

BMJ Open Examining the existing knowledge base for enablers of family recovery in mental health: a protocol for a scoping review of national and international literature

Kerry Cuskelly,¹ Michael John Norton ¹, Gina Delaney²

To cite: Cuskelly K, Norton MJ, Delaney G. Examining the existing knowledge base for enablers of family recovery in mental health: a protocol for a scoping review of national and international literature. *BMJ Open* 2022;**12**:e066484. doi:10.1136/bmjopen-2022-066484

► Prepublication history and additional supplemental material for this paper are available online. To view these files, please visit the journal online (<http://dx.doi.org/10.1136/bmjopen-2022-066484>).

Received 17 July 2022
Accepted 21 November 2022



© Author(s) (or their employer(s)) 2022. Re-use permitted under CC BY-NC. No commercial re-use. See rights and permissions. Published by BMJ.

¹Health Service Executive, Dublin, Ireland

²Mental Health Ireland, Kilkenny, Ireland

Correspondence to

Michael John Norton;
nortonmichael92@gmail.com

ABSTRACT

Introduction Recovery-oriented services in mental health are becoming an accepted approach across much of the globe. While the development of recovery-oriented approaches has focused mainly on people accessing mental health services, families of those accessing services also need to be included under the discussions of mental health recovery within mental health service provision. It is important that service providers understand what support families require in order to facilitate their recovery journeys. To that end, this review will seek to ascertain what evidence exists on the enablers of family recovery from national and international literature.

Method and analysis This proposed scoping review aims to investigate the family recovery enablers within a mental health context. A Preferred Reporting Items for Systematic Reviews and Meta-Analysis compliant scoping review is proposed, based on Arksey and O'Malley's framework. Search terms are stated and a variety of databases (CINAHL, JSTOR, Ovid SP, PsycINFO, PubMed, RCNi, Science Direct, Web of Science and Wiley Online Library) and repositories (Google, Google Scholar and ResearchGate) will be consulted to examine papers based on a predetermined inclusion/exclusion criteria. The search range is from 1 January 2012 to 31 December 2022.

Ethics and dissemination As this paper presents a protocol for a scoping review of the literature into family enablers in mental health, no ethical approval is required. The preprint protocol was added to OSF Registries on 29 October 2021 where it is freely available. The registry will be updated once this paper has been published. The resulting scoping review will be distributed through peer-reviewed publication in a high impact journal.

INTRODUCTION

Recovery-oriented services in mental health are becoming an accepted ideological approach across much of the globe.¹⁻³ There has been growing international research into the concept of recovery⁴ with specific areas of recovery such as peer support,^{5 6} examination of the quantitative evidence for the efficacy of recovery,⁷ recovery principles⁸

STRENGTHS AND LIMITATIONS OF THIS STUDY

- ⇒ As this proposed review adopts a scoping methodology, no assessment of the study quality will occur.
- ⇒ The scoping review will be comprehensive as it is inclusive of both the peer-reviewed and grey literature on the subject matter.
- ⇒ This scoping review will be conducted by three individuals, which increases the academic quality and rigour of such a review.
- ⇒ Patient and public involvement was used in the preparation of this protocol, which will strengthen the intended impact of the text.

and service-user led services^{9 10} all benefiting from targeted research and the development of a growing evidence-base. Recovery in this text is defined as '... a deeply personal, unique process of changing one's attitudes values, feelings, goals, skills and/or roles. It is a way of living a satisfying hopeful and contributing life even within the limitations caused by illness. Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of mental illness' (pg. 21).¹¹

While the development of recovery-oriented approaches in mental health have focused mainly on people accessing formal mental health services, families of those accessing service also need to be included under the discussions of recovery in mental health services.^{12 13} Families have their own particular needs in terms of recovery.¹⁴ For the purposes of this paper, the definition of family used will come from the Health Service Executive guidance document on family recovery.¹⁵ Here the family refers to 'relatives, friends and other supporters of all ages who care about and are supporting people who use mental health services during their recovery journey' (pg. 16).¹⁵ This definition

includes family members of all ages including children. Such needs of the family member are covered through that of family recovery. According to Mental Health Ireland, family recovery is about empowering ourselves and others to have opportunities to achieve our hopes and ambitions.¹⁶ This is achieved through a process of accepting what has happened, embracing who we are now and moving forward on the journey together.¹⁶ National policy in Ireland acknowledges the need to offer support to families in their own right.^{17–19} Internationally there is an acknowledgement of this assertion also.²⁰ For instance, according to Waller *et al*,²¹ families have three main needs when it comes to recovery: (1) an acknowledgement from services as to the important role families play in an individual's own recovery journey, (2) acknowledgement of the familial relationship between them and the individual service user and finally 3) the recognition and appreciation of the fact that the family too undergoes a recovery journey.

It is important that service providers understand what support families require in order to support their recovery journeys.²² In order to provide appropriate services to families and supporters who have loved ones attending mental health services, service providers first need to acknowledge the importance of offering services to families.²³ Service providers then need to invest in the development of family-friendly services through a recovery lens.²⁴

Hearing directly from families about what they conceptualise as important in supporting their recovery journeys is an integral part of the development of our understanding of family recovery in mental health.²⁵ In Ireland, the development of the National Office of Mental Health Engagement and Recovery has formalised the importance of incorporating service users and family members' voices in both the development and delivery of mental health services.²⁶

RATIONALE FOR STUDY PROTOCOL

This protocol and subsequent scoping review are being created as part of a planned review of 'A National Framework for Recovery in Mental Health'²⁷ and the current implementation of the new national mental health policy in Ireland, 'Sharing the Vision',¹⁸ as they pertain to family recovery. While families are acknowledged as partners in mental healthcare within both of these documents, the notion of families requiring their own support in their own recovery journeys and as a whole unit recovering together, are less developed. As such, this proposed review is timely in order to identify what is known about enablers of family recovery while also providing recommendations for continuous research into this developing area. We define an enabler for family recovery in this paper as someone or something that acts as a catalyst which allows the family member to engage in their own recovery. As such, an enabler assists families overcome identified barriers on their own road to recovery.¹²

There is recent, limited research evidence pertaining to family enablers in mental health settings.¹² This proffers the culmination of best available evidence on the specific question of identifying '...key enablers of family recovery interventions'.¹² It is the contention of the reviewers that in order to more deeply understand the breadth and depth of the concept of family recovery enablers, and as such, to be able to translate this knowledge into policy practice, a scoping review is warranted. A scoping review was chosen as the preferred methodology for this research due to the fact that its purpose is to map the broad body of literature available on a given topic.²⁸ A systematic review, in contrast, is seeking to collate evidence to heighten understanding on a very specific question. This can have the effect of limiting the diversity of literature and evidence that can be ascertained on a topic. For the purposes of this research, the reviewers are seeking to ensure as much diversity and depth in the literature as possible as the intention is to practically use the research findings to influence national mental health policy in public health services in Ireland.

AIMS AND OBJECTIVES OF THE PROPOSED SCOPING REVIEW

This paper aims to present a protocol for a scoping review into family recovery enablers within mental health service provision. To achieve this, the following objectives have been set:

1. To scope the available evidence into family recovery enablers within a mental health service context,
2. To identify and define the family recovery enablers and examine their usage within mental health service provision,
3. To describe the benefits and challenges of using these enablers for family member's individual recovery, and
4. To identify gaps in evidence that may support future study and focus on family recovery enablers within mental health service provision.

A scoping review will be conducted to identify the breadth of literature available into family recovery enablers. The review will be compliant with the Preferred Reporting Items for Systematic Reviews and Meta-Analysis (PRISMA) standard reporting guidelines which are specifically adapted for use within scoping reviews.²⁹ Additionally, the review will use Arksey and O'Malley's³⁰ framework for conducting scoping reviews. This framework encapsulates five phases including: (1) identifying the research question, (2) identifying relevant studies, (3) study selection, (4) charting the data and (5) collating, summarising and reporting of the results.³⁰ This protocol was registered with OSF Registries on 29 October 2021 and is freely available from their website.

Stage 1: identifying the research question

The purpose of a scoping review is to examine the breadth of literature available for a given concept/phenomena. As such, the research question that is developed by the reviewers should also be broad in nature.²⁹ This supports

the reviewers to scope the breadth of literature available without going into analytical depth, like that observed in systematic reviews. As such, the following research question will be explored: To examine the existing knowledge base for enablers of family recovery within existing national and international literature.

Stage 2: identifying relevant studies

The following search will be undertaken to explore the peer-reviewed literature into family recovery enablers. The search will be undertaken using the following databases: CINAHL, JSTOR, Ovid SP, PsycINFO, PubMed, RCNi, Science Direct, Web of Science and Wiley Online Library. Repositories like Google, Google Scholar and ResearchGate will also be examined for suitable papers for inclusion within the proposed scoping review. Additionally, a reference search will also be conducted. This reference search will also support stage four of the applied framework.

Stage 3: study selection

Throughout all databases and repositories examined, the search will consist of the following search terms:

‘family’ OR ‘supporter’ OR ‘spouse’ OR ‘partner’ OR ‘significant other’ OR ‘caregiver’ OR ‘relative’ OR ‘sibling’ OR ‘parent’
 AND
 ‘adult’
 AND
 ‘mental’ OR ‘psychiatric’ OR ‘mental illness’ OR ‘psychiatric disorder’ OR ‘mental ill health’
 AND
 ‘facilitate’ OR ‘help’ OR ‘aid’ OR ‘guide’ OR ‘coach’ OR ‘support’
 AND
 ‘recovery’ OR ‘wellbeing’ OR ‘self-care’ OR ‘burden’ OR ‘quality of life’.

As per the inclusion/exclusion criteria, a time limit of papers published in the past 10 years will be applied to the search for the proposed scoping review. Any paper published after 31 December 2022 will not be included in this scoping review. Similarly, any document older than

1 January 2012 will also not be included in the proposed scoping review. For round one screening (title of papers), breaking down the question into its minute parts, as demonstrated in study selection will suffice. However, as the search develops, further criterion will be necessary to support the reviewer in only including studies relating to the research question. Such criteria is demonstrated through the below inclusion/exclusion criteria (table 1).

As part of the reporting process, the PRISMA extension for scoping reviews (PRISMA-ScR) checklist will be used²⁹ (see online supplemental appendix A). To further support transparency and the reproducibility of this proposed review, a flow diagram (figure 1) will be used to visually demonstrate the study selection process.

Retrieval of papers for this proposed scoping review is expected to commence on 1 January 2023. The final included studies will be narrowed down using the documented search strategy by 15 February 2023.

Stage 4: charting the data

In following the aim of this proposed scoping review and to support its presentation, relevant information from each study will be extracted and presented in a suitable format. The information will be captured electronically using stated headings. This process is planned to take up the second half of February and the first few days of March (15 February 2023 to 10 March 2023) to complete and will extract the following information:

- ▶ Authors.
- ▶ Year of publication.
- ▶ Country where study was conducted or the affiliation of the first author.
- ▶ Format of Paper—dissertation, study, review, policy or report.
- ▶ Aim of study.
- ▶ Study design—qualitative, quantitative or mixed method.
- ▶ Methodological orientation—if known.
- ▶ Theoretical framework used—if known.
- ▶ Data collection methods.
- ▶ Sample and sample size.

Inclusion	Exclusion
Quantitative, qualitative, mixed-methods meta-analysis, randomised control trials, systematic reviews, meta-synthesis, literature reviews, rapid reviews, dissertations of any type, grey literature (policies, report documentation and so on).	Editorials, media articles, opinion/perspective pieces
English language	
General adult mental health services	Addiction, intellectual disabilities, physical health, older person services—dementia, delirium etc, child and adolescent services, dual diagnosis
Mentions/discusses/focuses on enablers of family members/carers’ own recovery journey	Focused on users of services recovery journey
Articles within the past 10 years	

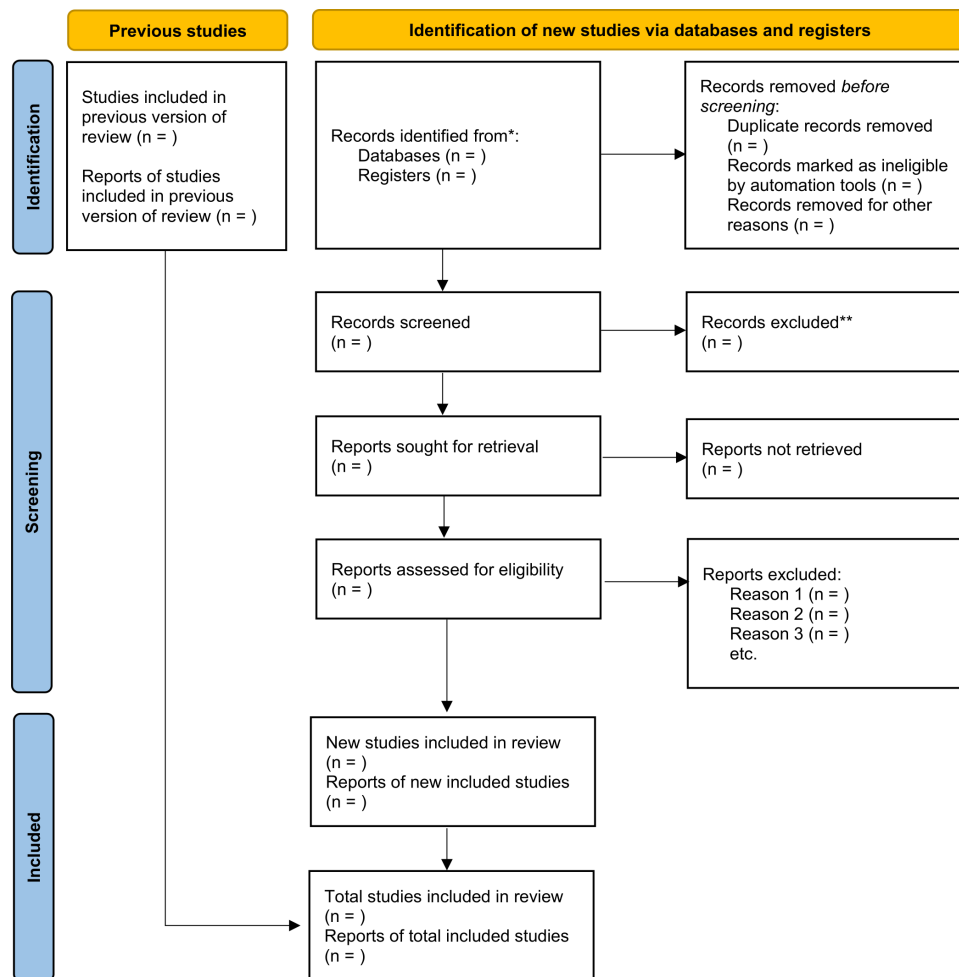


Figure 1 Preferred Reporting Items for Systematic Reviews and Meta-Analysis 2020 flow diagram for updated systematic reviews which included searches of databases and registers only. *Consider, if feasible to do so, reporting the number of records identified from each database or register searched (rather than the total number across all databases/register). **If automation tools were used, indicate how many records were excluded by a human and how many were excluded by automation tools.³³

- ▶ Family enabler examined.
- ▶ Definition of family enabler—if given.
- ▶ How the family enabler is practiced within services.
- ▶ Benefits of family enabler.
- ▶ Challenges to family enabler.
- ▶ Strengths of study from the author(s) of included papers.
- ▶ Limitations of study from the author(s) of included papers
- ▶ Recommendations for future research/practice from the author(s) of included papers.

To further support its presentation, a visual graph will be created using connectedpapers.com. This process will involve the identification of lead papers which will be identified through included papers reference lists and bibliographies.

Stage 5: collating, summarising and reporting the results

To support the reporting of results, Braun and Clarke's thematic analysis will be used.³¹ Due to the scoping nature of this review, no in-depth data analysis will be

undertaken.³⁰ Instead, the review narrative will result from the thematic analysis of the literature without examining issues of study rigour and quality. The results presented here will relate back to the research question developed during stage 1 of Arksey and O'Malley's framework. Gaps within the literature will also be captured and documented. The results of this scoping review are expected to be written up and submitted in April 2023.

ETHICS AND DISSEMINATION

As this paper describes a protocol for a scoping review, ethical approval was not required. Information relating to the review will be stored with OSF Registries where it will be freely available. The results of this proposed scoping review will be distributed through a peer-reviewed publication.

Patient and public involvement

This scoping review protocol and the subsequent review itself has used public and patient involvement at all stages

of the design and/or write up of both papers. The results will be disseminated through a peer-reviewed publication.

DISCUSSION

This proposed scoping review aims to explore the breadth of national and international literature relating to enablers of family recovery. The review will answer the following research question: what evidence exists on the enablers of family recovery in existing national and international literature? The review is being conducted to support the reviewers in identifying gaps within the literature that can be addressed in a larger project examining family recovery in mental health. As with any review, there are several limitations to carrying out the proposed scoping review. First, as scoping reviews explore the breadth of a given topic, not its depth, the reviewers cannot comment on the quality of any study included in the review. In addition, based on a previous systematic review carried out by two of the reviewers,¹² it is acknowledged that there is a limited evidence-base generated on the topic of family recovery in an overall context. This may limit the breadth of literature included in the proposed scoping review. However, this may also be a strength of the proposed scoping review in that it may assist with pointing towards the need for further research on the topic of family recovery in mental health globally. Additionally, although this proposed scoping review aims to be as inclusive as possible, it is impossible to gather every piece of literature that should be gathered as part of the screening process.³² As such, this could be a potential limitation as to limit this as much as possible requires experienced reviewers with the support of a librarian to adequately search both the peer reviewed and grey literature base into the subject matter. Finally, in the inclusion/exclusion criteria, this protocol suggests that the reviewers will only include articles from the past 10 years. This may be problematic as this may limit the quantity of papers gathered. This could cause particular concern since the recovery concept was only conceptualised in the 1990s by William Anthony.^{11 28} As such, papers discussing family recovery that are over 10 years old at the time of the search will be excluded. This could lead to the exclusion of seminal articles in the field, thereby limiting the intended impact of the proposed scoping review itself.

Twitter Kerry Cuskelly @cuskellk and Michael John Norton @MichaelJohnNor1

Acknowledgements The reviewers would like to thank their affiliations for allowing them the platform to influence the evidence base into family recovery within a mental health context.

Contributors The authors (KC, MJN and GD) conceptualised and designed the scoping review. KC and GD were responsible for the write up of the introduction and discussion of this paper. MJN was responsible for the write up of the methodology of the paper. All reviewers were responsible for writing the abstract and reviewing the entire paper prior to submission.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient and public involvement Patients and/or the public were involved in the design, or conduct, or reporting, or dissemination plans of this research. Refer to the Methods section for further details.

Patient consent for publication Not applicable.

Provenance and peer review Not commissioned; externally peer reviewed.

Supplemental material This content has been supplied by the author(s). It has not been vetted by BMJ Publishing Group Limited (BMJ) and may not have been peer-reviewed. Any opinions or recommendations discussed are solely those of the author(s) and are not endorsed by BMJ. BMJ disclaims all liability and responsibility arising from any reliance placed on the content. Where the content includes any translated material, BMJ does not warrant the accuracy and reliability of the translations (including but not limited to local regulations, clinical guidelines, terminology, drug names and drug dosages), and is not responsible for any error and/or omissions arising from translation and adaptation or otherwise.

Open access This is an open access article distributed in accordance with the Creative Commons Attribution Non Commercial (CC BY-NC 4.0) license, which permits others to distribute, remix, adapt, build upon this work non-commercially, and license their derivative works on different terms, provided the original work is properly cited, appropriate credit is given, any changes made indicated, and the use is non-commercial. See: <http://creativecommons.org/licenses/by-nc/4.0/>.

ORCID iD

Michael John Norton <http://orcid.org/0000-0002-7420-9339>

REFERENCES

- 1 Le Bouillier C, Leamy M, Bird VJ, *et al*. What does recovery mean in practice? A qualitative analysis of international recovery-oriented practice guidance. *Psychiatr Serv* 2011;62:1470–6.
- 2 National mental health policy framework and strategic plan, 2013–2020. Available: <https://health-e.org.za/wp-content/uploads/2014/10/National-Mental-Health-Policy-Framework-and-Strategic-Plan-2013-2020.pdf> [Accessed 29 October 2021].
- 3 New pathways, new hope: national mental health policy of India. Available: <http://mohfw.gov.in/WriteReadData/l892s/34711242651412939786.pdf> [Accessed 29 October 2021].
- 4 Cleary A, Dowling M. Knowledge and attitudes of mental health professionals in Ireland to the concept of recovery in mental health: a questionnaire survey. *J Psychiatr Ment Health Nurs* 2009;16:539–45.
- 5 Repper J, Carter T. A review of the literature on peer support in mental health services. *J Ment Health* 2011;20:392–411.
- 6 Shalaby RAH, Agyapong VIO. Peer support in mental health: literature review. *JMIR Ment Health* 2020;7:e15572.
- 7 Slade M, Longden E. Empirical evidence about recovery and mental health. *BMC Psychiatry* 2015;15:285.
- 8 Torrey WC, Rapp CA, Van Tosh L, *et al*. Recovery principles and evidence-based practice: essential ingredients of service improvement. *Community Ment Health J* 2005;41:91–100.
- 9 The effectiveness of service User-Run or service User-Led mental health services for people with mental illness: a systematic literature review <https://thehub.swa.govt.nz/assets/Uploads/The-effectiveness-of-service-user-run-or-service-user-led-mental-health-services-for-people-with-mental-illness.pdf> [Accessed 29 October 2021].
- 10 Greenfield TK, Stoneking BC, Humphreys K, *et al*. A randomized trial of a mental health consumer-managed alternative to civil commitment for acute psychiatric crisis. *Am J Community Psychol* 2008;42:135–44.
- 11 Anthony WA. Recovery from mental illness: the guiding vision of the mental health service system in the 1990s. *Psychosoc Rehabil J* 1993;16:11–23.
- 12 Norton MJ, Cuskelly K. Family recovery interventions with families of mental health service users: a systematic review of the literature. *Int J Environ Res Public Health* 2021;18:7858.
- 13 Wyder M, Barratt J, Jonas R. Relational recovery for mental health carers and family: relationships, complexity and possibilities. *The British Journal of Social Work* 2021;bcab149.
- 14 Family recovery guidance document. Available: <https://www.hse.ie/eng/services/list/4/mental-health-services/advancingrecoveryireland/national-framework-for-recovery-in-mental-health/family-recovery-guidance-document-2018-to-2020.pdf> [Accessed 29 October 2021].
- 15 Family recovery guidance document 2018–2020. Available: <https://www.hse.ie/eng/services/list/4/mental-health-services/advancingrecoveryireland/national-framework-for-recovery-in-mental-health/family-recovery-guidance-document-2018-to-2020.pdf> [Accessed 15 October 2022].



- 16 Family recovery. Available: <https://www.mentalhealthireland.ie/wearefamily/> [Accessed 15 October 2022].
- 17 A vision for change. Available: <https://www.hse.ie/eng/services/publications/mentalhealth/mental-health-a-vision-for-change.pdf> [Accessed 29 October 2021].
- 18 National carers strategy: recognised, supported, Empowered. Available: <https://assets.gov.ie/10945/d62cf66f0a8f442bb594bbe0b48ef6ad.pdf> [Accessed 29 October 2021].
- 19 Sharing the vision: a mental health policy for everyone. Available: <https://www.gov.ie/en/publication/2e46f-sharing-the-vision-a-mental-health-policy-for-everyone/> [Accessed 7 July 2022].
- 20 Martin RM, Ridley SC, Gillieatt SJ. Family inclusion in mental health services: reality or rhetoric? *Int J Soc Psychiatry* 2017;63:480–7.
- 21 Waller S, Reupert A, Ward B, *et al.* Family-focused recovery: perspectives from individuals with a mental illness. *Int J Ment Health Nurs* 2019;28:247–55.
- 22 Ward B, Reupert A, McCormick F, *et al.* Family-focused practice within a recovery framework: practitioners' qualitative perspectives. *BMC Health Serv Res* 2017;17:234.
- 23 Children of parents with a mental illness: perspectives on need. Available: www.auseinet.com/journal/vol4iss2/maybery.pdf [Accessed 29 October 2021].
- 24 Foster K, Maybery D, Reupert A, *et al.* Family-focused practice in mental health care: an integrative review. *Child & Youth Services* 2015.
- 25 Courey L, Hyndman D, Sheasgreen C, *et al.* What we know - and want to know - about Family Connections: a review from the perspective of lived experience. *Curr Opin Psychol* 2021;37:44–8.
- 26 Mental health engagement and recovery. Available: <https://www.hse.ie/eng/services/list/4/mental-health-services/mental-health-engagement-and-recovery/>
- 27 National framework for recovery in mental health. Available: <https://www.hse.ie/eng/services/list/4/mental-health-services/mental-health-engagement-and-recovery/national-framework-for-recovery-in-mental-health/> [Accessed 7 July 2022].
- 28 Norton MJ. Coproduction and mental health service provision: a protocol for a scoping review. *BMJ Open* 2022;12:e058428.
- 29 Tricco AC, Lillie E, Zarin W, *et al.* PRISMA extension for scoping reviews (PRISMA-ScR): checklist and explanation. *Ann Intern Med* 2018;169:467–73.
- 30 Arksey H, O'Malley L. Scoping studies: towards a methodological framework. *Int J Soc Res Methodol* 2005;8:19–32.
- 31 Braun V, Clarke V. Using thematic analysis in psychology. *Qual Res Psychol* 2006;3:77–101.
- 32 Pham MT, Rajić A, Greig JD, *et al.* A scoping review of scoping reviews: advancing the approach and enhancing the consistency. *Res Synth Methods* 2014;5:371–85.
- 33 Page MJ, McKenzie JE, Bossuyt PM, *et al.* The PRISMA 2020 statement: an updated guideline for reporting systematic reviews. *BMJ* 2021;372.