares himself to other 'average' people he feels lost, not sure whether he fits in or where his future possibilities lie.

Another factor that "plays on" and undermines one's reconnection with everyday others is anxiety. Several of the participants describe anxiety as being a major barrier to engaging in the everyday world. In Heideggerian terms, the anxiety at play in the mode of everyday engagement seems less likely to be the existential anxiety or angst present

in severe non-doing, and more likely to be a fear of something in particular. The participants' accounts point to a fear of the everyday, including not knowing what to do, not meeting expectations, and ultimately being judged and not fitting in, as being significant in the play of engaged doing.

Bollnow (1961) characterises fear as a constriction or closing in of lived space:

Fear means literally constriction of heart, and the outer world draws in oppressive and heavy on the man in fear. When fear departs, the world spreads out and opens a larger space for action, in which a man can move freely and easily. (p. 38)

This notion of fear as a constriction is reflected in the participants' accounts. For example, Sue describes her experience, saying "*[I've] never really thought about what you are anxious about - it is not like a logical thing, but it doesn't stop the anxiety from like almost choking*" Sue's fear takes hold of and 'chokes' her being-in-the-world. This description highlights the embodied nature of fear which is not necessarily logical but is very powerful all the same. In her account Beth states "*For quite a long time I was actually too anxious to do stuff. I used to find driving the car really hard and so I would only go where I needed to go*" Here Beth's fear limits her being-in-the-world by restricting her freedom to engage in everyday public spaces which results in a drawing-in of the boundaries of her lived world.

A significant factor affecting the presence of fear in the play of everyday engagement is the level of certainty within any given situation. The fear experienced is often a fear of the unknown or of the unexpected. For example, in her account Sue highlights the threat of the uncertain.

If I went home and the door bell rung and I wasn't expecting anyone...that would produce an incredible amount of anxiety.... In a social situation amongst your peers you don't know what might come up or what people might say. ...I am more comfortable with my immediate family and close friends.

Even though she is engaged in the everyday world in many ways, Sue still finds the uncertainty of some situations unsettling. When with family and friends Sue knows what to expect and what they will expect from her, as she has established habitual patterns of being-with. It seems that one's sense of certainty in relation to the expectations within a situation or role affects the opening or closing of the play-space in engaged doing.

June and Kay both point to the need to deal with uncertainty in order to reconnect more fully with the everyday world. In her account June says; "*I like everything to go as*

planned and I know that that is not going to happen all of the time. I have got to train myself to expect the unexpected occasionally". Kay attempts to create more certainty by planning her actions in detail, but knows this is futile: *"I try not to worry about tomorrow, planning what I say, what I am going to do, seeing other people. I mean tomorrow's got nothing to do with it, it hasn't even arrived yet"*. Both of these excerpts indicate the importance of developing a certain level of comfort with uncertainty as the interplay between the known and the unknown is important in opening up one's being-in-the-everyday-world. Planning one's future in minute detail is problematic as it closes down the play of different possibilities and restricts one from being present within the everyday space.

Developing confidence and certainty by playing along

The participants' stories indicate that it takes great courage to take the leap into engaged-doing and commit oneself to shared concerns and relationships after being so disconnected. As we have seen, overcoming fear and uncertainty is an important part of the play and this requires taking a risk by opening oneself to the activities of the everyday world. In her account Amy recalls: *"All in all I suppose it was about 5 years, from the bottom to when I was able to go back to work. It was just this slow progression, one step at a time...It was very much 'I will stay here a bit longer because I have to do this'. I forced myself until it started getting a little bit more comfortable"*. Here Amy indicates that it is only through repeated experience over time in the to and fro of everyday spaces that activity threads interweave and thicken to become role strands that sit comfortably in the fabric of one's life.

Because this process takes time, several of the participants highlight the need to *pretend* that they know what to do and how to do it until they are more comfortable. For example, Beth states: *"I pretended to know what was going on. I was involved for about 6 months - I got a hang of what they were doing...so I was feeling more confident in that way"*. Beth is not confident in her work but she 'plays along' with what others do until she understands the role. Sara also points to the need to play along in a role until it fits more comfortably. *"I pretend that I feel confident... I guess you practice, you pretend, you pretend, and pretend until you become - you can give an appearance of confidence"*. Here Sara finds that if she plays along in the role, and has repeated experience through practice her sense of confidence and comfort can be gradually recalled. This indicates that as one plays along in a role, eventually one *becomes* something or someone in the eyes of others, even if it is only an act.

Interestingly, in her account Sue says: “*I will speak at conferences and yet I would still describe myself as a very private almost reclusive person. It is a contradiction.... It is like you are stepping into a role...if you give me a role I will do it*”. Although she feels uncomfortable in many social situations Sue is able to step into and play specific roles when she needs to. When speaking at conferences Sue knows what is expected and there is a level of certainty in the role, making it easier to step into it and fulfil its requirements. It seems that fitting into the everyday world may initially require acting or playing a role even though it feels uncomfortable. In this way, the participants see what is required and can develop an embodied sense of the role. Sue’s statement shows that with repeated performance and clarity of expectations one can indeed develop the confidence to step into and act out everyday social roles.

Beth shows something of this experience as she steps into a new work role and finds herself being comfortable with the uncertain.

I am just thinking about work at the moment and this is surprising me because something has changed quite a bit. I am in a situation, which in the past would have made me very anxious. I have to absorb a whole lot of new information all at once, meet a whole lot of new people, do IT [Information Technology] stuff that I am unfamiliar with. In the past, I would have been really nervous and really afraid to make mistakes. Well I have made quite a few mistakes...and it’s not bothering me and people are being nice and saying ‘you know it is confusing for everybody’. I used to beat myself up about that sort of stuff and feel really stupid and I am just not.

Beth describes a switch in her attunement to the world and towards herself. The fear of doing something wrong or looking stupid does not take hold of her in the same way as it once did and she is able to live with the mistakes and the uncertainty of not knowing what to do. This way of being-in-the-world leaves room for getting things wrong and frees Beth up to enter the play of engaging in the everyday world without her fear shutting the play space down. Her work colleagues also help by allowing room for Beth to explore and make mistakes as they ‘normalise’ her uncertainty. As Beth’s account indicates, others have a huge impact on the participants’ experience of reconnecting with the everyday world and it is to this dynamic that we turn to now.

The Influence of others on the play space

As the preceding account suggests, the response of others in the everyday world holds significant sway over the play-space of engaged-doing. This phenomenon is reflected in a passage from Bollnow (1961) who discusses the impact of human interaction on lived space.

Where the spirit of envy and rivalry take hold of man everyone stands in the other's way and there is painful narrowness and friction. But when men come together in the true spirit of colleagues, friction disappears. One does not deprive the other of space; he rather increases the space of the other by working with him. (p. 38)

This passage suggests that in working with the re-engaging person others can provide room to move and reduce the uncertainty and fear that cause friction and close the space. The allowance of space for everyday engagement is shown in Beth's story, where she describes her work helping to run a mental health day centre.

I was really lucky...to be able to work in such a safe place. It was okay to try to think about it, it was okay to be there at times, it was okay to sort of stress out about things. I could openly say I have been for treatment; I am an alcoholic and all those sorts of things. It was quite freeing really and felt safe.

Beth shows how having a job where there is understanding and acceptance of her past and present being-in-the-world opens up space for engaging in everyday ways. This is a safe space, which frees Beth to try the role and share her stress and vulnerability without risking judgement and failure. Beth feels lucky to have the extra room to work in, as the leeway provided by her colleagues is less likely to be found in most places of work.

Jim also understands the significance of others in determining whether his everyday world opens up or closes. In his account he says:

One of the things you've got to do to survive out here, is to keep those near to you close...A lot of us lose our families, so the only family you do have are the ones you are surrounded by - so we see them as family. The family I do have are the boys I have known - 10 years plus together...They are the only family who accepted me for who I am...not once did I see that fear or misapprehension or judgment in their eyes.

Here Jim shows something of the sense of being 'at-home' with certain people. While Jim's ties to his biological family have been strained and sometimes broken, "the boys" that he is bound to through shared experience have become his family. Jim feels at home with these men and they are 'tight', held close through shared understandings, commitment and acceptance. If being-with others creates the ground of being-in-the-everyday-world then those that are closest and most tightly bound form the most stable ground of all. Other participant accounts show how certain health professionals may form part of the stable ground for everyday being-in-the-world and these will be discussed further in Chapter 10.

From the earlier accounts of engaged-doing in which the participants felt 'objectified' and marked as being different, it seems clear that judgement and stigma from others

does indeed close down one's possibilities of being-in-the-everyday-world. In her story Sara also shows how the reaction of others may be equally disabling as enabling. She recounts a situation at work after the death of her mother, which lead to grief induced psychosis.

I went back [to work] after a few weeks and I just knew as soon as I walked into the office that I was too quaky to get through the day and so I went home again. To cut a long story short, what happened, was - the manager of the team asked me to write my resignation and send it to her because they felt that I would never manage the stress of ICT although I had been doing it for 6 months and I had had one performance review which was good. My doctor was furious. He was so angry because he said it was nothing to do with stress and it is nothing to do with bi-polar disorder, psychosis or anything; it is to do with a life event and it happens - not very regularly, but it happens.

Sara's employers interpret her natural grief reaction as an inability to cope with the stresses of work in general. This is the opposite of what Beth experienced, in that Beth's trouble in performing certain tasks was normalised as being ordinary and expected, while Sara's experience is pathologised as an inability to cope and an unusual sensitivity to stress. The turning of natural and ordinary difficulties and emotions into pathologies is perhaps the result of people being observed and defined primarily in relation to their undoing. It appears that this is part of the dynamic of engaging with others again, the possibility of being seen firstly as someone with a disorder rather than as a whole human being-in-the-world.

The judgements, labels and stigma that people with mental illness are often marked with certainly reduces the room they have to move when re-engaging in the shared spaces of the ordinary world. It is clear then that the responsibility for maintaining the leeway of engaged doing falls upon others in the everyday world just as much as it rests upon the person who is re-entering the play. Not only can others avoid shutting down the play of regular involvement, but others can actively increase the room for play through understanding and working with the person as he or she finds their way in the public world.

Another consideration in the play of everyday engagement is not only how supportive other individuals or groups are but also how supportive the structures and systems of society as a whole are. Kate discusses the need for systems that support re-engagement. *"Fortunately we live in a society where you can get the benefit, and I think that is really important. I believe that people need different levels of support."* Here, Kate points to the need for state welfare and other systems of support, which provide some distance

from ordinary work and financial pressures and allow people to re-engage in the everyday world at different levels and speeds. However, Jim's account also suggests that sometimes support systems can close down the play by structuring things in such a way that it can be hard to step outside of it.

Right now I am comfortable and it's too comfortable. I want to come off the invalids benefit. Prior to being put in the system I have always worked on my own, I always got by - being on the benefit doesn't make sense. I am comfortable where I am. I have got good friends and I have got a nice place but it is time to spread out a bit more. I am not going any further - I am slacking off. I want to step out of my comfort zone.

Jim wants to expand and spread out his being-in-the-world to find work beyond the limited world of the welfare system and supported employment. It seems that while a support system allows some leeway for gradual re-engagement in everyday life it also has the potential for shutting down other possibilities. If the person cannot see beyond the safe space it provides, there is no longer a free play towards everyday being-in-the-world of others. Jim has reached a point where he wants to move beyond what he has known for so long and step outside of his comfort zone. It seems that a helpful support system is not overly rigid but recognises this dynamic and actively supports the shifting back and forth between the safety of the supported space and the need to look beyond it to step into unknown possibilities.

In opening up one's being-in-the-world to being-with-others in everyday ways, one also opens up opportunities for support as well as threats to one's being. However, supports can be a comfort zone that holds a person so tightly that change cannot occur. At the same time threats can act as catalysts for change. The play is not just a matter of having a lot of support and eradicating all threats; meaning and possibility is created in the back and forth. It seems that people re-engaging in the everyday world need room to move, to learn, to make mistakes, to get stressed, to take risks and try things as a normal and expected part of the process. However, the play-space should equally not be too loose so that it lacks structure and clear enough expectations to guide the person in developing and fulfilling particular roles within the everyday world.

Weaving a Life in the Everyday World

All of the participant stories indicate that the process of fabricating and shaping a routine lifestyle through everyday engaged-doing is an ongoing one. One's being-in-the-world is never static or complete but is constantly being created, added to, modified and repaired. It would seem that the recovery of a coherent and meaningful form of

living is not a clear-cut destination but perhaps more of a continuous journey. Mike describes his ongoing struggle to create and maintain the shape of his lifestyle.

I think I still struggle a bit. [There's] not a lot of motivation going to the gym but gardening can be fantastic. I find working takes up pretty much most of my time. I'm just slow at organising things. I put things off till tomorrow and then it's "Oh God I have got to get it done".... It doesn't concern me all the time, I can go out to the movies, go out to dinner with people. I can feel like I am quite ordinary - but I am 58, I don't have the money I should have, I don't have the income I should have, I don't own my home, I have a strange job, really... I am trying to put things back together again. I need to plan things a bit better and know where I fit... I see Toastmasters now as taking time away from me and I need to gather things in a bit more.

While Mike has re-engaged in the everyday world of others and has developed a structured lifestyle, he struggles to grasp how the various strands fit together. He needs to gather threads of activity in and continue re-shaping the patterns of his life so that his being fits in with the everyday world. Mike has moments of feeling comfortable within his doing, but when he compares his overall lifestyle to what a man of his age 'should' have his garment falls short. Marcel (cited in Randall, 1992) suggests that the levelled out being-in-the-world of the 'They' involves possessing and being possessed by everyday things. This is reflected in Mike's account where he indicates that having a normal job, financial security and a house is part of the play of fitting in with the average world of the "They". The unrelenting pressure to belong through having particular roles, relationships, qualifications, skills and material objects seems to be part of the play of engaged-doing.

Creating new patterns means letting go of others

A question faced by those re-engaging in the everyday world is whether or not to return to the patterns of everyday doing and being-in-the-world that they had created before their undoing. Sue recalls returning to do some dance instruction but then deciding that a return to her life in dance is not possible.

It was sort of like a little bit of re-engagement with something which had been such a huge part of my life and it was enough to... convince me that there was no way in hell that I would ever go back to running my own school. ...I don't think it is healthy to go back because either it will be the same and you will get the same result or it will be different and will it be what you actually wanted?

Running her own dance school formed a major strand of Sue's life and was central to her previous being-in-the-world. However, she knows that re-creating this major binding to the everyday world will either place enormous strain on her or she would

have to shape it in a completely different form to avoid undoing again. Neither of these options appeals to Sue so she decides to let go of this major role altogether. In his account Jim also severs strands of his previous being-in-the-world.

I am learning how to cope and what went wrong and how to make sure it won't go wrong again... a lot of it goes against the tide as to what is going on. You can't give up dope and hang around with a dopey crowd cause this is going to wear off on you. So you have to make some changes... find out your poison, get rid of your crowd you hung out with and be prepared to lose some friends.

Jim is adamant that he cannot fall back into the habits of regular drug use that he was so caught up in before. His ties to the world of drugs with its associated relationships and activity threads cannot be maintained if he is to re-design his patterns of being-in-the-world.

While some participants faced the permanent loss of significant strands from their previous lifestyle, after her first period of undoing Sara let go of possible strands of her future being-in-the-world. In this excerpt she states that she made two important decisions.

One psychiatrist told me that there is about 6% chance of passing it [Bipolar Disorder] on to your own child. So I decided that perhaps [not having children] would be a contribution I could make... The other decision was...I was never to buy my own home. If I got sick...I wouldn't have any way of earning an income to pay for it. It has been fascinating over my life time people saying; 'you're renting, why'? - it is not the dream of the Kiwi people - the 'Kiwi dream'.

Sara's decision to give up the average person's dream of having children and a house has shaped the patterns of her doing and being-in-the-world. She has not created the bindings of being a mother and a homeowner, because of her commitment to others who might bear the consequences if these role strands unravel. Reconsidering one's life projects, social groups, routines and habits seem to be an important aspect of the play of re-engaging in the everyday world. All change involves loss, and creating a new lifestyle must involve the loss of old ways and commitments so that new patterns can emerge.

Maintaining structure and balance in everyday patterns of being

While the participants achieve some kind of consistent structure in their everyday doing, acting routinely in the world can be an ongoing struggle. An excerpt from June shows how hard it can be to keep the momentum of everyday life up. *"Most mornings it is*

very difficult to get out of bed. Some mornings I stay there, but on the whole I will force myself to get up - 'come on June you have got to get out of bed'". June has to fight the temptation of non-doing and forces herself to act in order to keep the structure of her lifestyle in place. The need to keep one's being-in-the-world moving does not escape June, as she has experienced the unsettled pain of suspended non-doing before. Beth also emphasises the importance of maintaining a rhythm to her being-in-the-world through routine engagement.

Now I impose my own structure on my day and it is good. If I have all the practical things structured to make sure they are done I don't have to worry about any of those things... I have complete control. I can cope a lot better with the unexpected or the more challenging sort of stuff. I think too that I need quite a lot of activity because if I don't do enough then I have got too much brain energy left over and that is when I start to cycle back to anxious thoughts and stuff. That is just trying to take care of myself.

Beth takes care of her being-in-the-world by imposing structure on her activity, which creates a sense of control and continuity for her. Having stability through habitual doing gives Beth ground to stand on when unexpected or challenging events occur. It also stops her from slipping back into the meandering of half-doing. Sue stresses the need to get a balance between committing herself to projects in the everyday world and taking care of her own being-in-the-world.

I think having a job to do that I know is meaningful and worthwhile is great but I have learned to balance that against my need to take care of myself. I only work part time and that is my choice. I have found something I can put a lot of energy and commitment into but I still have some time which is my time to do as little as I need to. It's timetabling sensibly and not thinking - 'I will just get that done before bedtime'. I know logically that I have to stop and I have to do that stopping myself - otherwise everything stops for you. When it really boils down it is me being able to say no. I don't find it easy. It's sort of not having any way of getting this whole commitment or over-commitment back where it should be.

It seems that the to and fro of binding with others in the everyday world involves a combination of taking responsibility for fitting in, being open to the world and its opportunities and at the same time the world being open and responsive to one's efforts. Commitments to others create bindings that tether one in the everyday world and shape one's patterns of living. However, over-commitment can pull one's being-in-the-world in too many directions creating too much strain on the fibres and threads of one's doing. Several participants touch on how maintaining the role strand of "patient" through various threads of activity may be important. For example, Tim says; *"I sort of made a*

plan to take my medication at the same time each day so I won't miss it." As taking medication becomes part of Tim's consistent doing it also becomes part of his being-in-the-world along with other activity threads such as seeing the psychiatrist and attending other forms of treatment. While the strand of activities that constitute being a 'patient' are significant in preventing further undoing, for many participants they appear to be decreasingly dominant in their lifestyle as they renew bindings and recover a sense of everyday-being-in-world.

Another important aspect of maintaining one's everyday patterns of being-in-the-world appears being alert to the possibility of further unravelling. Being aware of one's signs of undoing and continued vigilance for these signs is essential to the integrity of one's ordinary lifestyle. June shows how subtle the signs can be. *"I might have signs...trembling of the hands, confused thoughts, little things that you might not even think about. I might think, 'where did I put that?' and it drives me batty working out where it is"*. These warning signs indicate that there is strain on the threads of June's activity as the basic fibres of her action begin breaking down. However, if June responds early and alters the pattern of interaction between her being and the world then major unravelling can be avoided: *"Those early warning signs have to be closely watched. If I feel an early warning sign coming on... I just take time off work for a few days and get my head together. Generally I just relax and cut myself off"*. June has become adept at recognising the early signs of undoing and arranging for respite from her everyday life. June temporarily cuts ties with her everyday shared commitments and creates some leeway for gathering things in and getting her being-in-the-world together. It seems that maintaining an everyday lifestyle involves recognising the risk of unravelling and purposely withdrawing from everyday engagement to halt the progression of undoing. Deliberately moving oneself into a non-doing or half-doing mode can create leeway for forgetting the everyday and getting back in touch with the ground of being-in-the-world as embodied care.

Reawakening the Social Ground of Being

Heidegger (1927/1962) suggests that it is our consistent acts in an everyday world of involvement that shapes the form of our being-in-the-world. "Everydayness contents itself with the habitual, even when this is burdensome. It is uniform, but it finds variety in whatever the day brings" (Inwood, 2004, p. 59). Thus even in habitual repetition, there is some room to move, as each day brings something new. While everyday being-with-others limits one's being-in-the-world by reducing it to average uniformity,

because there is leeway within these limits the everyday also provides a ground of possibilities. The word *recover* comes from the Latin *re + capere*, that is, to re-take (Allen, 2000). Through engagement in circumspect doing and the routine weaving of role strands, the participants re-take a place in the public world and thereby re-cover their social sense of being-in-the-world.

It is through networks of bindings with others that the everyday public world provides the structure for a 'normal' life. However, Heidegger's (1927/1962) writing suggests that by taking on the burden of expectation and committing to the roles, routines and things of everyday life one's being is at the same time 'accommodated' and 'disburdened'. That is, by fitting in with the average way of doing things one is alleviated of trying to find one's own particular way of being-in-the-world. The paradox that exists in the play of engaged doing is that the more we *take responsibility* by fitting in with the averageness of the everyday world the more we *give up responsibility* for our own way of being-in-the-world. Perhaps then the dynamic at play in the engaged mode is not only the struggle to fit in, but also the issue of how to make commitments to the collective ways of the public world without giving up all responsibility for finding one's own unique way of being.

It seems that fitting in with the everyday world involves remembering or re-collecting ways of being in a felt or embodied manner as much as explicitly re-calling a set of rules or norms that one must adhere to. One best "sees" what it is to fit in by going beyond pure reflection or observation to actually experiencing it. Over time our roles play us as much as we play our roles, as the habitual threads of doing associated with the role form a binding to others that pulls one's being-in-the-world in certain directions.

Summary

The engaged self strives to be "normal" or "ordinary" again, involved in the everyday world of doing. While half-doing serves to un-cover one's embodied being-in-the-immediate-world, the engaged mode seems to allow the recovery of one's being within the meaning structures of a shared public world. Finding a place in the everyday world of others is essential in re-fabricating a sense of structure and meaning in life, but it seems that there are other considerations besides meeting everyday fashions, if one wants a well fitted lifestyle. As the following chapter will show, it is on the background of ordinary, habitual existence that one's own unique way of being can be disclosed.

CHAPTER NINE

DISCOVERING AUTHENTIC BEING IN ABSORBED DOING

*To be nobody-but-yourself
in a world which is doing its best, night and day
to make you everybody else
means to fight the hardest battle
which any human being can fight;
and never stop fighting.*

(E.E. Cummings)

Introduction

The recovery of one's sense of self in a world of others inevitably involves re-engagement in the structures of the everyday world. As the participants' stories in the previous chapters show, this is achieved through the awakening of embodiment in half-doing and the routine and responsive activity of everyday engaged doing. However, once wrapped up in the busyness of everyday being-in-the-world, one is susceptible to the tranquilising and levelling effect of the public world. As the above quote from Cummings indicates, the everyday world constantly tempts the self to be "everybody else". Being everybody else means taking on the norms of everyday fashions and doing what everybody else does, which provides meaning structures and a comforting stability. Getting wrapped up in a lifestyle that fits in with others is naturally comforting, but to create a fabric of doing that fits and reflects one's *own* possibilities seems to be a challenge that all humans face. The discussion now turns to the participants' stories of absorbed doing which show the flowing and unfolding of activity threads and something of what it is to wear one's lifestyle garment well.

The Lived Experience of Absorbed Doing

The processes of *un-covering* and *re-covering* aspects of being-in-the-world were discussed in the preceding findings chapters. The following discussion extends the conversation by turning to the experience of *discovering* one's *own* way of being. Just as uncovering and recovering are associated with certain modes of doing, discovering one's unique self appears to involve a certain form of activity as well. This mode of doing seems to be characterised by the experience of being absorbed in the everyday world to such an extent that one's own way of being is revealed.

The Lived Body as Creative Flow

When recounting experiences of being engaged in the world, some participant accounts had features which were distinct from everyday average ways of being. In these situations the participants describe being so completely engaged in activity that they appear to forget their embodied being-in-the-world altogether. For example, Mike gives an account of being fully absorbed in activity while cooking.

I read a cooking magazine and it had a cooking recipe contest. I wanted to develop a recipe to enter the contest in, so I planned it. I got all the ingredients... I was writing it up and I learnt how to cook it. It kept me occupied for a whole day. It just felt wonderful. I just forgot about everything I was worried about, any problems, it just took my mind off everything. I really made an effort in what I did. I mean, I know how to cook so I just didn't slam everything in. I really planned how I would do things. I had marinade, sauces; I cut vegetables in a particular way. I did a really good job in presenting them. I found that really took me out of myself.

Here Mike is caught up in the process of creating a recipe and preparing a meal. The activity takes hold of his embodied being and keeps him occupied for a whole day. Mike seems to project his being confidently into the possibilities-at-hand, he knows how to cook and there is great care in his actions. It seems that the responsive circumspection that was recalled in the engaged mode is fully available in the absorbed mode as Mike's whole being is present for the task. He states that the activity takes him "out of" himself, suggesting a shift in the attunement of his whole embodied being out of its own being and into the world-at-hand. With the care and effort Mike puts into each action he is fully present to what he is creating and his lived body, including his worrying thoughts recede.

A second example from Kay echoes Mike's experience, again while engaged in cooking.

It was a real day, having not to use electricity for it. I made something out of nothing. I cooked macaroni put mixed vegetables with it... sweet corn and defrosted soup on the fire place. [I made] pork chops and tried cooking them with apple on them. If I didn't have an ingredient I made it up with something else or just left it out. Just being creative and it flows. It just seems to take over and do its self. It takes me out of the head space because I am totally engrossed in what I am doing. My mind has been totally focussed and being one... my mind's been totally clear. I'm enjoying good feelings.

Interestingly, in describing this experience Kay says that her activity "flows", Kay describes cooking as a creative process and like Mike, she creates the recipe herself. There seems to be slightly less planning involved in Kay's story and the fact that not

everything is ready-to-hand does not seem to interrupt the flow experience. Despite the lack of electricity and some ingredients, Kay is able to fully engage by inventing the cooking methods and the recipe as she goes along. It would seem that one can still achieve flow without having all routine objects readily available if one is flexible and responds creatively to the demands presented by the world-at-hand. Indeed, if the person is fully present and open to various possibilities of doing within the immediate world at hand, then the creativity required to respond to these possibilities may enrich the experience. If Kay had been closed off to all other possibilities apart from a specific recipe cooked in a certain way then a flow experience would not have been possible, because her immediate world would not have supported it.

In undoing and non-doing the body is extremely present in the lived experience because it may feel heavy, awkward or senseless. In plodding and everyday modes of engaged doing the body may be less conspicuous but will still be present as one struggles to cope with the practicalities of daily life. For example, in lifting an object the body will be present if one feels tired or bangs an elbow or struggles under the weight, or stumbles. However, in flow the body seems to be completely energised and meets the requirements of the activity with relative ease, even though there may be challenges to overcome. It seems that the person in flow is so absorbed in the immediate experience that they lose themselves in it, including their physical body. This is perhaps what Kay refers to when she says that her mind is focussed and she is “being one”. In this mode of doing she is in a fluid oneness with the immediate environment as her doing captures her being-in-the-world and fully occupies it. It seems that explicit awareness of one’s embodied self and one’s environment disappears when the interface between one’s being and the world has a particular character. That is to say, in the mode of absorbed doing the inter-weaving of one’s being-and-the-world has a dynamic order, which allows a fluid back and forth-ness resulting in the complete merging of embodied being and the world-at-hand.

The Lived Time-Space as Unfolding and Disappearing

Earlier Mike’s account of cooking showed how one’s experience of being embodied can fade into the background through total absorption in the everyday world-at-hand. As Mike continues recounting his story another significant aspect of his experience emerges: *“That was exciting because it took me the best part of a whole day to do it. The day just disappeared, completely gone”*. As Mike loses himself in cooking a whole day passes without him noticing. His description suggests that as well as one’s

embodied being, time can also disappear in absorbed doing. The clock time of everyday engagement appears to be transcended as activity unfolds and flows over minutes and hours.

Significantly, other excerpts suggest that the surrounding environment and the entities within it may disappear as well. Firstly, in her account of cooking Kay recalls; *“Being right in the minute, in the now and totally absorbed in it. Not being aware of the environment because I am focussed on what I am doing”*. As she cooks Kay’s concern is solely with the task-at-hand and she is so closely caught up with her immediate world that she loses sight of it. The equipment and materials her creation calls for become an integral part of her being-in-the-world and in doing so recede into the background beyond her awareness. Similarly, in his account Jim describes becoming absorbed in playing music to such an extent that even other people disappear: *“Every time I play my music, I am in my zone...this is peace time - well for me and my guitar, whether I am surrounded by 20,000 people or 5 people they are not there, I’m by myself”*. Jim describes being in his “zone”, a lived space where he is completely caught up with his guitar. Even though there may be others around him, they are not part of Jim’s private world and he simply exists with or perhaps *as* his music. It seems that the lived space of absorbed doing is a calm and secure place to dwell. For Jim it is “peace time” a kind of attunement where the demands of the everyday world, including the immediate-world-at-hand, recede and disappear.

It is important to note that the participants do not escape everyday demands by turning away from and forgetting the world-at-hand, but rather by engaging in it fully and occupying their being-in-the-world in such a way that the everyday disappears and is transcended. A further account from Amy also shows the unfolding and disappearance of space and time as she becomes absorbed, this time in painting.

I have been doing a lot of paintings - I thought I will just give it a bash, and possibly get to a point where I will experiment with doing different things. I did a picture of a guy playing a guitar, which is not really my subject, but I do like doing people. That is what I draw. That was great, I really enjoyed doing it and the outcome was good. It’s, ‘gosh that time has gone fast’. It feels good. You are less in touch with time, it is like being in a little world of your own and it is just like you and what you are making or drawing. It is really good time out for your head. I assume that something is processing, otherwise you are brain dead, but it gets away from the head stuff. I work a lot in my head - so you know that is really good for me.

Amy’s description echoes the preceding accounts and shows that the nature of time and space does indeed change when one is completely absorbed in doing. She indicates that

the space of absorbed doing is “*a little world of your own...you and what you are making or drawing*”. In this space Amy is not in touch with the synchronous time and space of everyday engaged doing, and she is not caught up in the “head stuff” that dominates in non-doing. She leaves the play of both these modes behind and enters her own private space, where she is free to be herself, wholly embodied and engaged-in-the-immediate-world rather than detached from it. This is also a different space than the half-doing mode where the resistance and plodding pace prevent a full and open dialogue between self and the world. In this space Amy is more open to the possibilities available to her and she is willing to be creative, experimenting with her subject matter and techniques. Her mode of engagement speaks of confidence in her ability to take hold of and shape the-world-at-hand and is associated with great satisfaction and pleasure. In turn the world in which Amy acts unfolds and disappears as she draws it close and projects her being-in-the-world beyond it.

The Lived Other as Connectedness

While the form of being-in-the-world experienced in absorbed doing takes the participants away from the everyday-concerns of being-with-others, it seems that connections are still maintained with those that they are bound up with. Connections in the form of commitments are always already present in one’s being-in-the-world. They form part of the situational whole that recedes into the background as one becomes absorbed in a particular task. However, perhaps a key characteristic in the absorbed mode is the strength of the binding that is created and maintained with others. For example, Mike associates his experience of being absorbed in cooking with a particularly strong sense of contribution and connection to others.

The wonderful thing about cooking was that I had these people who were coming home from work and saying ‘oh my god’ you know, because everyone was delighted to come home to a dinner. When I did this one it was really special so I felt very good about myself having done that.

By doing something special for others, Mike connects his private world of absorbed engagement with the other people in his everyday world. Even when the others are not physically present he is being-with them in his cooking, in that they are implicitly present in his care and concern. Mike seems to plan and prepare the food with them in mind. His solicitude appears to create a strong sense of direction and pull as he projects his being-in-the-world into the possibility of providing a special meal.

Kay also highlights how her absorbed doing connects her to others, but it also alters her

own sense of being-in-the-world. *“I cooked for others and it made me feel good about myself. Accepting that I have achieved and completed a task and complimenting myself and have others do it too. I think I am a very accomplished cook”*. Kay strengthens her commitment to others by cooking for them but at the same time she also strengthens the binding she has to her own being-in-the-world. While everyday engaged doing also ties one to others, it does not necessarily create a strong tie to one’s own way of being. However, in the absorbed mode Kay sees the extent of her achievement and feels particularly connected to what she does – that is, she feels “accomplished” in cooking. Heidegger (Heidegger, 1993) discusses the notion of accomplishment and states that:

We view action only as causing an effect. The actuality of the effect is valued according to its utility. But the essence of action is accomplishment. To accomplish means to unfold something into the fullness of its essence, to lead it forth into this fullness – producere. Therefore, only what already is can really be accomplished. But what ‘is’ above all is being (p. 217).

If to accomplish something brings what already is into ‘the fullness of its essence’ and Kay feels *accomplished* in her activity as a cook, then perhaps in absorbed doing Kay unfolds something of her unique essence and finds her own way of being within the structure of the everyday world of others.

Understanding the Play of Absorbed Doing

The preceding discussion shows something of the participants’ experience of complete engagement in the world-at-hand. It seems that the mode of absorbed doing involves losing oneself in activity, so much so that one’s ordinary sense of body, time and space recedes into the background as one’s being-in-the-world flows and unfolds. Heidegger (1987/2001) discusses the phenomenon of being absorbed in the following passage;

‘To be absorbed’ by something... does not mean ‘to be dissolved’ like sugar in water, but rather ‘to be totally preoccupied with something,’ as for instance, when one says: He is entirely engrossed in his subject matter. Then he exists authentically as who he is, that is, in his task... [Being-in-the-world] means being absorbed in that toward which I comport myself, being absorbed in the relationship to what is present, and being absorbed in what concerns me just now. [It is] a letting oneself be engaged with what concerns me. (p. 160)

Here Heidegger stresses that being absorbed in the everyday world does not equate to disintegrating into a larger mass like sugar into water, or falling into line with the ways of the everyday world, but a letting oneself engage freely with whatever concerns one most. Significantly, Heidegger makes a link between absorption in a task and authentic

being-in-the-world. It seems authentic being involves finding one's own unique ways of existence within the average structures of the everyday world. The following discussion turns to further explore this relationship between the play of absorbed doing and the disclosure of authentic ways of being-in-the-world.

Leaping into the Extra-ordinary

As human beings we are not always fully engrossed in the activities and concerns of the everyday world and there are different degrees to which we become absorbed in the immediate world-at-hand. Authentic absorption is an abandoning of one's being, not to the immediate world in general, nor to the average ways of the everyday world, but to whatever calls for one's own particular way of being-in-the-world. Being in the world authentically "is unique and incomparable, not to be reached by gradual steps from beings, but only by a direct leap into it" (Inwood, 2004, p. 227). It seems then, that entering authentic absorption in the world requires a leap of faith in the same way that stepping into the modes of half-doing and engaged-doing do. Perhaps though, this leap involves leaving behind the security and comfort of the average "They" and opening oneself up to unknown possibilities of unique being-in-the-world. This cannot be achieved through any particular knowledge or developmental process determined by other human beings, but rather it requires discovering one's own way of being in the free play of absorbed doing.

Recollecting One's Own Way of Being

The previous chapter showed how entering the mode of engaged doing helped the participants to re-collect their being-with-others-in-the-world. Re-engagement in everyday structures and patterns of doing allows one to bind to and belong in a shared world. This levelled-off common world provides a certain amount of stability and opens up new possibilities after extended periods of non-doing and half-doing. It also provides the ground from which one's unique selfhood can be differentiated and maintained.

The return to one's own-most self

In his account Jim provides examples of finding himself through particular forms of engagement in the world. For instance, he describes being able to be himself while absorbed in the everyday activity of singing and playing his guitar.

When you are enjoying music, playing the guitar - that is one of the moments when you are not actually 'schiz-ed up', as it were. That is the only time I can pull away from my schizophrenia, be myself and maintain it through music. Hence I stick to it because that is my strength. When I am in the zone, I forget

I have schizophrenic issues. You don't have to listen to voices when you are singing.

For Jim being “in the zone” of calm equanimity amounts to being-at-home-in-the-world. It is a comfortable space in which he can maintain a sense of his unique self, free from the dis-integrating force of the uncanny modes and the tranquilising force of routine everyday engagement. The ‘self’, says Heidegger (1987/2001) “is what constantly endures as the same in the whole, historical course of my [being-in-the-world].... The constancy of the self is proper to itself in the sense that the self is always able to come back to itself and always finds itself still the same in its sojourn” (p. 220). When Jim returns to the absorption of playing music he finds a constant “strength” there, it is *his* strength, a part of his past, present and future being-in-the-world. Heidegger (1987/2001) states that our being-in-the-world’s “ecstatic potentiality-to-be is intensified as potentiality-to-be in its enactment and in its being enacted. The more often I repeat and exercise a potentiality-to-be, the easier and richer it becomes” (p. 210). He also suggests that in this potentiality-to-be one’s authentic being-in-the-world shows itself. Thus the self which we come back to in resolute absorption is always part of our potentiality-to-be-in-the-world, and the more we act out this particular potential the more we exert its presence. If the free play characteristic of absorbed doing is repeated, the creative to and fro forms and maintains internal bindings. These bindings are commitments to one’s own way of being-in-the-world rather than the everyday obligations that are the focus of engaged doing.

While Jim can enact his ‘self’ in the activity of playing music, other accounts show that a sense of one’s authentic self can also be found in the combined activities of a whole role.

A self or an I, at whatever level is not a thing or substance that acts, but a type of activity with no inert substratum, an activity that ranges out beyond the here and now into the world and into the past and future. Dasein constantly exists along this edge of the Not [Nicht]. (Inwood, 2004, p. 105)

Because my self is essentially activity, I am never located in any one place in particular. It could be said that I am scattered amongst the objects and people that I routinely interact with as well as in my past and future and not just in my present embodied self. I find and understand my self in the play of being-in-the-world, and any sense of constancy or coherence that I have is created out of consistent ways of being and doing – by what Heidegger (1962) calls ‘self-constancy’ and ‘anticipatory resoluteness’ (p. 322). The constancy of authentic being arises in one’s form or style of activity, due to

the way in which the activity is approached (with forerunning, repeating, resoluteness), even though specific roles and activities may come and go (Dreyfus, 1991). Heidegger points out that this does not involve an explicit knowledge of 'how to be-in-the-world' that can be taught in advance, one has to discover this through entering into and dwelling with the many sorts of play spaces that arise in human life.

Sue no longer feels able to commit herself to the work she previously did as a dance instructor, and feels a huge loss as this was a binding that shaped her being-in-the-world in so many ways. However, Sue has found that if she understands what is essential to her particular way of being-in-the-world, then she can find ways of being her self in new roles and activities.

I suppose you know all my life what has driven me, what has motivated me...is doing something useful, constructive, helpful to others...I don't have [dance instructing] anymore, but I found another way because if you go back to the basis of it, which is teaching. - teaching a skill in an act form to somebody is a communication thing and my role now is about communication...It's about teaching and empowering health professionals to look at things from a consumers point of view and speaking about the experience of consumer's to help improve services that they are offering.... You actually do get to contribute....so I am being able to make a difference so that is fulfilling some of my needs.... They are all in the same thread - it's all communication. The only other thing really in my life that I have been able to replace that with ... would be working on the property. We have got a life-style lot and it was like wilderness and we have planted about 10 hectares of bush.... I can lose myself in it. I get totally absorbed in that, it is totally absorbing. I suppose it is creation stuff, like I was creating a ballet now I am creating a patch of bush for prosperity you know.

Sue has found a thread that runs through and is central to her way of being-in-the-world. Contributing to the lives of others through communication is something that lies at the core of Sue's authentic being-in-the-world. Sue sees another thread that is woven through her being-in-the-world. The creativity of her dance work is now expressed in developing a beautiful natural space. It seems that in absorbed doing, the important threads of our unique being are able to be continued even though the activities we engage in may change and develop over time.

Authentic being-in-the-world, Heidegger (1927/1962) suggested, depends more on its relation to its own-ways-of-being than what it is in its relation to everyday others. Marcel (1949) echoes this sentiment when he stresses the importance of being rather than the 'having' that dominates and structures the ways of the They. As human beings we get caught up in 'having' when we compare ourselves to others and feel the need to have what They have, including a certain kind of job, qualification, house, car, life

partner, family and so on. The risk of defining ourselves solely by the material objects, roles, relationships and achievements that we have acquired is that they can all be just as easily lost. In reflecting on her life Sue says:

I think there is definitely a temptation to overstate the importance of what we do and how we feel about ourselves, like why should what we do determine whether we are a worthwhile person or not, but the fact is that it does and the fact is that it does in other people's eyes as well. So that is another one of those fine lines, feeling good about ourselves because of what we are capable of doing e.g. for others, um, but also holding onto the fact that even if we are not doing anything we are still worthwhile human beings.

It seems then that the process of engagement in the world is just as important or perhaps more important to authentic being than the content of our doing. That is, *how* we involve our selves in the world is ultimately more significant than *what* we involve ourselves in. To a certain extent a distinction can be drawn between authentic and inauthentic being-in-the-world on the form or style of one's activity.

The need for free play and awareness in authentic absorption

The preceding discussion shows how the absorbed mode of doing opens the possibility of recollecting something of one's own way of being. However, the participants also indicate that there are forms of absorption which only serve to conceal authentic being. In her account Sue discusses the possibility of becoming so engrossed in her dance related activity, that she loses the ground of everyday being-in-the-world.

I do miss the creative part terribly, terribly. I don't have a creative outlet, I don't have the excitement - you know the shows, and because it is really hard work and very stressful, you get it right and the buzz is just indescribable... - but it is a bit like a honey trap you know, you get lured in by the excitement... You know you have taken a class with a few children and you think 'this is what I started as and that is where I ended up'...this huge entity which is a very large dance school. I know my own personality, if I started teaching again in my own right I would not be happy with that - I would want more. I would be very very wary of getting so absorbed in [my new] job.

Sue misses the intense absorption involved in putting on big dance productions, but at the same time she is wary of the overwhelming absorption associated with mania. While the form of total absorption previously experienced by Sue is exciting and very attractive she is cautious about getting so completely caught up in work again because of the unravelling it can lead to. Heidegger (1987/2001) characterises the absorption of mania as a "seizing upon everything-at-hand" rather than letting oneself be drawn into one's own possibilities (p. 174). He suggests that in periods of mania people outrun their own- being-ahead-of-themselves because they cannot stop to truly reflect on their

own way of being-in-the-world. Sue describes this form of absorption as a “honey trap”, indicating the appeal of open play-space where an infinite number of possibilities arise. However, ultimately this type of absorption closes space and traps Sue. That is, when everything is available to be seized upon things become overwhelming, leaving no room for perspective and to discern which threads of activity suit her best.

Being able to pause and be mindful of one’s being is important in understanding the play of any mode. As Heidegger (1987/2001) points out: “the clearing of being...is not given at all in the immediate, ontic things of everyday [experience], but we see it only in [reflective] thinking” (p. 204). Other participant stories suggest that this loss of sight or awareness is not unique to the form of absorption found in mania. There are examples of unreflective absorption in the accounts of undoing, non-doing and half-doing, where being-in-the-world is forgotten rather than recollected. Heidegger (1987/2001) gives an example of becoming absorbed in the avoidance of a past painful event by not dealing with it. He says of a person in this situation; “she is present to herself in an unthematic way, and the more she engages in this avoidance, the less she knows about the avoidance. Rather, she is entirely absorbed in this avoidance in a non-reflective way” (p. 179). Here Heidegger indicates that modes of being, including those associated with the oblivion of non-doing and the avoidance of pain, can become all consuming so that whether we realise it or not, our embodied being-in-the-world becomes completely caught up in them.

Several of the participants describe becoming caught up in half-doing activity in a non-reflective way. These forms of half-doing appear to close off the embodied self from experiencing the world rather than opening up the play of embodiment. Kay provides one example of this as she talks about her relationship with food and alcohol.

Food has been my crutch. Weekends are just eating, shut down period, anything not to feel. It's funny you feel like such an empty black hole and it never gets filled enough. When I was drinking I would down a bottle of wine in five minutes, again using the same thing, not to feel, to fill that black hole. I wasn't aware of it then, but I am now. Alcohol is bad news. It was a weapon to blot out, numb out all feelings. I'd have a packet of biscuits and look for more, eat a package of lollies and look for more. There's just not enough food. To me food is the worst obsession to have because you have got to have food to survive, it keeps us alive.

For Kay, food and drink become a compulsion, an attempt to fill her emptiness, just as others use cigarettes and illicit drugs. By eating and drinking alcohol, Kay enacts her being-in-the-world in a bodily way but as she becomes completely absorbed in the

activity it ‘shuts down’ her embodied being-in-the-world. The extreme and unreflective ingestion of food and alcohol is designed to prevent her body feeling, to numb the senses. Heidegger (1927/1962) points out that urges, such as the urge to eat, “seek to crowd out all other possibilities ... one’s being-in-the-world becomes “blind, and puts all possibilities into the service of the addiction” (p. 240). It appears that in the tarrying of half-doing one can become blind to other possibilities of being-in-the-world through inauthentic absorption, which shuts down the play of the mode and helps one to forget rather than recollect one’s potential for being. Becoming absorbed in the world of psychosis, despair, the oblivion of drugs and endless sleeping were also described in the participant stories. Absorption in these modes can turn one away from authentic being-in-the-world because of the lack of awareness or perspective in relation to one’s own way of being. Awareness comes from the way one is attuned to the play and perspective is created by stepping back and reflecting on one’s engagement. It seems that some room to move must be maintained if one is to enter into the free play of creative flow and become authentically absorbed in a dialogue between one’s own way of being and the everyday world.

Authentic being-in-the-world involves projecting everyday possibilities in a way that reveals rather than covers up what it is to be a self. Leaping into the play of absorbed doing involves entering the free to and fro of deep engagement, interspersed with moments of stepping back and being mindful of what is at play. Perhaps it is in the space created by the reflective pause that interpretation occurs and meaning is glimpsed in relation to one’s being-in-the-everyday-world. This may be the clearing where participants realise how much clock time has flown or the extent to which they are being effective and enjoying themselves or connecting with others through their unfolding engagement.

If one is to maintain the freedom to choose and take hold of one’s own way of being within a world of others, both the engrossment and stepping back of the absorbed play are necessary. It seems then that transcendence in the play of absorbed doing involves a recollection and reconfirmation of the relationship between one’s unique being and the world with which one is thrown. It is through absorbed engagement and mindful awareness that a sense of one’s self as unique and integrated in a wider world can be discovered.

Recollecting One's Element

According to Heidegger (1927/1962), it is only through a leap into absorption within the world-at-hand that the fullness of one's being-towards-possibility is manifested. The absorbed play-space provides a form of transcendence that Heidegger (1927/1962) indicates is grounded in the structures of everyday being-in-the-world, as much as it is in one's projection towards particular possibilities of being. For Heidegger transcendence is not so much surmounting or going above and beyond the everyday experience of the world, but rather being wholly occupied and absorbed within it. It is one's material, historical and socio-cultural context along with one's embodied capacities that form the ground for authentic being. To live meaningfully and with purpose, one must necessarily dwell in the structures and ways of ordinary life and dwell with the to and fro that this brings. The public worlds of work, social situations and shared sporting or creative pursuits often provide opportunities for absorption and the transcendence of everyday being-in-the-world. For example, Sue describes going on a course and finding a role that fits with her own way of being-in-the-world.

The other thing that I have done... which is quite amazing [is training as a celebrant] ...I signed up for it and thought 'what am I doing here'? and I was actually in my element. I graduated from my course and I have done a few ceremonies. To me a good celebrant is someone who can make a difference and mark a milestone in someone's life and that can be done incredibly well and incredibly powerfully.

Despite not being sure of what she was going into Sue opens herself to the possibility of being a celebrant and finds that the role can be an incredibly powerful medium for communication and connection. Interestingly, Sue says that when acting as a celebrant she was in her *element*. According to Heidegger (1993) the element is what properly enables one to 'Be'. It is the form of activity and environment that lets the essence of one's being-in-the-world emerge and dwell; where one is completely at home.

The call for full occupation in one's element

It seems then, that the play of absorbed doing requires a particular form of to and fro between one's embodied self and the world. Central to this play is an opening of one's being to different possibilities within-the-everyday-world through a shift in attunement. An excerpt from Beth's account points to some key factors present in the space of absorbed-doing. In the following passage Beth describes being caught up in her new job as a probation officer.

I'm so fascinated, you sit in the Court all day and it's like really really interesting. I wouldn't like to be a lawyer but I like the law. I find it really interesting. I am not at all scared of offenders and I found them interesting as well, you know so the day goes go really fast and it's come out of there and 'wow' - it is a good feeling like that...

Here a key to Beth's absorption appears to be the stimulating environment which draws her in and provokes her interest in the law and people. Her deep fascination calls for Beth to become wrapped up in the proceedings and time disappears. Participant accounts such as this suggest that in situations where the "towards-which" of their actions is something of particular interest, they are more likely to become engrossed. Therefore, a basic requirement of one's element must be its ability to draw one's whole being in and hold it in full occupation.

The element supports resolute care

Heidegger (cited in Inwood, 2004) suggests that another factor determining our level of preoccupation in any situation is the depth of our care or concern for whatever we are engaged with. Unlike everyday engaged doing, where one's concerns lie with the structures of the average world and meeting public expectations, absorbed doing appears to project and bind one's being-in-the-world to what one cares about most. For example, in relation to her work Beth says:

What I really cared about was having hope and helping to foster that because so often people don't recognise it in themselves and they can recover. The same sort of thing I see is valuable in work in probation. You see lots and lots of people who have got all sorts of things against them, backgrounds and all sorts of things, they are offenders and they are in trouble - but just the opportunity to see people turn around even if it is only a small percentage of people, it makes it worth it.

So not only does Beth's job provide stimulating activities and situations which fully occupy her, it also connects Beth with her deepest concerns. What she cares about most is having hope and fostering hope in others and this becomes manifest in her work, leading to a deeper level of engagement. It appears that the play of absorbed doing is not only freer than other modes, but there seems to be more density of meaning created within it. When people are in their element they are concerned with commitments and obligations that reflect their own-most care. However, to find one's element in this manner one needs to be 'resolute' or open to what is present in the situation so that the call for authentic care can be heard (Heidegger, 1962).

The need for a mood of equanimity

In Heidegger's (1927/1962) writings, being-open-to-the-world in resoluteness is associated with a certain mood. This is reflected in Beth's account which indicates that to become deeply drawn into a situation she needs to be attuned to the world in a particular way: *"If I am anxious I am not going to get absorbed in anything. I need to be in a pretty calm sort of state and what I am doing needs to be mentally stimulating enough"*. It seems that everyday concerns and worries disrupt the space of absorbed doing by throwing one into another mode, and hence another type of space. If Beth is calm she can focus and be present to whatever occupies her. For Beth, calm fascination is the mood associated with absorbed doing, which aligns with Heidegger's (2001) description of the state of equanimity which is "pure repose" or composure and is the "highest manner of putting-oneself-into-work without regard for all machinations... [It is] the letting come to presence of presencing itself" (p. 160). Here Heidegger points to resolute absorption in the world as involving a calm openness to interacting with what is present in the moment without any particular preconceived plan or scheme.

Equanimity allows the making present of the play itself, that is, an awareness of the free interweaving of one's being and the world. This mindfulness is not a purely cognitive, analytical event but an embodied awareness of the fit between self and world in the moment. In other words, it "feels right" - things fall into place and unfold. Heidegger (1962) explains that equanimity "springs from resoluteness, which, in the moment of *vision*, *looks* at those situations which are possible in one's potentiality-for-Being-a-whole as disclosed in our anticipation of death" (p. 396). This passage suggests that in the moment of complete absorption in activity there occurs an integration of one's being-in-the-world. To lose oneself in the everyday world is a state of being completely at home in it. This might explain the temporary disappearance of time, space and body as being and world become one, interwoven with-in the element.

The element holds knowledge of and enables one's own-most self

In the play of the absorbed mode the possibility of being "whole" may be disclosed as one authentically unfolds in the face of the ultimate possibility of death. The co-constitution of being and world in absorbed doing involves the interweaving of the constancy of one's authentic self in flowing and creative activity and one's element which enables the unfolding of self. As discussed in previous chapters, knowledge inheres in the world already, and this includes knowledge of our own-most ways of being. Heidegger (1993) states that:

The element is what properly enables: it is the enabling [das Vermögen]. The element embraces...To embrace a "thing" or a "person" in their essence means to love them, to favour them. In an original way favouring... means the bestowal of their essence as a gift. Such favouring is the proper essence of enabling, which not only can achieve this or that, but also can let something essentially unfold in its provenance, that is let it be. (p. 220).

In this passage Heidegger suggests that in one's element the world understands one's own-most being in such a way, that it *enables* our embodied practices. Things and people "hold" one's knowledge and sense of self. Van Manen (1999b) points out that while an alien or disturbed environment may confuse the habituated and confident practices of the body, when I am in my element, "I find myself *in* this world but I am not *of* this world...the things of this world do not hold my knowledge, so to speak" (p. 70).

Amy captures the experience of being in her element when engaged in activity within the natural world. "*I always liked beaches and gardening and walking, these were real connecting things. These are part of me, not just something I do. These are me and I need them*". Amy indicates that her experiences of being on beaches, walking and gardening as ones where she can be completely absorbed and in her element. They are not simply things to do, but part of her very own being-in-the-world. Because Amy's sense of authentic being lies just as much within the natural world as it does within her own being, she is awakened to authentic ways of being when engaging in the garden or on a beach. Outdoor activities enable Amy to completely be herself and she belongs. Elsewhere in her account Amy describes how she also finds herself in her element at work, as she feels completely at home in her job.

I have certainly had times when I felt very strongly this is me. It wasn't over anything in particular, but just a sense of rightness about it, a sense of feeling good about my life. It's a real gratitude of having a job that I like. It is sort of like a blessing because it is not like going to work; the drudgery of it isn't there. It is sort of like, "wow this is made for me". I am working, I am doing a job, I am earning money but I am enjoying it at the same time and it is fulfilling. It is getting this buzz of I am so lucky to be in a job that I feel is me. It also has its horrible moments, like "what am I doing this job for?" [But] you haven't got that conflict like I have had in the past, I have got to work another day of drudgery, you know. There is a lot of drudgery in the jobs that I have had before. I've been good at them and I can achieve them but they haven't had that sense of satisfaction personally, and this one has. So that's what makes the major difference, and I just really do feel fortunate. The only way I can describe it is as a sort of internal connecting or some balance happening where things feel right. I can see myself over time and what I have achieved. It is probably the first time in my life that I have had a job that is really meaningful and that is making a difference. I find that really valuable.

In the previous chapter the accounts showed how developing the role of ‘worker’ is important in the recovery of one’s sense of self as part of the everyday world, but an excerpt from Amy reveals that involvement in a work role may also allow the discovery of an individuated sense of self as well. Amy feels ‘right’ in her work role as she looks back and reflects on her achievements and the contributions to others that she has made through work. It is clear that unlike her previous work roles, this one has really opened Amy’s being up and enabled her to be authentic in how she goes about things. In previous jobs she met the everyday expectations of specific roles but Amy was not in her element as the roles did not fit well with her unique way of being. Finding her element at work seems to be crucial in the development of Amy’s sense of overall meaning and purpose in life. When one successfully weaves activity threads to form a role strand, the individual threads gain strength in their meaning which they would not have on their own. Furthermore, if the weaving of threads is conducted in the mode of absorbed doing, then the resulting role strand appears to take on extra vibrancy and strength. Thus, through her involvement in work, Amy not only fits in with everyday others but her work may reflect a vibrancy and strength that really fits Amy’s self and show others something of her uniqueness.

Discovering the Authentic Ground of Being

The participants’ stories show how one’s own way of being-in-the-world can be recollected in the mode of absorbed doing. However, the question remains, is there an end to participants’ uncovering, recovering and discovering of being in their stories. Is some form of end point reached in the accomplishment of a sense self within one’s element? The word ‘discover’ has its origins in the Latin ‘*discooperire*’, meaning to disclose (Allen, 2000). Notably, the prefix ‘dis’ is also Latin in origin and means *apart*. Perhaps then, to *discover* one’s authentic self is to disclose one’s own potential-for-being, *apart* from the everyday, average structure of ‘everybody else’s’ being-in-the-world. Here existence becomes the lived question of being a unique individual. While one may hold an ideal lifestyle design in mind, if these private wishes are clung to as absolutes and always in the future, then present possibilities for one’s own being may be overlooked. Heidegger (1982) states that “the genuine individuation of the individual, determined by the moment.... does not mean clinging obstinately to one’s own private wishes but being free for the factual possibilities of current existence” (p. 288). This suggests that one must be open to the unique possibilities in any particular situation rather than doing what ‘one’ would normally do. This way of being-in-the-world allows

the design of one's lifestyle to unfold organically through the interweaving of authentic activity into a uniquely fitted pattern.

The Possibility of Accomplishment in Adversity

It would seem that through authentic modes of engagement the participants become aware of their own doing and being-in-the-world beyond the average everyday understandings. Having faced non-doing and therefore non-being the participants seem to have an altered understanding of their possibilities, including the possibility of further undoing. The recovery of a common ground in engaged doing structures everyday life and provides surety. However, Heidegger (1927/1962) suggests that to discover one's own way of being one needs a ground which explains the emergence of one's uniqueness as an overcoming of nothingness. While telling her recovery story Kay pointed to a clay house which she had made during a difficult period of her life. For Kay the house captures the essence of her journey through life.

Making that house was a real achievement. I liked making it because there were no guidelines. It was just total freedom of creating. It came totally from my head. There was no pattern for it - I put my heart in that house. Every feeling, being, every expression was all put into the house. Before it gets fired it's still very fragile...the base of it to a degree resembled my fragile-ness. Now the house is solid to me, in a way indestructible. It gives me a solid base to work in or from or to and all of those to, from, withs. It was also very rewarding. The building represents something; in a round about different way that's what my life has been. I needed to go through all the adversity to be able to accomplish, otherwise it's not accomplished. You can't have a rainbow without rain. You can't have love without hate. You can't have recovery without accomplishing. That says it. ...Life's just too good to give up on. It really is. What it is, is love, self acceptance, self peace....I haven't got it right. I haven't got it perfect, but hey I'm doing damn good.

Kay knows she has not accomplished all she can but she is making progress all the same. She compares modelling a clay house to her journey of recovery and discovery. Kay enjoys the freedom of not being required to follow a pattern; the design of the house emerges organically as she engages creatively in the activity. Perhaps this is an aspect of discovering one's self, to have the freedom to fabricate a lifestyle organically and not to any prescribed patterns of doing. Like the clay prior to being fired, being undone involves an uncertainty and fragility. However, going through the extreme conditions and adversity which recovery invariably involves is akin to going through the process of firing. The house emerges whole and solid, hardened by the heat and a secure space in which to dwell. Kay's story seems to be about achieving recovery through facing the adversities of coping in the everyday practical world and building

accomplishments. The ground of one's existence is revealed in adversity because the struggle experienced within the play of the various modes provides a contrast in which what is normally in the background comes to the fore. Through engaging in the struggle and accomplishing, Kay has a firm foundation from which to create a dwelling place in the world.

While June describes losses associated with her unravelling, she also sees positive consequences in the experience.

It has made a huge impact on my life. It destroyed certain things, but it enhanced other things. It destroyed my first marriage, but not entirely - I wasn't really happy in that marriage anyway. It provided an out really. It destroyed my teaching career in a way because I couldn't handle stress anymore and teaching is very stressful. It enhanced my relationship with my kids because it has lead to more honesty between them and me, able to talk about things. I have got a deeper relationship with my mother than I had, she is more respectful, she respects how I am. I am under the care of a mental health centre. They respect me for the insight I have, they come to me with questions. Tomorrow I am doing a presentation there on recovery, so that is a benefit. I feel another benefit, is that I am able to help other people with mental illness. I could never have done that 10 years ago, so yeah they are all benefits. I am not saying that is all a bed of roses; it is very very difficult, but I would say the benefits have out-weighed the costs really.

As June reflects on her experience of recovery from undoing, she recognises that although it has been a long painful process there have been positive outcomes. With the rupturing of her previous lifestyle, June could not continue weaving significant role strands, such as being a wife and a teacher, but other important roles were strengthened as she set about re-building her life. Amy also reflects on the good and bad aspects of her recovery experience.

Sometimes I look back at when I was very unwell and as much as nobody wants it - the abuse and everything - going through it has bought me to this. If I hadn't I wouldn't be here now, I know that. In a little way it was sort of meant to be. I mean, I never would have considered doing something like this years ago. I wouldn't have thought I was able to, so it sort of steered me. As much as I hated the abuse, obviously I hated what happened; I actually think it is a benefit now. I have grown a lot. I have learnt a lot about myself. I know I still have issues that I need to deal with and I still know that there is damage that will probably never go away, but I feel more whole through having to look inside and actually work on myself. You just get on and do life. I wouldn't recommend the experience to anyone, but it is sort of like something really good has come out of it.

Despite the tremendous pain and difficulties Amy has experienced in life she now looks back and sees some sense in the overall picture. Her account shows something of how

the disintegration of doing, and therefore the meaning structures of one's world, can create the absence that allows a fuller whole to emerge and the re-fabrication of a more fitting style of living. Being whole involves re-collecting one's own unique way of being-with-others in the everyday world.

The Play of Coherence and Incoherence

Ultimately, authentic being-in-the-world is built on the grounds of care, embodied being and being-with-everyday-others which were respectively disclosed in non-doing, half-doing and engaged-doing. However, for Heidegger (1962) the stability and meaningfulness of a routine lifestyle is only an illusion which can unravel at any time. This is the constant possibility of unravelling that the participants' face, the certainty of death within life, as disclosed by the passing away of a previous way of living in undoing. Living authentically in the face of death means resisting the need for absolute certainty and being open to the possibilities that lie within the everyday world. It was through the openness of absorbed doing that the participants' lives unfolded and flowed towards their own most potential. Despite the possibility of achieving some sense of integration and coherence, the participants indicate that the process of uncovering, recovering and discovering being-in-the-world does not have a final or definite end point. According to Heidegger (1927/1962) this incompleteness or 'lack' of full-being is what makes us human; it is the absence that opens up all possibilities of being. Perhaps the key is to recognise the relationship between the forms of one's past absorbed activity and the possibilities in one's current activity, just as Sue and other participants did. In doing this, a sense of the progression and coherence in one's life may be gained. Even previous unravelling and tears in one's being-in-the-world play their part in shaping one's current and future life.

Summary

If existential homelessness is a symptom of severe undoing, then discovery of one's own possibilities of being-in-the-world is a "homecoming", a finding one's place in an engaging world. Involvement in the structures of the everyday world is inevitable and unavoidable because of our embedded thrownness. However, within this structure one can either be lost to one's own being or one can discover one's self through absorbed doing, which allows authentic being-in-the-world. The interweaving of activity threads at the interface between self and the world is a dynamic and lifelong process. Being-open-to-one's-own-potential involves weaving a fabric that fits one's self, by drawing threads in, finding a rhythm and interweaving one's doing to craft a truly rich lifestyle.

CHAPTER TEN

BEING-WITH AS THERAPEUTIC TACT

Introduction

Of the modes of being-in-the-world discussed in the preceding chapters, several are characterised by a reduced sense of connection to the everyday world. The participant stories showed that each mode had its own form of phenomenological space in which the interplay of being and world concealed some aspects of being-in-the-world, but at the same time created the possibility of revealing others. This chapter sets out to explore the significance of supportive human relationships for people who have experienced undoing and find themselves in lived spaces outside of the everyday. Van Manen (1999a) suggests that disconnection from the everyday is an experience of being ‘out of touch’, and he points to touch as a fundamental aspect of being-with those who are disconnected:

...the very notion of touch presupposes our lived distance from things and others...Without touch it would not be possible to go away, to let go, or to lose contact, and to get in touch again. This also means that touch is the primordial medium to overcome separation and relational distance. (p. 30)

As shown in the earlier accounts, after losing touch in undoing re-engagement with the everyday world may involve an existential, embodied and social struggle that allows a ‘getting back in touch’ with the ground of one’s being-in-the-world. The participant stories suggest that having another person there proximally, in a way that was literally and metaphorically “hands-on”, was crucial to their getting back in touch with the ground of being. According to Heidegger, the proper response to concealment, such as the participants’ closing off from the everyday world, is *tact* (Harman, 2007). The origins of the word tact lie in the Latin *tactus* meaning touch, and being tactful involves having the right touch or sensitivity when being-with others. The aim of this chapter is to use the notion of tact to uncover essential aspects of being-with as shown in the participants’ experiences. Van Manen (1991, p. 160) describes four qualities associated with tact, and each section in the chapter relates to a particular quality. The discussion explores the fundamental nature of caring relationships in general and the term ‘carer’ is used to refer to mental health practitioners as well as family members. There are many approaches to working with others and much has been written about therapeutic relationships, but the focus here is on how tactful being-with affects the play-space of

the person who is undone.

Tact as Getting-in-Touch with the Play-Space

A tactful person has the sensitive ability to interpret inner thoughts, understandings feelings and desires from indirect clues such as gestures, demeanour, expression and body language. Tact involves the ability to immediately see through motives or cause-and-effect relations. A tactful person is able, as it were, to read the inner life of the other person.

(Van Manen, 1991, p. 521)

The play of tactful being-with first requires an attunement towards the lived space of the other person, which may be far removed from everyday being. What Van Manen points to when describing this aspect of tact is *aesthesis* or an embodied sensitivity to what is present in the play (Miller, 1996). For Heidegger (1927/1962) *aesthesis* is associated with one's fundamental state-of-being or "mood". He indicates that our most tactful way into the depths of being is through a pre-comprehension of things in a primordial "mood" of openness.

It is only because human beings have moods that they can be 'touched' by anything or 'have a sense for' something in such a way that what touches them shows itself in an affect. ...Existentially, a state-of-mind implies a disclosive submission to the world, out of which we can encounter something that matters to us. (p. 177)

Thus, to get 'in touch' with a person who is undone in some way, requires the carer to first be in a state-of-mind that *opens* him or her to *being touched* by the person and their particular lived experience. It seems that it is the fundamental mood or atmosphere that forms between the carer and other that is important here, rather than any technique or approach. In her account, Sue describes the tactful practice of a particular carer who was attuned to her state-of-being.

She was interested in everything I was experiencing...she read me straight up. A lot of people live life on a level where if you can't see it, it's not happening, or if it is not right, it is not something you have to pay attention to. I suppose I live on a fairly emotional level and that's what you pick up on, and maybe we were just a really good fit. I gave signals she picked up on and the result was quite extraordinary.

Here Sue indicates that the carer is sensitive to her experience and this willingness to get-in-touch opens a way for Sue to also be affected or touched. The sense of connection occurs through an embodied attunement to one another, something that cannot necessarily be seen, but is experienced at an emotional level. However, the

reticence characteristic of modes such as non-doing and half-doing can make creating a shared attunement very difficult. In another excerpt, Sue shows how time and patience may be required from carers, as she describes her resistance to help.

I think my family probably tried very hard to help me but I wasn't very receptive. I wasn't able to respond because I was just so unwell. I didn't leave room for it [their help], and I didn't let on that I needed it. I mean I probably didn't recognise that I needed it. They probably weren't getting signs that I wasn't coping. The signs would be in private, like huge major panic attacks. It was a lot to hold in and you can't do it for ever.

In the midst of undoing Sue is closed to her family's help. Opening up to others involves the risk of exposure to the everyday world of judgements and expectation. Gadow (1984) points out that "touch is...the symbol of vulnerability. It is 'the soul unshelled,' the dissolution of boundaries...it offers the supreme risk in an individualistic society, the risk that one person's subjectivity will flow into another's" (p. 67).

Thus, inviting any form of re-engagement in the world is asking for a leap of faith from the other; to reach beyond the bounds of his or her current lived space. Palmer (2007) points to the importance of stillness or dwelling with others, so that the deepest aspects of their being can emerge.

The soul is like a wild animal – tough, resilient yet shy. When we go crashing through the woods shouting for it to come out so we can help it, the soul will stay in hiding. But if we are willing to sit quietly and wait for a while, the soul may show itself. (p. 156)

It seems that tactful practice may require leaving a safe distance between one's self and the person who is undone. This involves maintaining a quiet presence so that the other can reach out when they are ready. It is important not to fill the space with one's own ideas, thoughts or feelings. However, if too much distance is left one cannot touch or be touched by the other. In her account, Kate shows how others can be tact-less if they are not open to being touched.

People really notice the nurses who sit around on their butts all day, who read the paper, don't interact with you and then write all these copious notes or play cards with each other - it hurts you... it makes you very untrusting of them [and] it is a big indicator that they think you are not worth anything.... They left me in that black hole, they left me in agony. Just because someone's numb with grief you don't block [them] off. What you actually do is you come towards them. When you are in the black hole you don't want people coming nagging at you, 'come on let's get going' - but you do want people to reach out to you. ...You sense very quickly who are the ones that care about you and

who are the ones that don't. Both of those types of people have a big impact on your healing. ...You're left with a feeling and you're left with an impression.

Kate indicates that being-with involves *reaching out* to the other and she is adamant that when she was in the darkness of non-doing it was up to her carers to extend a hand to her, rather than leave her alone in such a dark and painful space. In reaching-out, the carers would have opened themselves to being touched by Kate and her painful non-doing state. Whether the carers realise it or not their lack of openness to being touched, speaks to Kate by indicating an absence of concern, which powerfully detracts from her sense of worth. The impact on Kate's play-space is also significant as it leaves her trapped within a small circle of despair. Tactful reaching out does not involve approaching with "nagging" either, as this undoubtedly increases the weight of expectation and closes the leeway. In the account, the significance of mood as an embodied sense of things is illustrated. For Kate, tactful being-with is inextricably tied with care, and both caring and careless encounters leave an indelible visceral impression. She suggests that from the first meeting with a carer and long after contact has finished, what one is left with is not so much the detail of conversations or processes of change, but the underlying mood of the encounters, an embodied sense of who really cared and who was deficient in their care. Heidegger (1927/1962) indicates that getting-in-touch really amounts to having an attunement of care. Being-touched and touching the other is "not just sensing something, or staring at it" (p. 176), but involves finding oneself affected or touched by it through circumspective concern.

What Calls for Care in Tactful Practice?

It seems clear that being open to the particular 'feel' of the other's lived space is vital to tactful practice. The question that arises here is; what in particular do carers need to be open to, that is, what calls for circumspective care? In his writing on tact, Van Manen (1991) suggests that it is the *vulnerability* of the other that calls for reaching out.

In a real sense every human being is vulnerable; every human being is mortal and subject to fears and dangers...The other is actually or potentially weak and vulnerable, just as I know myself to be actually or potentially weak and vulnerable... What is important here though is not so much that I feel pity or compassion for the other in their vulnerability, but that the other is experienced as a voice, as an appeal to me that calls for a response. (p. 530)

Here, Van Manen shows the importance of the vulnerability that is present in most modes of doing and being. This includes the loss of life meaning and active embodiment in non-doing, the difficult struggle and threat of everyday expectation in

half-doing or the judgement and loss of one's own way of being in average everyday engagement. It is through being open to the vulnerability of others that carers can be taken out of everyday spaces and average ways of being-with, towards whatever calls for sensitivity or tact. And like all calls for action, the origin of the call ultimately lies within the person who responds, as it is the carer's *own* sense of vulnerability that allows them to recognise it in others. It seems that tact involves opening one's being to the other's real and potential pain or losses. Sometimes the call to care is loud and clear as the pain and loss is obvious, but at other times it may be difficult to hear in the complex interplay of factors, including times when the pain is deliberately kept hidden, or in bravado and anger, which may also conceal the other's vulnerability.

Tactful Presence Creates Leeway

Being open to the other's lived space is akin to what Marcel refers to as *presence* (cited in Randall, 1992). Presence is not merely a matter of being physically available, but it is the gift of 'being-there', available to the other as a whole human being. It appears that tactful presence lies in between the deficient modes of 'hands off' indifference and 'heavy handed' obtrusiveness; it is "concern made tangible" (Gadow, 1984, p. 67). In a previous excerpt, Kate recounted an experience of having carers who were closed to her vulnerability. As the account continues she shows how tactful presence may have created a safe space when she was at her most vulnerable.

If they had just come and sat with me, even just acknowledged how it must be like for me, had gently asked me questions about how I was, how it had been for me, what did I want, what was happening for me, it would have given me support to work through what I was feeling, made me feel that I could trust them enough to tell them exactly that I wanted to commit suicide because it was so painful.

What Kate really needed from the staff was someone to sit with her and acknowledge her painfully hopeless experience. By dwelling-with Kate and gently gaining her trust the carers could have altered the non-doing play-space and opened up possibilities other than the despair that she had become trapped in. This opening up of play-space provides leeway "in which vulnerability is not avoided, but rather embraced...The kind of space in which we feel 'touched': a different kind of freedom from the freedom that is 'above it all'" (Todres, 2007, p. 160). Getting-in-touch with the particular vulnerability of the other's mode of being not only calls the carer to action; it can also reveal what matters most for the undone person. Several accounts show the significance of tactful presence in creating room for dialogue. For instance Jim states:

It is just sometimes having somebody there to talk to, whether it is over a cup of coffee or over a game of chess or a game of cards you know. On the day something might have happened and sometimes words don't need to be spoken to actually help you know. Sometimes you need words and to talk. Sometimes just sharing the space with them helps.

For Jim “having somebody there...sharing the space” makes all the difference. The significance of shared space is that it creates common ground in which there is some leeway for the to and fro of dialogue. As Jim points out, dialogue does not always require words, and the saying can take place in the simple acts of sitting-with, drinking coffee or in the playing of cards. The focus may be on the coffee, or the cards or the silence, but an embodied communication occurs if both the person and the carer are open to each others’ presence. Sue provides another example, describing the presence of a particular carer who sits and shares space without expectation.

Sometimes she would just be with me.... It must have taken an incredible amount of energy, [and it] conveys quite a significant amount of acceptance that okay you are in this really bad place and lousy company, but that is okay. She didn't expect anything of me. It was extremely important. To have someone to just accept you even in the awful state, that you are still worthy of their time and their compassion and that they still actually believe things are going to get better despite all that, it's incredible. She was hugely instrumental.

Sue’s account shows that it is *how* one is present that matters in creating leeway or a safe space. The practitioner’s being-with conveys to Sue that she is worthwhile. It seems that a safe space is one in which there is no judgement or expectations about what one should be doing and where carers show acceptance rather than indifference towards the other’s mode of being.

It is important to note that the opening of space is not limited to the detached being-in-the-world of the undoing and non-doing modes. An excerpt from Mike shows how tactful presence creates space for re-engagement in half-doing.

I found that I wasn't finishing things unless somebody was there. They didn't even have to do it; just be there. If somebody was with me I seemed to have the motivation to do it. If there was nobody there I wouldn't do it. It wasn't that I felt guilty that they were there, or they would tell me off or anything. Having that person there I felt motivated, I felt happier at what I was doing, I felt less likely to dwell on anything and I felt I had achieved something. It really made a difference to me.

The presence of another moves Mike in some way, in that it opens up space for tarrying and achieving something simple. Again, the presence is not about exerting expectation or nagging, but perhaps it says something to Mike about the value of his activity and

creates an implicit commitment that binds Mike and holds him in the situation. The carer appreciates the vulnerability of the half-doing mode and avoids stepping in to take over, allowing Mike to find his own way back to embodied engagement with the world.

It seems that a key aspect of working with people as whole embodied beings is being mindful of the ways that one's presence, tone, tempo, language and actions influence the mood of the other. This requires an aesthetic awareness of the other's lived space and the impact of our being in it. Getting-in-touch can open up space for the play of therapeutic interaction. At times creating an atmosphere of stability and security or of quiet acceptance and reflection may be important. Alternatively stimulating energy, opening a felt sense of possibilities and instilling hope may be required. The participant stories suggest that at the heart of getting-in-touch is the communication of a sense that the person and their being-in-the-world matters, and this solicitude creates room to move and invites engagement in his or her lived world.

Tact as Making Sense of the Play

Tact consists of the ability to interpret the psychological and social significance of the features of [the others] inner life. Thus tact knows how to interpret, for example, the deeper significance of shyness, hostility, frustration, rudeness, joy, anger, tenderness and grief in concrete situations with particular persons.

(Van Manen, 1991, p. 521)

A second aspect of tactful practice appears to be getting a sense of the bounds of the shared play-space and the possibilities that lie within it. Thus, while tactfully entering into the play creates space for dialogue, carers also need to make sense of and understand the significance of the ongoing dynamics as they arise. In particular, Kate points to the need for others who really understand the significance of one's experience as a whole.

You have this feeling that so few people do understand. To have staff members who have those qualities is vital.....I think that a holistic approach...is really important in mental health because so often that does get forgotten, that you have got other needs. It is not just your mental illness you are dealing with. You are dealing with massive issues of grief, of loss, of brokenness, you know it is not just your mental health issues, [its] your normal reactions that people would have to the situations that they find themselves in. Staff who have an understanding of that and see you as a whole person are really important, absolutely vital actually.

Here Kate stresses that recovering from undoing is much more than coping with the symptoms of a mental illness; it is a struggle to regain the ground of one's being-in-the-

world as a whole. Having others who understand the extent of this devastation is vital to Kate and the other participants. The stories suggest that the experience of having another person understand, sometimes more than one understands oneself, is incredibly powerful and can lead to new insights and an altered play-space. Heidegger (as cited in Inwood, 2004) indicates that although we always have a background ‘everyday’ understanding of what makes sense, we also develop specific understandings in the to and fro of any particular play-space. He states that “Rules form in the course of play. They bind us with a special sort of freedom” (p. 167). The sense of what is possible creates the bounds of the space, but also frees those who are playing to engage freely within those bounds. Thus, within caring relationships norms for being-with one another develop in the course of interaction and this shared understanding creates the structure for dialogue and making sense of things.

Understanding Requires the To and Fro of Play

Creating understanding involves a back and forth process; a dialogue in which interpretation can take place. As in any conversation this requires input from both parties. When recounting experiences of being understood several participants indicated the significance of embodied understanding rather than analytical or cognitive interpretation. In her account Sara indicates the characteristics of natural and tactful interpretation.

The wonderful thing about clients is that they will let you know they appreciate that or they don't. If we [look at] all the possibilities and go straight from there and finish that learning or behaving with a client and they give us the answer or spend lots of time [on it] - just do it... You won't ask yourself any questions about 'shall I do this or shall I do that'? You will just do it. ...It's a sensitivity and it is an empathy - but it is um – natural. Like we say - 'it is meant to be'. You would just know...it is a kind of gut feeling thing.

Here Sara shows how if one has tact, on entering a situation one can read the ‘state’ of play and understand immediately what is needed and what one should do. There is no need for explicit discussion or clarification. Sara states that “you just know”. Intuition or a “gut-feeling” is an embodied knowing, a lived sense of what is right based on the dynamics of the situation and borne from past experience. Intuitive interactions involve having a sense of what the situation calls for in the moment.

In the following excerpt, Sue’s practitioner also shows something of what tactful understanding and interpretation might look like.

She never offered me things before I was ready for them but when I was ready for them she knew. That was pretty much down to her - what would I call it? Her instinct, her picking up on signals of what I needed. She waited until I had enough energy to sort of explore other forms of therapy that might help me. The one that she suggested was CBT which I actually had once before and it had been an absolute disaster... She said 'trust me, trust me, give it a go. I know just the person...let's try.'

Here Sue's carer seems to know not only what she needs but also when she needs it. This temporal aspect of caring involves an understanding of future potential and whether the undone person may or may not feel ready to take hold of the possibilities in the present moment. The carer is attuned to the embodied signals which Sue gives out, and gauges her readiness to engage in specific activities. This is not a formal assessment but an emotional connection, which creates a shared understanding of possibilities and influences.

In contrast, another excerpt from Sue shows how a failure to allow space in which understanding can develop can be detrimental and lead to a misinterpretation of the other's needs.

I remember once I was extremely unwell and my career had fallen down around my ears. [The social worker] came in this particular day and had an OT [occupational therapist] with her and he just absolutely gutted me...He didn't read signs, he didn't know me, he hadn't come to visit me, they just happened to be in the same vehicle. He sat at the kitchen table and had a cup of coffee and said 'tell me Sue what are you going to be doing now, have you got any plans?' and I just went 'oh my god he thinks I should be looking in the newspaper for a job'. I mean I thought that was a good day because I had got out of bed and answered the front door. It sounds pathetic but it threw me into a complete spin, I was about 6 steps back because... 'well that is what they think, I should be out there doing something'. It was devastating.

Here Sue is devastated by what the occupational therapist may have thought were benign or potentially helpful questions. For Sue the questions are loaded with expectations and ask her to commit to possibilities of which she has no sense. Without leaving distance to let Sue show something of her mode of being and doing, the therapist cannot understand her sensitivity to expectation and her reluctance to plan and make commitments. If Sue had been in a different mode, where time was not suspended and everything not so distant the questions could well have helped her to focus on where she was going. However, without the benefit of understanding built gradually in the interplay of dialogue and relationship, the therapist's questions threaten the leeway of Sue's non-doing space.

In her narrative, Amy provides an example of the opening up of possibilities through the

therapist's tactful understanding of her withdrawn mode of being.

It was a very small step at a time...For possibly 6 months, I think I just went to the therapy sessions. She would try and drag things out of me, but I couldn't say anything. So she made the suggestion that maybe I try writing or drawing, as a way of expressing myself. It was a very private thing, it was my therapist and me and nobody else saw it or knew about it. It was a very silent communication but one that worked for me.

Initially Amy feels like her therapist is trying to “drag things out” of her, but she keeps these aspects of her being-in-the-world hidden. However, through tactful presence over time, Amy's therapist makes sense of the play and is able to see possibilities for engagement. Interestingly, Amy states that the dialogue is a silent exchange. As indicated earlier, it is the leaving of space through silence that creates the space which Amy can step into and reveal unspeakable aspects of her being. This leeway not only provides room to move, but it is in silence that the undone person may hear the call to care for something and grasp other possibilities of being. However, in this delicate state of play things show and withdraw at the same time and without tact it is easy to squash the moment and overlook the significance of particular words or actions. What is most significant to understand in any therapeutic play-space is how the vulnerability that called for one's concern points to possibilities of care and being-in-the-world. The vulnerability of being undone and estranged from the everyday world can be seen as ‘a tear’ in the fabric of everyday existence (Todres, 2007). For Todres (2007), vulnerability is a “wound of longing” which points to that which has either been lost or not yet found, including passions, dreams, strengths and untapped potential (p. 154). If carers are attuned to the actual or potential disconnection experienced in different modes of doing, they can support the other in his or her vulnerability; valuing its potential for disclosing care and possibilities of being.

Full Understanding Requires Natural Interaction

In clinical settings, understanding of people is often developed through formal observation and interview, conducted by those in particular professional roles. The specific perspective of those in professional roles often requires the person who is undone to be assessed in terms of particular signs, symptoms and functional abilities. In her story Sara touches on what it is to be observed and understood in this way.

Some people, they really make your pantyhose wobble when they look at you right in the eyes, ‘how are you’? and you think, ‘have I put my bi-polar in my back pocket this morning or is it showing’? You know it might be their lovely caring way of saying, ‘look here you old bi-polar how are you’ but they don't

say it like that, it is more um - it would be flashing across my mind, 'she thinks I am not well'. The strangeness of that feeling never, never goes away... it is the same feeling when I used to come out of hospital...of being, you feel like you are being observed. Like everyone is watching to see if she is going to turn purple and skate board back to [the Psychiatric Hospital] again... I find that a very uncomfortable feeling.

Here Sara describes the strangeness of being under observation. She knows that others are watching and waiting for signs of disorder and this is unnerving and not comforting at all for someone trying to re-engage in the world. For Sara it is only certain people who create this strange feeling. The way in which the simple question; 'how are you'? is received differs depending on who is asking. It seems that Sara is already attuned to the purpose behind the question; she knows from previous interactions whether it is an inquiry about her symptoms or about her as a human being. The manner in which questions are asked and observations made, can either communicate certain expectations and close down interaction, or invite sharing and develop real understanding. In another excerpt Sara's husband also observes her, but to Sara this has quite a different feel.

...because he is here all the time he observes it and he has done lots of listening with [the GP] and I. When we first came up here, [the GP] helped him to understand what to see, I mean what to look for um, and he is able to see you know, he would tell me. He is not one of those observers who just goes somewhere and fixes the car, or to his friends. That is really good from my perspective. He does [notice] because he is here all the time. And sometimes when you get a bit - it isn't high, it is over busy, you know, he would notice that as well.

For Sara the observation provided by her husband is of quite a different nature. The essence of his care is characterised by a commitment to and dwelling with Sara as a person. The observation that he makes is more of a 'noticing' in the natural course of everyday being-with, rather than an assessment of particular aspects of her being at a specific point in time. Sara's husband is not objectively checking up on her, but is already attuned and part of her world. He is able to recognise the range of her needs including the need to slow down and avoid entanglement in busy doing. This reinforces the notion that understanding always develops in the to and fro of a relationship and thus the boundaries of the relationship determine what emerges and is understood as being significant in the play. Shared understanding structures the play-space as it shapes what one does and how one acts towards the other. If understanding develops in the context of a relationship which focuses on signs and symptoms alone, then the play will be limited by this dynamic. Sara's husband has a broader view of her being-in-the-

world and therefore is attuned to a far more complex interplay of factors that are also understood by and significant for Sara.

Being tactful in one's reading of the play does not exclude developing understanding through direct questioning and formal assessment. Indeed, Sue points out that relying solely on intuitive embodied signals can be risky if they are misconstrued. "*Instincts can be right and they can be wrong. I have got personal experience of the line being so fine that a wrong move or a misinterpretation could be fatal*". However, what is important in tactful practice is not to rely solely on the explicit information gathered in direct questioning and formal assessment either. Tact requires going beyond the surface appearance of things to look for what is said indirectly. According to Miller (Miller, 1996) a significant feature of play is *poiesis*, which refers to the poetic and symbolic layers of meaning that arise in the to and fro of play. To tactfully read the state of play and glean a deeper understanding of the dynamics, it is important to be open to the poiesis and not simply take things at face-value. As we have seen, there is much to be understood in the silence and in the form and content of people's doing as well as in the explicit dialogue of language. Heidegger (1927/1962) indicates that it is in the interaction or pre-linguistic discourse that the lived space of being-with becomes 'explicitly' shared and is *taken hold of* and recognised for what it is.

Tact as the Play of Taking Hold and Holding Back

A person with tact appears to have a fine sense of standards, limits and balance that makes it possible to know almost automatically how far to enter into a situation and what distance to keep in individual circumstances.

(Van Manen, 1991, p. 521)

The preceding sections show the significance of tactful presence and understanding in opening and structuring a shared play-space. Van Manen's third quality of tact is the ability to monitor and adjust one's involvement in the therapeutic interaction as needed. This aspect of tact allows the maintenance of the space as bounded and secure, as well as open and forgiving. The act of *holding* seems to be significant in preserving the play-space and allowing the free play of a particular mode to occur.

Securing the Space Requires Taking Hold of the Play

The physical act of holding someone is an expression of care in the form of wrapping around to protect and support the other, providing a sense of security. In a similar way a person's sense of being-in-the-world can be held and preserved. Here the bounds of the play-space can be steadied for the other and the interplay of his or her self and the world

maintained. As Kate suggests, feeling supported is to feel held; *“You need people to help you. I did have things like psychotherapy, where in a safe situation a skilled therapist made me feel like I was being supported. It was almost like - they kind of hold you ‘psychically’”*. The *psyche* is the soul or spirit of an individual (Allen, 2000). Perhaps to hold someone “psychically” is to grasp and nurture something of their psyche or fundamental Being, at a time when the things that once occupied and mattered most to them are lost within their dishevelled and detached lifestyle. Holding the play-space secure means keeping the other ‘grounded’ in the situation and safeguarding and articulating the care that ties them to the everyday world and to their own way of being.

Taking hold involves a response Heidegger (1927/1962) refers to as ‘leaping in’. By leaping into the play, carers secure the other’s lived space and address his or her immediate needs, as described by Heidegger (1962) in the following passage.

This kind of solicitude takes over for the Other...The Other is thus thrown out of his own position; he steps back so that afterwards, when the matter has been attended to, he can either take it over as something finished and at his disposal, or disburden himself of it completely. This kind of solicitude, which leaps in and takes away ‘care’... pertains for the most part to our concern with the ready-to-hand. (p. 158)

This form of being-with ‘takes hold’ of the play-space by *taking away care*, or in other words, taking over some of the concerns that the other is immediately struggling with. There are many examples of leaping in within the participant narratives, including situations where decisions were made, activities carried out or roles taken over on behalf of the participant. Sue and Beth describe how others leapt in and intervened to halt their unravelling. Sue says; *“In the end, [my family] took the matter out of my hands and they took me physically to my GP and got a referral to the [District] Mental Health Service... I hated that. [I was] baby sat, someone with me 24 hours a day”*. Here, Sue’s family take “the matter”, or perhaps *what* matters to Sue, out of her hands and in doing so prevent the play of being-in-the-world from closing down altogether. In describing her experience of non-doing, Beth points to the kind of touch that is needed in taking hold.

At that point I absolutely can’t do anything and the only way is if somebody pushes. I don’t mean really viciously but I think that it actually does really help when somebody is quite pushy about what you do.... I think there has to be some pressure. Whether that’s a pressure from yourself or it’s pressure from somebody else like ‘if you stay in bed all day you’ll get bed sores...’. Otherwise I think you just get to a point of uncaring and you just stay in it and

that can go on and on. It needs to be from a place of caring otherwise it is just cruel. I got a lot of cruelty from people who didn't understand, people who thought I was just a lazy bitch or looking for attention or 'how can you do that to your kids?'...I think that anybody who comes into that situation making value judgements is just going to damage that person more. I think honesty is a really big thing, and respecting the person is as well - enough to be honest with them. I think there is a kind of an attitude to people with mental illness that you don't actually have to tell them how it is, that they have enough to cope with....

Beth's account shows how tact is not simply a matter of having the sensitivity of a gentle touch. She suggests that sometimes a certain amount of pressure is required if one is to take hold of and steady the play-space. Beth's description fits well with Van Manen's (1991) notion of tact, which indicates that one can be strong and still be sensitive, through care and honesty: "A tactful person must be strong, since tact may require frankness, directness, or candour when the situation calls for it. Tact is always sincere and truthful, never deceitful or misleading" (p. 521). Open honesty is critical in supporting Beth to get in touch with the reality of her situation. In Beth's experience, others try to conceal the realities of life from people with mental illness and this covering over disrespects her ability to cope with the play of being undone. She does not want to be protected from the truth as others see it, and she goes on to describe her interaction with a particular practitioner who is open and honest with her.

She said 'look this is enough of this' and didn't take any bullshit about me having a drinking problem and 'you need to do something about this now'. I knew it was caring because I had time with her before, but also she was very straight with me and I didn't feel like she was judging me. I think she was just telling me that if I had kept going this is what the consequence was and I didn't particularly like her for it, but I didn't feel like she was doing it to harm me either. Deep down I knew she was right as well.

Here, it is the being "straight up" that Beth values most in the practitioner's interaction with her. There is no judgement, and no sense of intention to harm, just a laying out of the situation and the likely consequences for Beth. While Beth does not particularly like the practitioner for this honesty, because of her consistent care over time, Beth does respect her opinion and knows deep down that she is right. The carer grounds Beth in her throwness, and in doing so holds the play-space together before Beth's relationship with the everyday world completely breaks down. Similarly, Sue describes how a caregiver holds her in the reality of her situation, but at the same time she also holds a sense of possibility for Sue.

She opened my eyes to [the fact] that, mental illness is a very lonely illness, a very lonely illness. We all suffer individually. She accepted the way that I was, she knew that it could and would get better, whereas I didn't know that at the time.

Here the carer does not try to conceal or gloss over the reality of Sue's situation; rather she interprets the situation and shares her understanding. Importantly though, the carer also accepts the way Sue is and provides security by holding onto other possibilities for Sue when she can no longer hold them. It seems an important aspect of taking hold of the space seems to be articulating what is at play, or in other words explicitly sharing one's sense of the situation in which the other has been thrown. This 'laying out' of the situation assists the other to get in touch with the bindings to the everyday world that are strained and damaged through the unravelling.

In her account Beth came to realise that her relationship with her kids was being severely damaged and that she was about to lose custody of them. However, she was still in no position to take care of her self or her children, and so a further form of taking hold was required from her carers.

For women that have got kids, or just anybody that is really struggling with day to day things - it really helps if there are people who can take some of those things out of their hands, so they can actually concentrate on doing the things they need to do for themselves. I really honestly believe that I couldn't have recovered unless I got that four months of not being responsible for anybody else. There was something good about not being responsible for anybody ...no bills to worry about, no responsibilities for anybody. I mean I did, but I couldn't.

Here, Beth no longer needs someone to stop her unravelling, but she does require someone to leap in and "take care" of some of her everyday commitments. Her account stresses the significance of having someone to take things off her hands so that she is then free to get in touch with other fundamental aspects of her being. Kate highlights a specific carer who commits to the play of the therapeutic space by leaping in and preserving her sense of being-in-the-world.

It was so nice to have someone who kept to their word and took action for you because you couldn't take the action yourself. He was also someone that got to know you, he was very reliable, he was one of those people that if said he was going to do something for you he would do it and he would follow it up until he got it done. ...Until you grow confident enough to advocate for yourself, to have people who understand where you are coming from because they bothered to get to know you, and they know what you are trying to say [is really important]. Sometimes you can't articulate it for your self because you are so deeply in that black hole, have lost your way.

In this discussion Kate captures what seem to be essential aspects of leaping in and committing to the play. The practitioner knows Kate and understands her concerns, and therefore he is able to take action for her and speak on her behalf when she is unable to do so. It seems that in reliably leaping in and acting for the person when he or she cannot; carers hold and maintain the bindings that connect the person to the everyday world and to his or her own sense of being. It is important to recognise that people cannot be removed from the wider world into which they are thrown. Even those who have lost touch with the everyday world are always in some way intertwined in a pattern of practices, concerns and relationships which affect their being-in-the-world. To help the other come to grips with his/ her mode of being and to take particular commitments off his or her hands appears to be essential in securing a bounded and safe play-space. In this way, participants were able to get a handle on their undoing and reconnect with the ground of their everyday being-in-the-world.

Opening Space Requires Holding the Play Open and Holding Back

In addition to providing safety and security, the act of holding someone requires leaving room to move so that the other is not held too tightly and restricted. Using the analogy of physical holding, there is clearly a distinction between comforting and restraining someone. Thus, maintaining the play space involves holding the space steady but also holding it open enough so that the play can develop and the boundaries of the play-space can shift accordingly. This means that the other's being-in-the-world is not only held in the facticity of the situation, but also in its potential for projecting into other ways of being. Thus, while leaping in is important for steadying the therapeutic space, Heidegger (1927/1962) also points to a form of being-with that involves *leaping ahead* of the play. Here, the focus is on the other's potential for being-in-the-world rather than dealing with his or her immediate everyday concerns.

[The carer leaps ahead]not in order to take away [the Other's] 'care' but rather to give it back to him authentically as such for the first time. This kind of solicitude pertains essentially to authentic care - that is, to the existence of the Other, not to a 'what' with which he is concerned; it helps the Other to become transparent to himself in his care and to become free for it. (p. 159)

Thus, leaping ahead is a returning of care to the other, which provides space for his or her authentic being-in-the-world. In her account Kate suggests that helpful being-with would include support where "*people actually sit down with you and in your own time help you to make decisions, help you to start dreaming again, help you to know that you are a good person, [and] realise what your strengths are*". Kate's statement points to

the need for assistance in making one's own decisions and to return to a sense of care for one's own way of being and doing, as opposed to the removal of decision making and control that occurs in leaping in. Sue provides an example of this as she describes her experience with a therapist who invites her to once again take hold of her own skills, abilities and a sense of care for engagement in the everyday world.

She said to me 'I think we should write you a CV'. I said 'there's no point now - I am not looking for a job. I don't think I will ever work again'. She said 'no, I think if you could see on paper what you actually have to offer, even if you never use it...' She said 'try and think about how many transferable skills [you have]'. That was my homework that week, and I came up with this incredible list. So the CV got done...It is quite a powerful process actually. Part of that was empowering me - making me believe that I still had things to offer and making me look at things that I did that had value in my life and the life of my family...

Here Sue's therapist creates space for her to remember what she has to offer and the potential roles she can play in the everyday world of others. This alters Sue's attunement to being-in-the-world by providing a different perspective and opening her sense of possibilities in a powerful way. Receiving help to recall one's abilities can engender a sense of readiness to leap into the everyday world. In her account Sara uses the metaphor of painting a picture to capture this way of working.

In that case you are kind of painting the picture around the person, they won't paint it, they won't pick up the paint brush, you have tried 12 times, you have asked in different ways and it won't happen. They won't do it. So 'Joe, I haven't got time to wait any more weeks for you' – so you just get the paint brush and paint it yourself - 'open your eyes, there - you are in the painting'.

Here “painting the picture around the person” represents creating a context for active being-in-the-world. It is not a matter of painting a picture for the person so that they can stay in bed and do not need to act for him/herself. Rather it is a call for action through the opening up of new vistas or perspectives on things. It is an invitation to open one's eyes to what is available in the world-at-hand and to have one's being captured by the picture that is painted. Inviting the other's re-engagement in the world requires the sensitivity of tact, as the following passage from Derrida highlights:

An invitation leaves one free, otherwise it becomes a constraint. It should never imply: you are obliged to come, you have to come it is necessary. But the invitation must be pressing, not indifferent. It should never imply: you are free not to come and if you don't come, never mind it doesn't matter. Without the pressure of some desire – which at once says 'come' and leaves nonetheless, the other his absolute freedom – the invitation withdraws and becomes unwelcoming. (as cited in Kukla, 2002, p. 19)

If recovery is understood as the process of regaining one's freedom for being-in-the-world, then invitations to re-engage in the everyday need to preserve the freedom of the other. However, invitations should also call for an active response by producing enough press that they cannot simply be ignored. A tactful invitation calls the other to actively make a choice, and in doing so requires them to take a stand on their being one way or another.

It also leaves room to move and creates different patterns of interaction. In their accounts, both Kate and Beth point to the benefit of being 'held lightly' as they re-engage in the world. Kate indicates the need for a certain kind of leeway:

It is the continuing support and also encouragement from people. Not like when you are a little kid and to say 'yes you have to go to school even though you feel sick' or whatever, you know, but genuine encouragement and letting you make mistakes. Letting you feel like for example, 'I really can't do it today' and not making you feel guilty because you are carrying enough guilt anyway usually. Just letting you gradually find your feet.

Here Kate discusses a mode of being-with that encourages involvement in the world by allowing leeway. Unlike an unsympathetic parent ordering a sick child to school, there is some give, which allows for struggle and mistakes. By holding hope but not placing too much expectation on the outcome of actions, carers provide room for testing capacities and the re-collection of being. In a similar vein, Beth states:

It is like somebody learning to walk. You have got to make a bit of space to learn and sometimes they need to stop and lean on you sometimes but they have to do it for themselves, it is actually like that. I need quite a bit of space. That is not a particularly enjoyable place to be in but it is a lot better than [non-doing]. I think at that point it is selfish in a kind of way, but it is like 'leave me alone when I need you to, but hang about just in case'.

For Beth, the process of re-engagement is akin to taking first steps in the world and she is clear that carers need to make space for this, yet be available if she 'falls'. Holding the play-space open requires the carer to hold back their presence in the play-space. This assists others to 'stand on their own two feet' and for Heidegger (1927/1962) this steadfastness is the essence of authentic care. It appears that the interweaving of self and world can be supported by others if they are able to invite activity and draw the person into the world-at-hand. This involves creating space around the person which they can step into and become part of. If the weight of expectation weighs too heavily or there is no expectation at all the person's re-engagement in the world will be hindered. Clearly making room for first steps is important in any of the modes described in the previous

chapters. Holding the play space means holding onto care and hope for the other, while at the same time opening possibilities for engagement. In this way the person who is undone can take back care and hope while recollecting other ways of being-in-the-world.

Tact as Letting Things Play-Out

“Tact seems characterised by moral intuitiveness: a tactful person seems to sense what is the right thing to do”

(Van Manen, 1991, p. 521)

While tactful practice requires getting in-touch with and holding the play-space, the question of what occurs within the play-space to make it therapeutic remains. Heidegger states that “playing always creates for itself the space within which it can form and that also means transform itself” (cited in Inwood, 2004, p. 167), indicating that certain dynamics are not only developed within the play-space but things are also transformed. A carer’s responsiveness can be critical in maintaining the space for the play to transform itself and Van Manen (1991) suggests that there is a moral intuition that guides tactful practice in the moment. Knowing the right thing to do might allow the other to experience a shift in mood, a new understanding or a sense of connectedness to self and the world.

The Need for Tact not Tactics

Because the dynamics of therapeutic interaction cannot be predetermined, having tact is more important than tactics or a pre-conceived game plan. Van Manen (1991) states that “it is often the unsteady, unstable, inconsistent, variable moment that requires tactful action of a sort that is essentially unplannable” (p. 530). Similarly, in reflecting on her own experience Sara says:

So much of it is what you can’t plan or predict but you hope that it will [work]. I think so often, you know, we plan and we think how would this be? What should I do and what won’t I do? - But actually the key part of it is moving your person to where there is activity and gently pushing them towards that activity. Yeah, it is the environment and where there are people, and timing too. Sometimes it is just timing.

Sara points to the need to create situations where possibilities for engagement with others and the world-at-hand can arise and draw the undone person in. The resulting play cannot be planned or predicted with any certainty, but it is being alert to the possibilities and a tactful sense of timing that allows one to seize opportunities as they

arise. In her account Kate makes a distinction between two important aspects of tactful responding.

I think activities are really important but unless you have people who come to offer you those activities with [care] in their heart then it is a waste of time.... Knowing how someone else feels sometimes could be the most powerful thing, but I also believe that the help of other skilled people who have done training in particular areas is really important too so that the two go together.

Here Kate suggests that while care and an understanding of the other person's experience are important in tactful practice, they are not necessarily enough. In other words, being caring and being tactful are not the same thing (Van Manen, 1991). One can be very caring but completely tactless, if one does not have the embodied 'know how' to respond skilfully in the play. Additionally, one can be equally tactless if skill is applied without care and an understanding of the other's particular situation. While tact is more important than tactics, it is worth noting that without the benefit of experience novice carers often need tactics or predetermined structure in order to gain the embodied skill and understanding of tact.

Because there is no formula for when to leap in and when leaping ahead is more appropriate, responding tactfully in the moment can be very difficult. An excerpt from Sue illustrates the complexity of being tactful as she recounts a story about her husband's response to a specific situation.

This particular day, we had woken up in the morning and he said "hey, there is a trip on the books with a group that we belong to".... I said 'I can't go...I feel like I am falling down a big black hole'.... Anyway, he got up and got himself breakfast and then said "do you mind if I go?" In that split second I made a whole lot of judgements, a whole lot of decisions - that he didn't actually care about me, that yes I wanted him to go on that trip because I would have a fortified opportunity to top myself.... That was really scary, a really fine line. Jack's instinct was to give me some space which was a really bad call. I knew that he was very worried about me but if he tried to be solicitous I saw it as him smothering me. It is an extremely fine line. If they leave you alone they are neglecting, if they are constantly asking you how you are, they are harassing you.

Here Sue is vulnerable to both an extreme closing in of space as well as a complete opening up of distance. This paradox leaves her husband walking a very fine line between neglect and smothering. Her husband's instinct is to give Sue some space, so as not to smother her. At the same time, he may simply need some space and time for himself. The response is perceived by Sue as abandonment and a lack of care at a crucial time, demonstrating the delicate dance of tactful practice. Doing the 'right thing'

in the moment is hard work, requiring an awareness of subtle changes and needs in the other's lived space.

Later in her account, Sue describes how her husband *does* have the right touch in gradually supporting her to re-engage in the world.

It was a gradual thing, it required encouragement. Even at times when I was really really unwell, Jack could actually convince me, and had to physically help me, to get into old garden clothes and go outside.... To begin with I wouldn't set foot outside the door and then I would go out for a brief period, I would do a little bit. Then there was a period where I would only do it when Jack was at home and he would initiate it and I would sort of go along with it. Now it is whether he is there or not. Jack helped structure that initially and that was important.

Sue's husband constructs a picture of Sue being involved in the garden by altering the space around her and inviting active engagement. He does not leap in by forcing her to garden or by doing it for her, but encourages participation by doing it alongside her. Heidegger states that authentic being-with is possible "only in the side-by-side commitment to a shared project" (as cited in J. Young, 2001, p. 56). In working towards something together, the commitment between Sue and her husband becomes "explicitly shared" (Heidegger, 1962, p. 205). This kind of commitment creates leeway for carers, as a strong binding is resistant to unravelling even when responses lack tact or care is deficient in some way.

Carers must enter the play-space as a participant in a shared project and be ready to play. Therapeutic tact involves being open to whatever arises, rather than being an objective observer or therapeutic technician. Re-collecting everyday being-in-the-world is a case of engaging in small concrete projects, pressing into different possibilities and recovering one's sense of being and becoming in the process. The indirect nature of this process allows the re-gathering of one's selfhood at a pace that is manageable, if things are allowed to play-out in their own time.

Tactful Practice Keeps the Other Intact

The enablement of another person involves assisting to preserve his or her own-most way of being. For Heidegger (1987/2001) this means holding onto "what makes someone whole...that is, what makes the human being at home with himself" (p. 160). Thus, the essence of holding the play space open is making room for the other's being-in-the-world as a whole; free to play within the bounds of his or her thrownness. This form of practice is captured in Sue's account when she says:

I couldn't put a specific conversation or specific moment but she re-opened something in me. I thought, 'okay I am still alive'... [She] convinced me that actually it was worth looking at the possibility that life might improve. It was her whole approach, the way she spoke, by the compassion that she showed me and her optimism about my future. ...It is like saying 'well you are like this today, but not forever' without words, without ever actually sitting me down and saying 'you will', just by her actions. She always knew how far to encourage me without making me feel pressured. That is quite a gift. It is extraordinary how one person can influence the shape of your life the minute you come in contact with them.

Sue's account captures the significance of a carer's tact when she says it has the power to influence the shape of another's life. Although the practice consists of many parts, in the end it is the '*whole approach*' that matters. It is the interaction of one human-being with another in *shared* concern that maintains connectedness and wholeness. Sue's carer is tactful because the way she works preserves Sue's wholeness and gets her back in touch with her own-most way of being. In other words, it leaves her in-tact. Levin (1999) states "the tender, caring touch, which *feels* what it touches with a reverence...gets in touch with a thing's essential nature" (p. 139). He also suggests that the grasp of technology, which includes the science of medicine and rehabilitation, is tactless if it is indiscriminate and does not reach into the essential nature of things.

Therapeutic tact not only creates and expresses the carer's connection to the other; it also supports the other to express aspects of his or her own most being-in-the-world. Jim captures this beautifully in a statement at the end of his story.

[We've got to be] allowed to shine, that is really important too. Got to learn to shine man, whether it be a smile from a person – if you are allowed to shine, you know the best thing about it is, the older you get the easier it becomes.

For Jim recovery is about being able to shine again, to have moments of grace and wholeness. This requires a reciprocal relationship; as the person whose life has unravelled needs to "learn to shine" again and in turn carers need be with the person in such a way that their presence allows him or her to shine. This requires an openness to dwell in ambiguity and vulnerability, otherwise particular passions, strengths, possibilities and uniqueness will be overlooked. The carer's belief about the other's capacity and potential to shine greatly influences the play-space. Too little or too much expectation in any particular play-space can reduce the room to move. Ultimately however, carers need to withdraw from the space, leaving room for free play and for the other to truly shine.

Summary

In the uncovering, recovering and discovering of everyday being there is no definite end point. One leaps from the known to the unknown, shifting from one particular mode or mood to the next in an ongoing process of being and becoming through doing. Supporting this process is not so much about problem solving to arrive at definite conclusions about the other's being-in-the-world. Rather, it involves providing opportunities and experiences and letting things 'play out' through a particular mode of engagement. Therapeutic tact is the art of getting-in-touch and making sense of what is present. Sometimes it requires taking hold of the situation but most often it means holding back. These processes are not achieved in a particular order, but happen simultaneously and are ongoing in the play of being together in a shared project.

CHAPTER ELEVEN

DISCUSSION

Introduction

The preceding findings chapters laid out the participants' experience of coming undone, followed by an un-covering, re-covering and discovering of their being-in-the-world. I have described the process of recovery as one that involves different modes of engagement in everyday life. In this chapter the discussion returns to the questions from which the study began and draws together what the stories show. The three main questions to be addressed are: What is the nature of doing in the participants' recovery stories? What have the stories shown us about the meaning of doing in recovery? What are the implications of that which has been disclosed? I will start with the first of these questions and turn to the nature of doing as a form of weaving.

Doing as the Weaving of Being-in-the-World

Re-fabricating one's life is obviously not a mechanical process, completed to some prescribed pattern; rather it is a handicraft, deeply embodied and responsive to one's living context. It is in the repetition of interaction that action fibres become activity threads and these threads bundle together as thicker role strands, which over time form the main structure in a coherent lifestyle. Weaving threads of activity involves the consistent and continual *gathering in* and *laying out* of being, and the nature of these movements is significant in understanding the meaning of doing in recovery.

The 'Gathering In' of Being

Through engagement in everyday living we open ourselves to being held by the world, and in doing so our being is 'gathered' and attuned in a particular way. The gathering in of being is experienced as a background and deeply embodied sense of how one is in relation to the world. Todres (2007) points to the many ways that being is gathered or collected when he refers to the body as a 'shepherd', one who gathers and tends:

The body is the 'shepherd' of participation; it is in a relationship of belonging to being-in-the-world. It is interwoven with many realms, the perceptual-textural, the languaged, the affective, the immediately responsive, the interpersonal, the temporal, and even the 'unsaid' interweaving all of this together. (p. 20)

The body knows far more about the world than we could ever consciously grasp, and through repeated engagement this often ‘unsaid’ knowledge is collected and re-collected. The movement of gathering brings together this bodily-knowing to reveal the nature of one’s present state-of-being. This process is ongoing and is very much dependant on mood. Moods always refer to the past and bring one *back to* one’s previous experience in the form of an attunement towards the world (Heidegger, 1927/1962). Gathering brings past and present together in such a way that it discloses what currently matters and opens or closes play-space. Our sense of being ‘held’ by the world is shaped by the way in which our dreams, passions, vulnerabilities, wounds, knowledge, capacities, skills and care are gathered together in doing. In non-doing, everyday things were disclosed as being of no concern, which left little room for doing in the world. Re-engagement required a change in attunement and the re-gathering of being towards something or someone of concern. In half-doing and engaged-doing the play-space expanded as the participants became attuned to concerns in the world-at-hand and then towards the everyday concerns of others. Absorbed-doing was characterised by a composed equanimity, which created expansive room for engagement. It was in the various modes of engagement that different ways of being in relation to the world were revealed for the participants.

The ‘Laying Out’ of Becoming

The reciprocal movement of weaving is the projection or laying out of one’s being into possibilities in the world-at-hand. By ‘throwing’ oneself into a particular situation or concern, one comes to understand what is available and the potential for becoming one way or another. Heidegger (1927/1962) indicates that fundamental understanding or ‘sight’ arises in the following ways of engagement:

...as the circumspection...of concern, as the considerateness...of solicitude, and as the sight which is directed upon being as such... The sight which is related primarily and on the whole to existence we call ‘transparency’.... We choose this term to designate ‘knowledge of the Self’. (p. 186)

Thus, understanding is projective in nature - it requires engaging in certain practices and dealing with things in the world-at-hand. Knowledge of the self is not “tracking down and inspecting a point called the ‘Self’” (Heidegger, 1962 p. 187), but rather it is formed through “acquaintance with the world” (p. 187). Through doing we reach out and take hold of our potential for becoming something or someone in particular. In the movement of laying out, we find ourselves, dispersed throughout our lived context, in things, other people and places, which can then be gathered in, as the weaving of being

and becoming continues. It is the constant movement of laying out and gathering in that creates play-space. The weaving determines the scope of one's concerns and the range and trajectory of one's projection into the world. As we have seen, opening play space requires being open to receiving and perceiving the world at the same time as responsively reaching out to take hold of possibilities. The to and fro of 'being held' and 'taking hold' is the ongoing weaving of occupation.

The 'Articulation' of Belonging

While the gathering in of being and the laying out of becoming clears play-space, the dynamics of the play are only made explicit in articulation. Articulation refers to the 'saying' of what is present, but it also highlights the relationship between things as joined together or 'articulated' (Heidegger, 1962). In the back and forth movement of doing, connections between one's embodied being and the world are expressed and strengthened. The discourse of being and world is not necessarily verbal; rather meaning is first made explicit through engagement with things or people for some purpose. The manner, content and outcome of one's activity can be seen as part of the discourse between being and world. Articulation is how meaning emerges, as one's *belonging* in a world of things, people and places makes itself known.

In everyday activity we engage with whole situations rather than an unrelated collection of entities. In familiar circumstances entities 'belong' together, and this belonging is implicit, but it is made explicit and articulated in dealing with the situation. Thus, the meaning of doing emerges in the interconnectedness of being-in-the-world. We can never be completely untangled, although this study shows how at times bindings do become strained or hang loosely. In their accounts, the more the participants engaged in a particular activity or situation the greater connection they experienced to what they were doing, and the meaning of the activity became more explicitly articulated. The significance and sense of connection in absorbed doing quickly became apparent in the participant descriptions, whereas in other modes meaning was not as easily articulated in the disrupted discourse between the participants and their immediate and wider social worlds. However, even in the difficult struggle of un-doing, non-doing and half-doing, important and unsaid aspects of the participants' being could be articulated if the play was maintained. The findings chapters suggest that the meaning of each mode of doing is to be found in the participants' connectedness. Belonging was uncovered, recovered and discovered in the form of care, active embodiment, being-with others and connection to the participants' own-most selves. Whyte (2001) stresses the significance of a sense of belonging in finding one's way home:

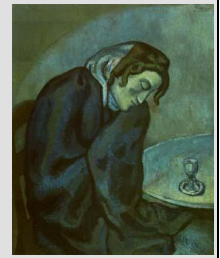
We are creatures of belonging, and out of this sense of belonging, the world seems to call to us, to recognize us, and to speak to us directly, the voice itself an embodiment of our particular nature and the way that nature finds a home in the world. (p. 65)

Repeated engagement in the world provides a sense of belonging as well as a sense of coherence in one's overall patterns of being and becoming. The findings of this study suggest that the significance of doing in recovery lies in the fact that it provides the ongoing content and process through which being-in-the-world is gathered, laid out and expressed. The rhythm and intensity of this weaving is important because "it is the motion that animates and shapes our form of life" (Moyle, 2005, p. 131).

With this understanding established, the various modes described in the findings chapters will now be briefly summarised. In order to bring together and make sense of the different modes of doing, the findings of this study have been captured in a poem. For Heidegger poetry is authentic language, which gathers thinking together and reveals meaning in a way that everyday language cannot: "The voice of thought must be poetic because poetry is the saying of truth, the saying of the unconcealedness of beings" (as cited in Hofstadter, 1971/1975, p. 10). The poem presented is entitled "A Series of Letters to the Everyday World" and each 'letter' shows something of a particular mode of doing.

The Meaning of Undoing

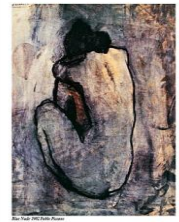
Dear world,
We have drifted apart and I am leaving you
I hung on for dear life but your soft warm embrace has turned cold
It is time to let go; enough talk, enough fighting
I can hardly look back at you -straining and shouting
You have become ugly in the struggle
Oh to be free of your clammy hold, pulling me this way and that



Mental illness involves a painful unravelling of one's usual relationship with the everyday world. In undoing, the participants' struggled to hold onto their everyday worlds and at the same time these worlds could no longer engage or 'hold them' either. When the free-play between the participants' embodied being and world broke down, their routine activity unravelled and the freedom to interact with people and things was severely diminished. Extreme disintegration of activity inevitably results in a disorder of experience and a loss of everyday meaning, as the usual sense of things cannot be articulated. Essentially, this is the loss of freedom that Heidegger (1987/2001) points to as being at the core of mental illness; the loss of capacity to move in and out of different modes of being through active engagement in the world. Most humans experience a breakdown in the flow of embodied being at some stage in their lives. Undoing is commonly experienced in a variety of illnesses, losses and traumas. However, it is the extreme nature of the unravelling and the risk of being disconnected in particular modes for extended periods of time that characterises the experience of severe mental illness. Several participants described a keen awareness of their potential for becoming undone in the future. It would seem that through experience they recognise that there is no absolute stability in any one lifestyle and that it is important to be alert to the signs of undoing as early as possible. Preventing one's lifestyle from unravelling requires not only vigilance for signs of undoing but also the careful maintenance of key activities and roles. This involves using different strategies to keep the threads going, or sometimes deliberately withdrawing from everyday doing altogether. Existentially, the paradox of undoing is that the loss of free engagement with the everyday world is freeing in itself, as one is relieved from the obligations of being in a committed relationship with a particular world.

The Meaning of Non-doing

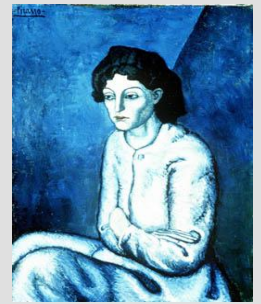
Dear world,
Obviously I mean nothing to you – your complete silence hurts me
Not once have you called
I am left waiting; not knowing, blaming myself, guilty as hell, all alone
I am unrecognisable to myself
Going over and over things in my head
wondering what I did wrong, hating you, and hating me
Sometimes I think I miss you, and long for you to hold me again...



In the non-doing mode the participants were brought face to face with the possibility of never being held by the world again. They were left suspended, caught between empty detachment and a sharp sensitivity to reminders of the everyday world. However, non-doing can also be a space of true asylum by providing protection from the harshness of the world. It is a place of pre-occupation, where one can dwell on things without engagement. The word ‘asylum’ comes from the Greek ‘asylon’ meaning a refuge where one cannot be seized. If occupation is understood as seizing and being seized by the world, then asylum is a space where one cannot be held, that is, free from everyday occupation. In this removed space, everyday being and becoming lose significance. However, the distance provides the possibility of getting in touch with fundamental being and becoming in the form of care and hope. Reducing everyday expectations and commitments is obviously essential for clearing and maintaining safe asylum. Clearing too much time and space from things and others can leave the person feeling abandoned and helpless, but as we have seen, even the smallest expectations and commitments can weigh heavily and close the play space. Perhaps rather than a complete severing of all bindings, what is needed is an explicit re-negotiation of some key commitments. By holding on to even one commitment with a partner, friend, therapist or a particular cause, the non-doing person maintains a vital binding to the everyday world. Getting in touch with and holding onto what matters most, allows the non-doing person to find some essential ground to stand on. Hope is found in the possibility of caring for and committing to something and this points one’s being back toward the everyday world.

The Meaning of Half-Doing

Dear world,
In my darkness I have come to see that I do care about you
It is time you and I were reacquainted
I need to touch and be touched by you
But there are deep wounds between us, so we must take things
slowly
P.S. Call me...



Several of the participants described a turning point when, in the depth of their despair, they saw that there was something about the everyday world that was worth living for. This call to care provides something to hold onto in the struggle for re-engagement. The wounds and vulnerability of the person moving from non-doing to half-doing are important in keeping him or her attuned to what really matters. The participants had to maintain a very narrow focus in their relationship with the everyday world and only gave attention to those things that were closest at-hand and most clearly called for concern. What is important here is the renewed sense of becoming, achieved through making commitments to things and people in the immediate world.

Dear world,

Thank God you called – I thought you never would
When we meet I need you to walk gently with me, not too fast
We need to feel our way into things, find our feet again
By the way, I've changed - I hope you still recognise me...



Renewing one's involvement with the everyday world in half-doing is akin to re-treading previously worn paths. Involvement with familiar things, people and places was important in drawing the participants out of their detachment. While non-doing can be a space of asylum, half-doing is ideally a space of respite where the person gradually gets-back-in-touch with the everyday world. By plodding and lingering, the participants were able to re-collect aspects of the everyday world as well as their own being. This requires an allowance of time and space for exploration, repetition and a gathering in of being. Half-doing is not a full commitment to the entanglement of the everyday world, but a cautious return to the affectedness and possibilities of being involved. The opening up of space for basic interaction is more important in half-doing than having a clear direction for that action to take. If one is to recall the possibilities of being and becoming in the everyday world as an active and expressive agent then both freedom and structure are important factors for maintaining the play-space. Others in the everyday world need to be sensitive to the potential respite of the half-doing space and provide the right balance of obligation and leeway. There is risk in half-doing. If one reaches out to the everyday world and fails to be held in any meaningful way, then one is left to slip back into the estrangement of non-doing. Re-engagement in the immediate world can distract one's focus from a painful past, but perhaps more importantly it also creates the possibility of seeing both the past and future in a different light. In the simple engagement and active embodiment of half-doing, a sense of belonging in an immediate world can be recovered and articulated.

The Meaning of Engaged-Doing

Dear world,
The other day was just like old times
When we held each other it was as though we'd never been apart
We must plan our days and weeks, organise our schedules,
make the most of every minute!
We belong together you and I ... but I'm terrified of losing you



Full engagement with the everyday world is a coming home of sorts, in that it is a return to the comfort and stability of being held in a shared embrace. The everyday is 'normal' in its familiarity and ordinariness. However, putting oneself into the hands of the world also involves negotiating uncertainty and tremendous risk, as the everyday world can be overbearing and judgemental. In engaged-doing the participants grappled with self-doubt, stigma, and the fear of not living up to expectations. Getting wrapped up in this world requires a leap of faith; that is, faith in one's own capacity for involvement and faith in the fundamental goodness of the immediate and social worlds. It means getting down to the business of having direction, increasing commitments, clarifying and meeting expectations, synchronising with others' time and space, and recollecting the 'how to' of being part of something shared. This may involve playing everyday roles and pretending until the roles come more naturally and in turn begin to play one's embodied being. In the rekindling of a relationship between one's self and the everyday world, acting 'as if' one has the required skills and knowledge clears space for repetition and recollection of being-with-others. However, equally important is that the everyday world allows leeway for repeated interaction and re-collection of being together. In this way one's embodied 'social senses' and skilful comportment can be retrieved and further developed. Possibilities open up through everyday engagement, which can provide a stronger sense of becoming someone in particular. Commitment to the everyday world of others 'ties one in' or obliges one to act in certain ways, but it also allows a sense of belonging in a world of others and the articulation of a social identity. However, like the renewal of any intimate relationship it is necessary to avoid becoming entangled and losing sight of one's self in a flurry of busy activity. Entanglement can be a way of forgetting one's vulnerability, rather than acknowledging it and using it to project into one's own way of being.

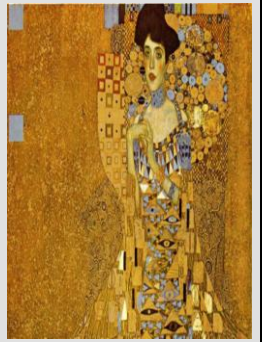
The Meaning of Absorbed-Doing

Dear world,

I cannot believe how in love we are - you are amazing!

I lose myself in your presence, time and space just disappear

With you, I remember who I am.



When one becomes intertwined with the everyday world, with its shared structure of roles and routines, it seems important to also keep a firm handle on one's own way of being. Whyte (2001) suggests that the strongest bindings and sense of meaning comes from "paying close attention to an astonishing world and the way each of us is made differently and uniquely for that world" (p. 6). Key questions addressed in the absorbed mode are: What way of being is most meaningful to me? And, how does my unique way of being, belong in the everyday world? These questions are answered through finding one's element in the midst of the wider world and 'accomplishing' one's self. Because of our incompleteness we come to understand being-in-the-world indirectly and imperfectly through the constant play of embodied being and world. In the play of absorbed doing, the participants experienced moments of being 'right' with the world, where their embodied being and world came together as a perfect fit. A form of transcendence through engagement was achieved, as everyday time and space disappeared and they lost themselves in an available world. This total embrace of being-in-the-world cannot last forever; it may play out in an hour, or across a whole day, but eventually the ordinary demands of everyday existence call. In this mode, uncertainty is managed with composure as one is held and taken hold of, in a flow of being and becoming. While the mode is inevitably interrupted by routine demands, the powerful sense of connectedness and belonging associated with it remains; retained as a residue of experience to be re-collected and strengthened through future engagement. When actions are consistently repeated in this form of engagement robust bindings are created between one's unique being and a larger whole, allowing the taking hold of an authentic but often fleeting sense of surety and coherence.

Opening the Conversation to Other Literature

The stories and subsequent analysis in this study show how recovery can be seen as a gathering-in and laying-out of everyday being-in-the-world through ongoing active engagement. This perspective is both phenomenological and occupational in that it focuses on the lived experience of doing in day- to- day life. The following discussion considers how the findings might contribute to current dialogue within the recovery and occupational science/therapy literature. The focus is on the transactional, integrative and grounding nature of doing in the recovery process.

Recovery Occurs in the Transaction of Doing

A growing focus in recent literature is the notion that recovery occurs as an ongoing transactional process between a person and his or her world (Borg & Davidson, 2008; Davidson, 2007; Davidson & Shahar, 2007; Mancini, Hardiman, & Lawson, 2005; Onken et al., 2007). The significance of this understanding lies in the recognition that recovery is not borne in the person or in the world, but in the interplay. Past phenomenological and psychodynamic analysis has focused on the impaired transactions of mental disorder, but very little has focused on the day- to- day transactions of recovery itself (Davidson, 2003; Rulf, 2003). More recent literature highlights the everydayness of recovery and the fact that the transaction is shaped by the form, function and meaning of routine activity (Borg & Davidson, 2008; Leufstadius et al., 2008). Davidson and Roe (2007) capture this notion in the following passage:

Recovery in mental illness is made up of the same innumerable small acts of living we all enjoy; these strategies focus on activities like walking a dog, playing with a child, sharing a meal with a friend, listening to music, or washing dishes. Such interventions aim to enhance the person's pleasure and competence in everyday life activities as much as managing illness and remediating deficits – and this because *health is not promoted by reducing disease alone, just as life cannot be lived solely by minimising dysfunction*. (pp. 466, emphasis in original work)

Thus, recovery occurs in the struggle and accomplishment of day- to- day living. The ongoing recovery of 'normal' life is an incremental process that is often overlooked or underestimated by others, but *not* by the person whose life has unravelled (Borg & Davidson, 2008; Davidson, 2007). Mental health professionals need to keep this in mind and support ordinary activity, with ordinary people in ordinary places (Borg & Davidson, 2008). Davidson and Shahar (2007) raise the issue of how we understand the ideal or even 'normal' states of human experience that we attempt to open people up to, and point to an ideal state of active and productive creativity. This thesis adds to this

conversation by providing descriptions of distinct forms of transaction that occur in different modes of doing, including the ordinariness of engaged doing and the ideal of absorbed doing. It also shows that when one's doing and being do not fit with those in the everyday world, a negotiation of uncharted spaces is required through engagement in the world at hand. The descriptions of non-doing and half-doing experiences align with other discussions that show how alternative forms of relating to the world can be useful for coping and revealing aspects of being (Corin, 1998; Frese, 1997; Gould et al., 2005; Roe et al., 2004). For instance, Roe et al. (2004) found that people in recovery actively regulate their involvement in the world and provide accounts that align with the notion of half-doing: "I have been doing things slowly. I take my time, I do not rush like I used to" and "there is only so much I can handle...to really take control over my life, I have to take one step at a time" (p. 124). This thesis calls attention to significant elements of the transaction between person and world, including choices made, opportunities taken, and leaps of faith into the everyday. It also highlights the need for care and commitment to people and things, for struggle and repetition, and for the order and rhythm that comes through the consistent weaving of doing. Of equal importance in the interplay is the way in which others commit to, hope for, expect from, and make room for the person who is finding his or her feet in the ordinary world.

Recovery Occurs in the Integration of Doing

Doing is not only transactional in nature, it is also integrating. As we have seen, belonging is articulated in day-to-day activities as a sense of connectedness – within one's self and to others. Onken et al. (2007) state that in recovery "integration is necessary - both of the psychiatric disability into a sense of self and of the individual into a welcoming community" (p. 17). If a particular project or situation holds one's being, then one's thoughts, feelings, physical body, memories and hopes are gathered together in it. Additionally, the literature has shown that social integration and a sense of spiritual wholeness occur through regular meaningful activity (Spaniol et al., 2003; Yilmaz, 2008). However, while integration is necessary, it is never complete for any human being (Todres, 2007) and the accounts in this thesis mirror descriptions in the existing literature of recovery being heterogeneous and often ongoing in nature (Carpenter & Kirkpatrick, 2005; Davidson & Roe, 2007). The modes of doing described in the findings were not experienced by the participants as set stages in a unidirectional progression; rather they were ways of relating to the world that fluctuated over time. None of the participants seemed to see themselves as completely cured or symptom free forever and they were conscious of living in a way that prevented further undoing.

The notion that recovery involves weaving together a lifestyle that fits one's own way of being, at the same time as fitting in with others, seems to be supported by the alignment of recovery and occupational science research. Recently Matsuka and Christiansen (2008) proposed that lifestyle balance is associated with patterns of activity that enable people to: 1) meet basic biological health and safety needs, 2) support rewarding, self-affirming social relationships, 3) feel engaged, challenged and competent, 4) create meaning and a positive personal identity, and 5) organise time and energy in such a way that personal goals and renewal can be achieved. Interestingly, in the recovery literature Onken et al. (2007) list cornerstones of the recovery process as hope, self-determination, agency, meaning/purpose, awareness/potentiality as well as interaction with others. These cornerstones align very closely with the proposed dimensions of lifestyle balance above, and suggest that developing a more balanced and coherent lifestyle is at the heart of recovery. A focus on any one of the bio-psycho-social-spiritual elements of recovery is not enough; what is important is how these dimensions are woven together in a meaningful and engaging life. Pentland and McColl (2008) suggest that the integrity of one's life is not so much related to life-balance, but to the fit of one's lifestyle in relation to "personal values, strengths and attribution of meaning" (p. 136). A return to older literature reveals that this is not a new idea. Dr Casson, an early proponent of occupational therapy, stated her desire to establish a psychiatric treatment centre where; "Each patient's daily life would be so planned that it fitted the individual's need like a well-tailored garment" (as cited in Owens, 1955, p. 95). However, what is required now is a better understanding of how a fitting lifestyle is crafted within the fast paced context of modern society.

Recovery Occurs in the Ground of Doing

In addition to being transactional and integrating, this thesis shows that doing is the ground in which meaning is made. Wilcock (2006) associated the meaning of doing with the existential elements of 'being' and 'becoming'. However, there appear to be only limited research directly exploring how these elements relate to the experience of doing for people recovering from mental illness. Gewurtz and Kirsh (2007) described how a cycle of doing and becoming assisted people in recovery to understand their potential for being a worker. Another example is Berjerholm and Eklund's (2006; 2007) study, which found that all levels of engagement had an associated rhythm and sense of meaning. They concluded that high levels of engagement should not be the only goal for people in recovery, but activity that facilitates self-definition and corresponds to the internal needs of being is equally important. Rebeiro (2001; Rebeiro & Cook, 1999)

explored the process of engagement in group occupations for people with mental illness. The findings highlighted the significance of the social environment in affirming being, and creating opportunities for becoming and belonging.

Corin (1998) found that the way people with schizophrenia interpret the meaning of their engagement had a significant impact on their recovery. In her study, participants who had a high commitment to being 'normal' and interpreted modes of limited engagement as a state of exclusion and inadequacy, needed frequent hospitalisation. Participants who placed less value on normal ways of being, and saw withdrawal as a positive form of coping, had much lower rates of hospitalisation. The above studies support the view that meaning is made in the play of particular modes and it is the individual's attunement and understanding within the mode that lays a foundation for the articulation of meaning.

In light of Corin's (1998) findings, the meaning attached to average or normal forms of engagement appears to be important. Normal life can provide a ground of interesting possibilities or it can be alienating and lead to a loss of integration for the person (Bryant, 2008). It seems the desire and commitment to fit in through ordinary engagement is something to be supported, but encouraging reflection on the value and meaning of all forms of engagement could also be significant. Gergen (as cited in Fredriksson & Lindstrom, 2002) points out that in everyday modern society, we prefer a progressive plot where existential problems of personal significance are solved at the end. The risk of this is that we overlook or even silence narratives that do not fit into mainstream ways of being-in-the-world. The findings in this thesis show that other modes of doing outside of the everyday create space for getting in touch with care and re-collecting one's essential relationship with the world-at-hand. This analysis adds to recent dialogue in occupational therapy literature which highlights the need to move beyond a focus on typical occupational performance towards understanding the particular meaning that is made in the complexity and variability of different forms of engagement (Doble & Santha, 2008; Townsend & Polatajko, 2007). The value of creative and playful forms of engagement has been recognised in therapeutic settings (Griffiths & Corr, 2007). Broadening the range of opportunities created and skills taught in community based practice might help these forms of doing to be woven into daily life to complement more routine and structured occupations.

To different extents and in different ways, the participants in this study found meaning and celebrated a new found sense of being, becoming and belonging in relation to the

everyday world. No one perspective, including the view described in this study will adequately capture the process and experience of recovery from mental illness. There will always be more than any one person or approach can say. However, what this study does add to the current dialogue is some further insights about the experience of different modes of doing and the way in which meaning is made in the transaction of embodied involvement in the world.

Implications for Mental Health Practice

How recovery is conceptualised matters, because it determines the focus of recovery-oriented policy, funding and services (Ware et al., 2007). A view of recovery that focuses on the ongoing interaction between the person and his or her context, calls for services that can deal with complexity and variability and practitioners that can work with individuals as well as their socio-cultural, institutional, political and physical environments. While diagnostic categories and standardised processes in mental health practice have their purposes, it has been argued that many fail to acknowledge and utilise the lived experience and its underlying meaning for the person involved (Flannagan, Davidson & Strauss, 2007). This is not only an issue for the field of psychiatry, but for all mental health professionals, including psychologists and occupational therapists, if they reduce whole embodied and contextualised experience to ‘objective’ categories of impairment or dysfunction.

The modes of doing described in this thesis are not designed to be categories of experience for use in the diagnosis of function or impairment. Rather, they show how different forms of doing have a particular attunement and meaning, pointing to the need for consideration of the person’s lived experience and interpretation of their engagement. The analysis of the modes highlights possible influences and potential dynamics along a continuum of experience. They provide carers with an understanding of what to be aware of when supporting people’s re-engagement in the everyday world.

Enabling the Play of Doing

The main task of enablement is to create space for the play of doing, that is, to open the interplay of being and world. This requires inviting involvement in the world through opportunities for consistent engagement in supportive environments, as well as providing new experiences. All lived spaces have possibility and we need to be ready to play in and with them. In psychotherapeutic relationships the lived space between patient and therapist is seen as ‘potential space’ for play and growth (Charles, 2004). In occupation based practice the potential space lies in the interaction of the person, the

social and physical environment and the form of the occupation (see Figure 1). Thus, ordinary engagement in activity can be seen as potential ‘therapeutic’ play-space. In fact everyday life itself is a play-space in its boundedness and variability, and research suggests that this is where the bulk of healing work takes place (Lambert & Hill, 1994).

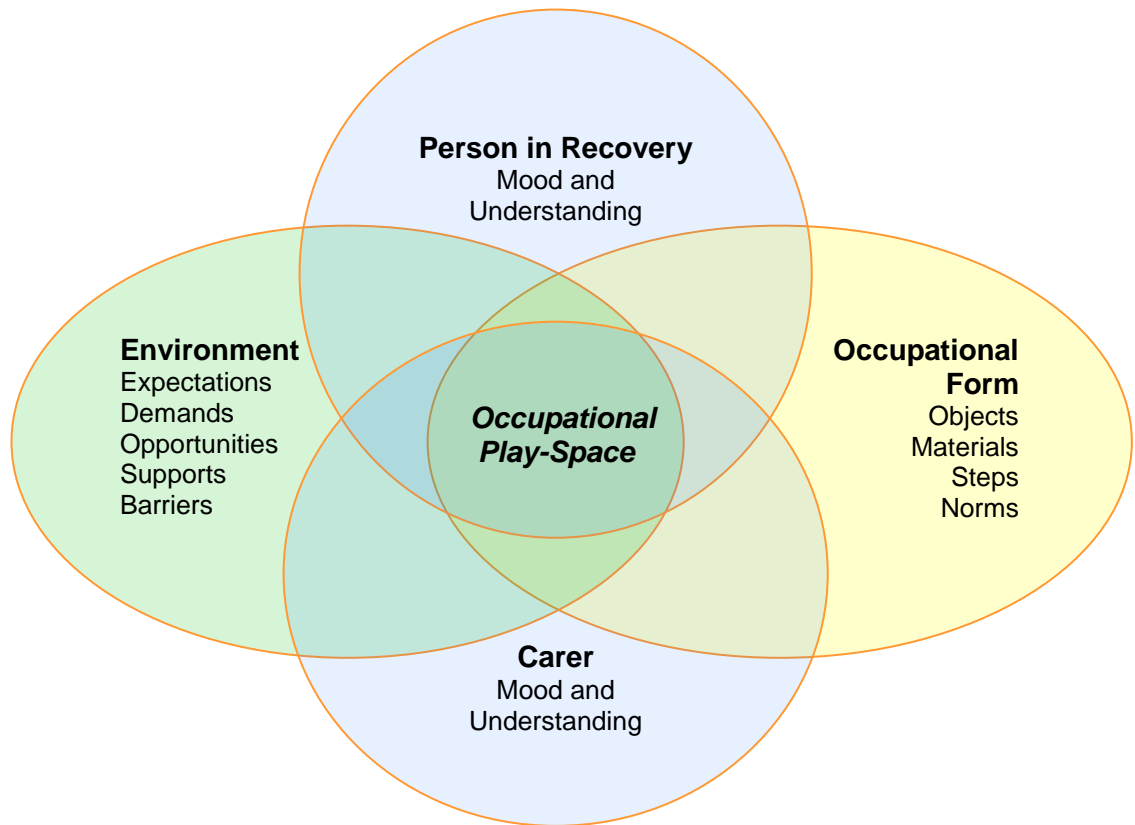


Figure 1. The intersection of people, occupation and environment as potential play-space

What is required from carers is an understanding of the dynamics at play in the space. As shown in Chapter 10, a skilled carer or therapist can enter the space as part of the social environment and influence the play through their presence and understanding. In a reversal of cognitive-behavioural therapy, engagement in activity is paramount and the reflection and examination of thoughts and feelings about experiences is the ‘homework’ that consolidates learning. In some ways, an interest in the dynamics of doing is a return to past occupational therapy practice which focused on the interpretation of meaning from a psychodynamic perspective. However, what is different in *occupational* dynamics is a focus on the person’s own interpretation of meaning as disclosed through engagement in everyday occupations. Past practice often utilised prescribed activities in the assessment and treatment of psychosocial impairment, rather than exploring the experience, personal meaning and possibilities of ordinary occupation in home and community life. Focusing on the play of doing in day-

to- day life opens carers up to the dynamics of occupation, and as we have seen it is in this interaction that different aspects of being, becoming and belonging are revealed. Developing awareness of one's doing and the patterns within it can alter the experience and meaning of engagement. Supporting others to reflect on and make sense of their mode of doing is critical in opening the play-space. This thesis highlights a number of fundamental dynamics that are worth being mindful of in the play of doing.

The weaving of doing is shaped by care

The motivation, passion, desire, direction and meaning of doing are all shaped by the dynamics of care. What we care about largely determines the overall design and coherence of our lives. Because care is revealed through mood or one's sense of being, carers need to firstly take note of what the other is attuned to. What calls for concern in the world 'out there'? Creating opportunities for the re-collection, reflection on and enactment of care in everyday lives is an essential part of supporting recovery. People retrieve what matters to them through engagement with familiar places, people and objects that hold their 'knowledge'. In this process, who the activity is done with or for and the embodied experience of engagement may be just as important as the actual performance or outcome.

The weaving of doing creates bindings

The dynamics of commitment are also significant in the play of doing. Through committing themselves to situations, routines and roles, the participants came to better understand the presence of possibilities in the everyday world. When strengthened over time, these bindings provided structure and stability in the participants' lifestyles. This highlights the significance of supporting others to make commitments, understand and negotiate expectations, and develop the skills required for engagement in particular roles and projects. Attuning to people's sense of possibility and inviting engagement that calls for their strengths and interests can also assist in forming commitments to particular ways of being. Additionally, carers may need to support a balance of commitments to create a fitting lifestyle. This might involve monitoring expectations, structuring time and place, and loosening some bindings when necessary.

The weaving of doing involves repetition

Repetition is central to the play of doing. Weaving requires repeated transactions over time, allowing the recollection and consolidation of being-in-the-world. Repeated engagement gradually altered the participants' lived space; it broadened their concerns

and pushed the bounds of possibility outward. It is important to note that even in repetition every moment of occupation is unique. Although experiences are recollected and recycled, and actions may be habitual, the person has not been *here* before, in this situation at this time. The understanding gained and meaning created in a particular moment of doing may be quite different from previous experiences. It is also important to recognise that the weaving of a lifestyle is cumulative. Seemingly minor and ordinary activities, experiences, comments, invitations, steps and commitments can have a powerful flow on effect, whereby vibrations are felt over progressive days, weeks and years. Turning points occur because of the accumulation of experience. Carers should not underestimate the potential of ordinary, routine interactions to provide the foundations for significant transformation.

The weaving of doing creates rhythm and intensity

The rhythm and intensity of doing are also significant to the dynamics. Once people are called to engage, it is the rhythm and intensity of the activity that holds them there. The participants described how each mode of doing had its own rhythm and level of intensity, so carers need to be aware of what speed and level of attention individuals are experiencing. Generally speaking, it seems that the greater the level of absorption in activity, the faster the tempo and flow. If the rhythm and intensity required in a situation is too high or too low for the individual, then the play of doing will close down. Sometimes leaps of faith are required to alter patterns of doing. At times people may need support to engage differently in the world by opening themselves to situations that require a different intensity and have a different rhythm. For instance, it may be a matter of getting out of bed to go to the shops, attending a therapeutic group, or applying for a new job. If the leap is not too great then the rhythm and intensity of the new situation will draw the person in and alter their mood and mode of being. This thesis points to the value of being alongside people in whatever mode of engagement they are in. Carers can help to draw people into activity, hold their attention and maintain the rhythm of doing through encouragement and orienting. Adapting the content or context of doing is critical in creating cues for action and for holding intensity for increasing periods of time.

The weaving of doing evolves and unfolds over time

The findings indicated that despite the participants' best laid plans, their lifestyles evolved with each day and week. The handicraft of weaving everyday life takes time and calls for persistence and resilience. This requires carers to be consistent in their

support and dwell with the other across time. Carers also need to be comfortable with the indirectness of change and the notion that lasting change occurs through the play of instability and stability. As discussed previously, occupational vulnerabilities call attention to significant issues that needs tending to – a passion unfulfilled, potential untapped, a dream lost sight of or an important commitment to someone or something. It is the imperfections, the tears and repairs that give a handcrafted garment its uniqueness. Supporting the re-fabrication of a fitting lifestyle cannot be achieved through standardised assessment, a checklist or a predetermined plan. It requires being-with and alongside the other in whatever mode he or she is in and being open to what is ‘said’ in the play of engagement. Noting and pointing out progress, encouraging reflection and celebrating accomplishment are all important aspects of enabling the unfolding of a fitting lifestyle.

Creating Supportive Services and Communities

Shaped by the influence of technology, science and economics, modern society values efficiency and we are drawn to linear processes where change is direct. While these are important characteristics in some contexts, the healing of recovery sometimes requires a hunkering down, the re-treading of previously worn paths and the tarrying contemplation of new ones. If the unravelling of one’s lifestyle is seen as a disorder of embodied experience and meaning, then services need to provide solutions of embodied experience in which order and meaning can be gradually recovered. Enabling engagement requires working with the social and physical environment just as much as it involves supporting an individual. To successfully open up play-space, carers need to understand how the context, form and function of engagement impacts the individual’s experience.

The findings in this study indicate that people dwell in a range of lived spaces throughout their recovery. This suggests that mental health services need to provide a variety of settings in which people can engage or disengage as required. Ideally, services could also support family, friends, employers and other social supports to create home, work and social environments that are responsive to the person’s lived experience. Withdrawing from the world at home or in hospital settings can either be alienating, making the non-doing person feel even less at home, or stable and safe from the everyday public world. Creating spaces for asylum requires families, friends, partners and hospital staff to understand the play of non-doing. Environments with the quality of true asylum are comfortable places for resting, where people who know and

care for the person are present but allow leeway for getting in touch with 'being'. Expectations need to be re-negotiated and responsibilities for everyday concerns taken off the person's hands. However, to keep the possibility of care alive having access to significant people and objects is also critical. People in non-doing may also need support to make sense of their undoing and to get in touch with care and hope.

People who are half-engaged in the everyday world often need support to manage the demands of everyday life either in their own home or in supported settings. Spaces for respite should allow freedom to set one's own pace and choose one's own way of engaging in the immediate world. Freedom from everyday commitments allows the half-engaged person to linger with what is immediately present. Time and space can be structured to provide leeway for the exploration of possibilities while calling for some commitment, to provide stability. Building up shared experiences with others in half-doing can inspire hope and open up a sense of possibility. In some hospital settings a one size fits all 'gown' of prescribed activities and routines covers the self up as a temporary measure. However, restricted opportunities to choose and explore different activities may mean that individuals cannot access places and things that hold 'their knowledge' and call them out into the world. Participants expressed the value of day centres where they could go and 'plod' without the judgement or pressure of being with people in everyday ways. While freedom and space are important in tarrying, the accounts also indicate that too much leeway results in a painful estrangement and that the type and amount of structure required is not static. Contexts need to be as responsive as possible to the changing need for freedom and obligation over time.

Occupationally based practice must ultimately be embedded in and towards the everyday world. It is the day- to- day world of others that provides the foundation for participation, for feedback, for belonging and identity. If one can resist the pull for sameness, the public world also holds possibilities in which one's unique way of being can be discovered. Often people are discharged from the structure of the hospital into the public world of everyday time and space with little preparation or support for adjustment. Clients may still feel exposed and vulnerable in the everyday world, so the provision of supportive spaces for engagement is vital. Workplaces and other arenas of public life are enabling if they provide choice, accommodate difference through flexible options and allow for the gradual re-collection of shared occupation with others. The absence of supportive environments leads people to remain withdrawn from the threats of everyday life and in a state of non-doing or plodding within their own home. So

many mental health services focus on dealing with the unravelling of people's lives rather than the re-fabrication. However, it seems that continued unravelling would be far less likely if more time and resources were spent on building strong relationships between people in recovery and their communities, using the medium of regular meaningful activities. There is huge scope in primary mental health care for assisting people to access meaningful social, creative and physical occupations in order to maintain a balanced and well-fitting lifestyle.

Implications for Mental Health Education and Research

This study offers a 'fresh' understanding of mental illness and recovery in its combination of phenomenology and an occupational perspective. The use of metaphor also brings a novel approach to the conceptualisation of recovery. People with no experience of mental illness may have difficulty imagining what it is to have a 'brain disease' but perhaps they could relate more to the notion of falling apart, unravelling or being numb to the world. The research findings will be useful in teaching occupational therapy students as well as other carers about the experience of being in various modes of doing. Introducing the philosophy of phenomenology in occupational therapy education and ongoing professional development is recommended, as understanding lived experience is at the heart of working with occupational dynamics in a responsive and holistic manner (Turpin, 2007). One of the most common frustrations of caregivers seems to be the difficulty they have in helping people to engage in the world. An awareness that different modes of doing have meaning and therefore some value, may help carers work with people who are disengaged more tactfully. Understanding the various dynamics outlined in this thesis provides a foundation for supporting people to gradually re-engage in everyday life. It also encourages a focus on the meaning and process of engagement as much as the content and performance.

The findings also highlight the significance of therapeutic tact. While strategies for attending, empathic listening and responding are taught in classrooms, therapeutic tact cannot be imparted through text books or role plays. Presence and understanding can be discussed and shown through stories and exemplars, but because tact is an embodied knowing, students need the experience of being-with others in various modes of doing. Opportunities to engage in shared tasks and projects with people in recovery may allow students to develop a 'feel' for what forms of support are needed and when and how to provide it. This experience must be accompanied by reflection, ideally with the person being supported as well as experienced practitioners.

This study also has relevance to the broader field of occupational science which is concerned with the meaning of doing for human beings in general. The findings add to the ongoing discussions related to the significance of occupation in achieving a sense of identity, well-being, life balance and coherence. Because the study examines the meaning of doing in relation to fundamental being-in-the-world, many of the conclusions relating to the unravelling and weaving of activity could be explored in relation to people who have experienced other forms of undoing. Of particular interest for further research is how being, becoming and belonging are experienced in specific situations and at various levels of engagement. Further research and exploration of different ways of being or modes of engagement in the world is essential to deepening our understanding of occupation as process and state of being.

Another relatively untapped area of research is the exploration of how different forms of doing can be utilised to influence brain functioning for people in recovery. Psychiatry has focused on how disordered neurobiology affects everyday functioning. However, if the dynamic interplay of person and world is recognised, then the impact of regular everyday activity on neurobiology should also be of great interest. The potential of some forms of activity for assisting depression has been demonstrated through imaging techniques and analysis of cerebrospinal fluid (Gutman & Biel, 2001), but there is scope for further exploring how different forms and modes of activity have an effect on neurotransmitter levels and brain functioning. This type of scientific evidence would add weight to the use of everyday activities as a therapeutic medium in mental health practice.

Further research exploring the strategies and enablers that people in recovery use to achieve a sense of balance in their everyday engagement would add to current understandings. Additionally, exploring current mental health practice in relation to the facilitation of day- to- day engagement would be valuable. For example, how do staff in acute hospital services understand and support people in non-doing modes? How is the social and physical environment in existing respite services structured to support leeway and tarrying? How much do vocational, educational and residential services explore and work with the individual dynamics of the person in relation to his or her specific context? This research would highlight if or how people's lived experience is taken into account and used to guide practice. It would also show the potential for providing more responsive services. Exploring the notion of therapeutic tact with clinicians, family members and other carers may also be of value. Focus groups of clinicians and families,

along with in-depth narratives would elicit valuable information and examples of tactful caring. Of particular interest would be an exploration of the factors and processes that contribute to people's development, including the dynamics of turning points and leaps of faith.

Limitations of the Study

The aim of phenomenological research is not to produce objective results that can be directly generalised to other situations, but to open up thinking and shed light on specific aspects of lived experience. This study reflects the stories of 13 people and shows phenomena that *may* be experienced by other people in recovery. It points to possible dynamics and meanings to be aware of and cannot be translated to others with the certainty of science. Inevitably there are stories and voices from people in different age groups, cultures and socioeconomic groups that are not reflected in the findings. There are also people with other forms of mental health problems that are not represented in the study. In purposively selecting participants I was initially unsure whether I needed to focus on the experiences of people in one diagnostic category. It could be argued that people with different disorders would have quite different experiences of engagement and recovery. However, I would suggest that the aspects of being-in-the-world shown in this study are fundamentals of the recovery experience and relate to people with a wide range of disorders, rather than a specific set of symptoms. In focusing on doing in recovery, there are also other stories from the participants themselves that were not included. These accounts showed other aspects of the recovery experience, such as medical treatment, so the findings could never show the whole picture of recovery.

Conclusions

This study began with the fundamental question of: What is the meaning of doing for people in recovery from mental illness? The subsequent findings suggest that the answer to this question lies in two parts. The first is that doing, to a large extent, is the *medium* by which the participants recovered their sense of being-in-the-world. This finding points to the significance of doing as a transactional process. Each mode of doing described in this study had its own form of lived space, time, body and relationship with others, resulting in a particular dynamic and sense of meaning. The significance of mood and understanding and other factors such as care, commitment, repetition, and rhythm have been shown in this study. My depth of understanding related to the experience of different forms of doing has increased immeasurably

through engaging in this research. However, we need to continue to explore the factors affecting the play of being and becoming through doing.

The second aspect to the answer is that doing was a desirable and meaningful *outcome* of recovery for the participants. This finding highlights the meaning of doing as an integration and expression of being and becoming. A connectedness or ‘feeling right’ was articulated within specific occupations, roles, and routines, but also in particular styles of engagement. In so many ways we become what we do; neurologically, affectively, physically, socially and spiritually, and perhaps most importantly we can both lose and discover ourselves in our everyday activities. Consistently doing things with and for others, and in our own way, is how we achieve a sense of balance, coherence, connection and belonging in life.

The participant stories suggest that it pays to be mindful of our habitual patterns of activity, as they not only form the structure of our lives in an objective sense, but form the structure of our embodied being-in-the-world in a lived sense. Every moment and mode of occupation has the potential to uncover what we care about and the significance of our being-in-the-world. It is in the ongoing flow of doing that one’s life is gathered in and laid out as something in particular. Moore (1996) suggests that we truly inhabit a place when we “give something to it and when we open ourselves to receive what it has to offer” (p. 78). Through the giving and receiving of doing, the participants in this study re-inhabited their bodies, became habituated to the everyday world, and recollected a way of being-at-home-in-the-world.

A Series of Letters to the Everyday World

Dear world,
We have drifted apart and I am leaving you
I hung on for dear life but your soft warm embrace has turned cold
It is time to let go; enough talk, enough fighting
I can hardly look back at you -straining and shouting
You have become ugly in the struggle
Oh to be free of your clammy hold, pulling me this way and that

Dear world,
Obviously I mean nothing to you – your complete silence hurts me
Not once have you called
I am left waiting; not knowing, blaming myself, guilty as hell, all alone
I am unrecognisable to myself
Going over and over things in my head
wondering what I did wrong, hating you, and hating me
Sometimes I think I miss you, and long for you to hold me again...

Dear world,
In my darkness I have come to see that I do care about you
It is time you and I were reacquainted
I need to touch and be touched by you
But there are deep wounds between us, so we must take things
slowly

P.S. Call me...

Dear world,
Thank God you called – I thought you never would
When we meet I need you to walk gently with me, not too fast
We need to feel our way into things, find our feet again
By the way, I've changed - I hope you still recognise me...

Dear world,
The other day was just like old times
When we held each other it was as though we'd never been apart
We must plan our days and weeks, organise our schedules,
make the most of every minute!
We belong together you and I ... but I'm terrified of losing you

Dear world,
I cannot believe how in love we are - you are amazing!
I lose myself in your presence, time and space just disappear
With you, I remember who I am.

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Appendix A:

Participant Information Sheet

The meaning of daily activities for people recovering from mental illness.

You are invited to participate in a small study, with Daniel Sutton, Occupational Therapy Lecturer at Auckland University of Technology. This letter outlines what the study is about and what it involves.

What is the purpose of the study?

The purpose of the study is to better understand how daily activities can impact on peoples' recovery from mental illness.

How are people chosen to be part of the study?

You and other people who have experienced mental illness have been invited to be part of the study. If you are interested in participating I will meet with you to talk more about what is involved and you will have some time to make a decision. I am looking for people who are comfortable talking about their recovery from mental illness and the everyday things that they do.

What happens in the study?

The study involves meeting with me at least 2 times. Before the first meeting I will also ask you to draw or write a brief timeline of your recovery so far. When we meet I will ask you to tell me about your experience of mental illness and recovery. The second time we meet I will ask you to talk more about your daily activities during recovery. These interviews will be audio-taped.

What are the discomforts and risks?

Talking about your mental illness and recovery may bring back memories of difficult or traumatic times in your life. You only need to share what you are comfortable with and you can ask to stop the interview at any time. I will also ensure that you have someone to support you after each interview. If you wish, you can also have a support person present during the interviews. If you decide not to join the study, or even withdraw after consenting to join the study, there will be no negative consequences for you or the services that support you.

What are the benefits?

Many people have found that talking about their recovery is a positive process and can help to make sense of life experiences. Additionally, the information collected will be analysed to assist our understanding of recovery and to help develop better services for people with mental illness.

What compensation is available for injury or negligence?

In the unlikely event of a physical injury as a result of your participation in this study, you will be covered by the accident compensation legislation with its limitations. ACC provides no cover for mental injury unless it is a result of physical injury. However, professional support will be available for any mental distress that occurs through participation in the study. If you have any questions about ACC please feel free to ask me for more information before you agree to take part in this research.

How is my privacy protected?

The information from the interviews will be transcribed from the audiotapes, then the audiotapes will be offered back to you. I will not keep copies of these. Your name or personal details will not appear on any written material. All information will be kept *confidential* and in a locked drawer at Auckland University of Technology and only myself and the research supervisor will be able to access this information. However, please note that if you disclose to me that you or someone else is being, or is going to be seriously harmed then I am obliged to break confidentiality and report this to the police and/or relevant services.

Costs of Participating

There is no cost to participating. The interviews will occur at a quiet, safe place of your choice. Transport to the interviews will be provided if you require it.

If you have any questions about participating in this study please contact me on **917 9999 ext. 7732**.

Any concerns regarding the nature of this project should be notified in the first instance to the Project Supervisor, **Clare Hocking at AUT, 921-9999 ext. 7120**. Concerns regarding the conduct of the research should be notified to the Executive Secretary, AUTECH, Madeline Banda, madeline.banda@aut.ac.nz, 921 9999 ext 8044. This study has received ethical approval from the Auckland Ethics Committee.

If you have any queries or concerns regarding your rights as a participant in this study, you may wish to contact the Health Advocates trust, no.0800 555 050 Northland to Franklin.

Yours sincerely,

Daniel Sutton
Occupational Therapist / Lecturer

Approved by the Auckland University of Technology Ethics Committee on 10.07.02
AUTECH Ref.: 02/128

Appendix B:

Consent to Participation in Research

The meaning of daily activities for people recovering from mental illness.

Project Supervisor: Dr Clare Hocking

Researcher: Daniel Sutton (Auckland University of Technology)

- I have read and understand the information provided about this research project.
- I have had an opportunity to ask questions and to have them answered.
- I understand that the interview will be audio-taped and transcribed.
- I understand the compensation provisions for this study.
- I understand that I may withdraw myself or any information that I have provided for this project at any time prior to completion of data collection, without being disadvantaged in any way. If I withdraw, I understand that all relevant tapes and transcripts, or parts thereof, will be destroyed.
- I am aware that the exception to confidentiality will be if the interviewer has significant concerns about the safety of myself or others.
- I agree to take part in this research.

Participant signature:

Participant name:

Date:

Project Supervisor Contact Details: Dr Clare Hocking
Associate Professor
Faculty of Health & Environmental Sciences
Auckland University of Technology
Private Bag 92006, Auckland
Ph: 921-9999 ext 7120

Researcher Contact Details: Daniel Sutton
School of Occupational Therapy
Faculty of Health & Environmental Sciences
Auckland University of Technology
Private Bag 92006, Auckland
Ph: 921-9999 ext 7732

Appendix C: Auckland Ethics Committee Approval

Appendix C:

Auckland Ethics Committees

Please include the reference no. and study title in all correspondence/telephone calls.

16 September 2002

Mr Daniel Sutton
School of Occupational Therapy
Auckland University of Technology
PB 92 006
Auckland

Private Bag 92522
Wellesley Street
Auckland
Delivery Address:
C/O Ministry of Health
3rd Floor, Unisys Building
650 Great South Road, Penrose
Phone (09) 580 9105
Fax (09) 580 9001
Email: pat_chaine@mh.govt.nz

Dear Daniel,

AKX/02/00/214 The meaning of daily activities for people recovering from mental illness: a phenomenological enquiry: PIS/Cons V#2, 6/9/02.

Thank you for your amendments, received 12 September 2002.

The above study has been given ethical approval by Auckland Ethics Committee X. Approval is conditional on the Committee being advised when the study is completed.

Certification

It is certified as not being conducted principally for the benefit of the manufacturer and will be considered for coverage under ACC.

Accreditation

This Committee is accredited by the Health Research Council and is constituted and operates in accordance with the Operational Standard for Ethics Committees, March 2002.

Progress Reports

The study is approved until 30 January 2004. The Committee will review the approved application annually. A progress report is required for this study on 16 September 2003. A form should come off our database requesting this information prior to the review date. Please note that failure to complete and return this form may result in the withdrawal of ethical approval.

A final report is also required at the conclusion of the study.

Requirements for SAE Reporting

Please advise the Committee as soon as possible of the following:

- any study in another country that has stopped due to serious or unexpected adverse events
- withdrawal of investigational product for continued development
- withdrawal from the market for any reason
- all serious adverse events which result in the investigator or sponsor breaking the blinding code at the time of the SAE or which result in hospitalisation or death.

Amendments

All amendments to the study must be advised to the Committee prior to their implementation, except in the case where immediate implementation is required for reasons of safety. In such cases the Committee must be notified as soon as possible of the change.

...../2

Accredited by Health Research Council

Auckland Ethics Committees

Private Bag 92522
Wellesley Street
Auckland
Delivery Address:
C/O Ministry of Health
3rd Floor, Unisys Building
650 Great South Road, Penrose
Phone (09) 580 9105
Fax (09) 580 9001
Email: pat_chainey@moh.govt.nz

General

It should be noted that Ethics Committee approval does not imply any resource commitment or administrative facilitation by any healthcare provider within whose facility the research is to be carried out. Where applicable, authority for this must be obtained separately from the appropriate manager within the organisation.

Please note a new version of the application form (EA0502) is now available either by email from the Administrator or from the Health Research Council website, www.hrc.govt.nz. Form EA0699 will not be accepted after 31 December 2002.

Yours sincerely



Pat Chainey
Committee X Administrator

Cc: Waitemata DHB

Accredited by Health Research Council

Appendix D:
AUT Ethics Committee Approval

MEMORANDUM



Academic Registry - Academic Services

To: Janis Paterson *

From: **Madeline Banda**

Date: 24 October 2002

Subject: 02/128 The meaning of daily activities for people recovering from mental illness

Dear Janis *

Your application for ethics approval was considered by AUTEK at their meeting on 14/10/02.

Your application has been approved subject to amendment and/or clarification of the following:

1. The applicant is requested to include AUTEK approval details on the Information Sheet.

Commencement of the research is subject to receipt of the REC letter of approval.

Please provide evidence of the above to me as soon as possible, noting that the research must not commence until full approval is given. Please quote the application number and title in all correspondence.

Yours sincerely

Madeline Banda
Executive Secretary
AUTEK

*

NB: Janis Paterson was the primary supervisor when the ethics application was made.

Appendix E:

Confidentiality Form

I _____

Am involved as a typist in assisting with the transcribing in the research study titled:

The Meaning of Daily Activities for People Recovering from Mental Illness.

I recognize that I have access to information that is confidential under the Privacy Act and undertake to ensure that outside my specific function in this research study I will not discuss or disclose information that I have been privy to.

Signed

Printed name:

Date

This study has received ethical approval from the HFA Auckland Ethics Committee and the Auckland University of Technology Ethics Committee.

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