



## UvA-DARE (Digital Academic Repository)

### Management of the self

*An interdisciplinary approach to self-management in psychiatry and psychosomatic medicine*

Van Geelen, S.; Franssen, G.

#### DOI

[10.1353/ppp.2017.0016](https://doi.org/10.1353/ppp.2017.0016)

#### Publication date

2017

#### Document Version

Final published version

#### Published in

Philosophy, Psychiatry, & Psychology

#### License

Article 25fa Dutch Copyright Act (<https://www.openaccess.nl/en/policies/open-access-in-dutch-copyright-law-taverne-amendment>)

[Link to publication](#)

#### Citation for published version (APA):

Van Geelen, S., & Franssen, G. (2017). Management of the self: An interdisciplinary approach to self-management in psychiatry and psychosomatic medicine. *Philosophy, Psychiatry, & Psychology*, 24(2), 109-113. <https://doi.org/10.1353/ppp.2017.0016>

#### General rights

It is not permitted to download or to forward/distribute the text or part of it without the consent of the author(s) and/or copyright holder(s), other than for strictly personal, individual use, unless the work is under an open content license (like Creative Commons).

#### Disclaimer/Complaints regulations

If you believe that digital publication of certain material infringes any of your rights or (privacy) interests, please let the Library know, stating your reasons. In case of a legitimate complaint, the Library will make the material inaccessible and/or remove it from the website. Please Ask the Library: <https://uba.uva.nl/en/contact>, or a letter to: Library of the University of Amsterdam, Secretariat, P.O. Box 19185, 1000 GD Amsterdam, The Netherlands. You will be contacted as soon as possible.

MANAGEMENT  
OF THE SELF:  
AN INTERDISCIPLINARY  
APPROACH TO SELF-  
MANAGEMENT IN  
PSYCHIATRY AND  
PSYCHOSOMATIC  
MEDICINE

STEFAN VAN GEELLEN & GASTON  
FRANSSSEN



**I**N RECENT YEARS, there has been a rapidly increasing interest in self-management strategies in psychiatry and psychosomatic medicine (Siantz & Aranda, 2014; Crawford et al., 2014; Kemp, 2011). Among the conditions in which self-management is currently investigated in these contexts are bipolar disorder (Jones et al., 2011; Depp et al., 2009), depression (Van Grieken et al., 2015; Houle et al., 2013), post-traumatic stress disorder (Engel et al., 2015; Possemato et al., 2015), schizophrenia (Saito et al., 2013; Cimo et al., 2012), attention deficit hyperactivity disorder (Bussing et al., 2016; Christiansen et al., 2014), irritable bowel syndrome (Eugenio et al., 2012), chronic fatigue syndrome (Meng, Friedberg, & Castora-Binkley, 2014, Friedberg et al., 2013), and fibromyalgia (Bourgault et al., 2015; Hamnes et al., 2012). These approaches aim to stimulate patients to be more actively engaged in their own care, and they intend to shift the burden of the

responsibility for treatment success away from psychiatrists, doctors, nurses and other healthcare professionals (Lawn et al., 2007; Davidson, 2005). Thus, acquiring the mastery of self-management is a critical component for patients in dealing with their conditions, and within mental healthcare it is commonly regarded as an innovative person-centered approach to provide individuals with the necessary skills to deal with the unique challenges they face in everyday life (Janney, Bauer, & Kilbourne, 2014; Stanghellini, Bolton, & Fulford, 2013).

At present, approaches within mental healthcare settings that try to actively involve the patients in their own care comprise a wide range of strategies and interventions, which have also been described in terms of self-help (Lewis, Pearce, & Bisson, 2012; Moritz et al., 2011), self-care (Holmberg & Kane, 1999), and self-treatment (Charlton, 2009). As for the literature on self-

management in particular, psychiatric and psychosomatic research encompasses a similarly broad terminological variety, among which chronic disease self-management (Lorig et al., 2014), self-management support (Houle et al., 2013), comprehensive self-management (Eugenio et al., 2012), activity pacing self-management (Kos et al., 2015), and illness self-management (Saito et al., 2013). No less diverse and seemingly eclectic are the commonly used modes of delivery, ranging from straightforward patient education and medical information brochures, workbooks and manuals, mobile technologies and internet-based modalities, all the way to peer-led interventions, nurse assisted training, graded exercise programs, and cognitive behavioral therapies (e.g. Engel et al., 2015; Janney, Bauer, & Kilbourne, 2014; Crawford et al., 2014). A proliferation of different methods, frameworks, targets and resources, then, appears to be intrinsic to self-management strategies over different healthcare settings.

Initially, the interest in self-management interventions arose within the context of chronic somatic disease (Newman, Steed, & Mulligan, 2004; Lorig & Holman, 2003). Here, self-management is often defined as: “*the individual’s ability to manage the symptoms, treatment, physical and psychosocial consequences and lifestyle changes inherent in living with a chronic condition*” (Barlow et al., 2002, p. 178). Consequently, the traditional goals of self-management are the promotion of self-efficacy in dealing with the corollaries of long-lasting illness, teaching condition-specific skills, encouraging adequate behavior in regard to disease, implementing problem-based coping strategies, increasing patients’ medical knowledge, and raising their treatment motivation and compliance (Newman, Steed, & Mulligan, 2004; Lorig & Holman, 2003; Barlow et al., 2002). Along the same lines, in mental health settings the targets are often defined as improving symptomatology, preventing relapse, increasing performance in daily life activities, aiding in recovery, obtaining positive attitudes towards medication use, and the initiation of self-management of drug intake (Kos et al., 2015; Houle et al., 2013; Saito et al., 2013; Jones et al., 2011). Overall, within mental healthcare, it is commonly assumed that self-management

“encourages consumers to take responsibility for their own illness, and to fully participate in decisions about their illness” (Kemp, 2011, p. 147).

Thus, it would seem that self-management strategies across medical disciplines are appealing, as they promise 1) to increase the autonomy and well-being of patients, 2) to stimulate shared decision-making and joint crisis planning, and, consequently, 3) to make healthcare delivery more efficient, and health policies more cost-effective (Siantz & Aranda, 2014; Greenhalgh, 2008). When studying the literature and reading the above-mentioned definitions, however, it soon becomes clear that in practice self-management often seems to boil down to a rather narrow form of disease management by patients themselves (Lorig & Holman, 2003). As this biomedical perspective remains dominant, systematic research into emotional, identity and role management continues to be limited (Sattoe et al., 2015; Aujoulat et al., 2008). Especially in mental health settings, the focus on disease management by patients themselves seems insufficient, as such an approach does not fully acknowledge that altered self-experience, limited autonomy, disordered identity, and impaired agency are often core aspects of the conditions involved (Van Geelen, 2014). Put otherwise, in psychiatry and psychosomatic medicine oftentimes *the self itself* is at issue, and persons can hardly be isolated from their conditions (Kyrios et al., 2015; Santhouse, 2008; Sadler, 2007). This conclusion has important consequences, as it implies that conceptualizing self-management is a fundamentally philosophical and interdisciplinary endeavor, which should aim to integrate contemporary research findings on different dimensions of self-experience. Since this remains relatively unacknowledged in most research on self-management at present, it is understandable that the existing approaches are criticized for not explicating their conceptual foundations, and for utilizing too restrictive models of the self (Weiner, 2011; Greenhalgh, 2009). Thus, to attain its full potential, self-management approaches in psychiatry and psychosomatics ought to start out from a “management of the self” (Van Geelen, 2013).

This special issue aims to more fully explore the theoretical foundations for a management of the

self, so as to enable the subsequent development of more practically relevant forms of patient participation in mental healthcare. Leading questions include: Under what conditions can we expect patients in mental healthcare to constructively take responsibility for their lives, given the fact that their self is often affected? How should we relate and target different dimensions of patients' self-experience? Which theoretical constructs might provide us clinically relevant foundations for effective self-management approaches in psychiatry and psychosomatics? How can a diachronically changing self with limited autonomy and agency be managed or empowered? To answer such questions, we asked our contributors to conceptually expound their views on self-experience in psychiatry and psychosomatic medicine, and to relate these to their understanding of self-management.

Heribert Sattel and Peter Henningsen explicate their views on self-management as "management of the self" from the perspective of psychosomatic medicine, and argue for psychodynamic psychotherapy as a tool to deal with impairments of structural functioning. Subsequently, Thomas Fuchs and Frank Röhrich consider the embodied and intersubjective aspects of self-experience in schizophrenia, and relate this to body awareness and movement techniques to foster patients' self-management. Next, Gerrit Glas describes a conceptual framework for self-management in psychiatry which elucidates the somewhat neglected role of emotion in relation to current understandings of the self in depression and anxiety. Taking another approach, Dan Hutto and Shaun Gallagher investigate the potential of a re-authored form of narrative therapy to help patients to improve their own well-being and to self-manage mental health. And finally, Paul Lysaker and John Lysaker offer a view of schizophrenia as involving a disruption in the purposive course of life and the ability to form integrated ideas of oneself, and discuss six different qualities to be embraced in future forms of psychiatric patients' self-management.

## ACKNOWLEDGEMENT

We would very much like to thank Annemieke van der Perk-Engbers, Lisette Kraai-Killestein and

Mariëlle Plug-van den Bree for their invaluable help, practical advice and vital support.

## REFERENCES

- Aujoulat, I., Marcolongo, R., Bonadiman, L., & Decache, A. (2008). Reconsidering patient empowerment in chronic illness: A critique of models of self-efficacy and bodily control. *Social Science & Medicine*, *66*, 1228–1239.
- Barlow, J., Wright, C., Sheasby, J., Turner, A., & Hainsworth, J. (2002). Self-management approaches for people with chronic conditions: A review. *Patient Education and Counseling*, *48*, 177–187.
- Bourgault, P., Lacasse, A., Marchand, S., Courtemanche-Harel, R., Charest, J., Gaumont, I., ... Choinière, M. (2015). Multicomponent interdisciplinary group intervention for self-management of fibromyalgia: A mixed-methods randomized controlled trial. *PLoS One*, *10*, e0126324.
- Bussing, R., Mason, D., Garvan, C.W., Gurnani, T., Koro-Ljungberg, M., Noguchi, & Albarracin, D. (2016). Willingness to use ADHD self-management: Mixed methods study of perceptions by adolescents and parents. *Journal of Child and Family Studies*, *25*, 562–573.
- Charlton, B.G. (2009). A model for self-treatment of four sub-types of symptomatic "depression" using non-prescription agents: Neuroticism (anxiety and emotional instability); malaise (fatigue and painful symptoms); demotivation (anhedonia) and seasonal affective disorder "SAD". *Medical Hypotheses*, *72*, 1–7.
- Crawford, C., Lee, C., May, T., & Active Self-Care Therapies for Pain (PACT) Working Group. (2014). Physically oriented therapies for the self-management of chronic pain symptoms. *Pain Medicine*, *15*, S54–65.
- Christiansen, H., Reh, V., Schmidt, M.H., & Rief, W. (2014). Slow cortical potential neurofeedback and self-management training in outpatient care for children with ADHD: Study protocol and first preliminary results of a randomized controlled trial. *Frontiers in Human Neuroscience*, *8*, 943.
- Davidson, L. (2005). Recovery, self management and the expert patient: Changing the culture of mental health from a UK perspective. *Journal of Mental Health*, *14*, 25–35.
- Depp, C. A., Stricker, J.L., Zagorsky, D., Goodale, L.C., Eyler, L.T., Patterson, . . . & Jeste, D.V. (2009). Disability and self-management practices of people with bipolar disorder: A web-based survey. *Community Mental Health Journal*, *45*, 179–187.
- Engel, C. C., Litz, B., Magruder, K.M., Harper, R., Gore, K., Stein, N. . . . & Coe, T.R. (2015). Delivery of

- self training and education for stressful situations (DESTRESS-PC): A randomized trial of nurse assisted online self-management for PTSD in primary care. *General Hospital Psychiatry*, 37, 323–328.
- Eugenio, M. D., Jun, S.E., Cain, K.C., Jarrett, M.E., & Heitkemper, M.M. (2012). Comprehensive self-management reduces the negative impact of irritable bowel syndrome symptoms on sexual functioning. *Digestive Diseases and Sciences*, 57, 1636–1646.
- Friedberg, F., Napoli, A., Coronel, J., Adamowicz, J., Seva, V., Caikauskaitė, I., Ngan, M.C., Chang, J., & Meng, H. (2013). Chronic fatigue self-management in primary care: A randomized trial. *Psychosomatic Medicine*, 75, 650–657.
- Greenhalgh, T. 2009. Chronic illness: Beyond the expert patient. *BMJ* 338: 629–631.
- Hamnes, B., Mowinckel, P., Kjekshus, I. & Hagen, K.B. (2012). Effects of a one week multidisciplinary inpatient self-management programme for patients with fibromyalgia: A randomised controlled trial. *BMC Musculoskeletal Disorders*, 13, 189.
- Holmberg, S. K. & Kane, C. Health and self-care practices of persons with schizophrenia. *Psychiatric Services*, 50, 827–829.
- Houle, J., Gascon-Depatie, M., Bélanger-Dumontier, G., & Cardinal, C. (2013). Depression self-management support: A systematic review. *Patient Education and Counseling*, 91, 271–279.
- Janney, C. A., Bauer, M.S., & Kilbourne, A.M. (2014). Self-management and bipolar disorder: A clinician's guide to the literature 2011–2014. *Current Psychiatry Reports*, 16, 485.
- Jones, S., Deville, M., Mayes, D. & Lobban, F. (2011). Self-management in bipolar disorder: The story so far. *Journal of Mental Health*, 20, 583–592.
- Kemp, V. (2011). Use of “chronic disease self-management strategies” in mental healthcare. *Current Opinion in Psychiatry*, 24, 144–148.
- Kos, D., van Eupen, I., Meirte, J., van Cauwenbergh, D., Moorkens, G., Meeus, M., & Nijs, G. (2015). Activity pacing self-management in chronic fatigue syndrome: A randomized controlled trial. *American Journal of Occupational Therapy*, 69, 6905290020.
- Kyrios, M., Nelson, B., Ahern, C., Fuchs, T., & Parnas, J. (2015). The self in psychopathology. *Psychopathology*, 48, 275–277.
- Lawn, S., Battersby, M.W., Pols, R.G., Lawrence, J., Parry, T., & Urukalo, M. (2007). The mental health expert patient: Findings from a pilot study of a generic chronic condition self-management programme for people with mental illness. *International Journal of Social Psychiatry*, 53, 63–74.
- Lewis, C, Pearce, J., Bisson, J.I. (2012). Efficacy, cost-effectiveness and acceptability of self-help interventions for anxiety disorders: Systematic review. *British Journal of Psychiatry*, 200, 15–21.
- Lorig, K. R. & Holman, H.R. (2003). Self-management education: History, definition, outcomes, and mechanisms. *Annals of Behavioral Medicine*, 26, 1–7.
- Lorig, K. R., Ritter, P.L., Pifer, C., & Werner, P. (2014). Effectiveness of the chronic disease self-management program for persons with a serious mental illness: A translation study. *Community Mental Health Journal*, 50, 96–103.
- Meng, H., Friedberg, F., & Castora-Binkley, M. (2014). Cost-effectiveness of chronic fatigue self-management versus usual care: A pilot randomized controlled trial. *BMC Family Practice*, 15, 184.
- Moritz, S., Wittekind, C.E., Hauschildt, M., & Timpano, K.R. (2011). Do it yourself? Self-help and online therapy for people with obsessive-compulsive disorder. *Current Opinion in Psychiatry*, 24, 541–548.
- Newman, S., Steed, L., & Mulligan, K. (2004). Self-management interventions for chronic illness. *Lancet*, 364, 1523–1537.
- Possemato, K., Acosta, M.C., Fuentes, J., Lantinga, L.J., Marsch, L.A., Maisto, S.A., Grabinski, M., & Rosenblum, A. (2015). A web-based self-management program for recent combat veterans with PTSD and substance misuse: Program development and veteran feedback. *Cognitive and Behavioral Practice*, 22, 345–358.
- Sadler, J. Z. (2007). The psychiatric significance of the personal self. *Psychiatry*, 70, 113–129.
- Santhouse, A. The person in the patient. *BMJ*, 2008, 337.
- Saito, M., Edo, K., Yamamoto, Y., Niwa, S., & Liberman, R.P. (2013). Illness self-management for individuals in acute psychiatric care settings in Japan: Cross-cultural adaptation of an American program. *Psychiatric Rehabilitation Journal*, 36, 272–277.
- Sattoe, J. N., Bal, M.I., Roelofs, P.D., Bal, R., Miedema, H.S., & van Staa, A. (2015). Self-management interventions for young people with chronic conditions: A systematic overview. *Patient Education and Counseling*, 98, 704–715.
- Siantz, E. & Aranda, M. P. (2014). Chronic disease self-management interventions for adults with serious mental illness: A systematic review of the literature. *General Hospital Psychiatry*, 36, 233–244.
- Stanghellini, G., Bolton, D., & Fulford, W. K. (2013). Person-centered psychopathology of schizophrenia: Building on Karl Jaspers' understanding of patient's attitude toward his illness. *Schizophrenia Bulletin*, 39, 287–294.
- Van Geelen, S. M. (2013). Redefining self-management as “management of the self”: A new approach to person-centered care in chronic fatigue syndrome.

- American Journal of Bioethics – Neuroscience*, 4, 39–42.
- Van Geelen, S. M. (2014). Managing disease, or managing the self? : Philosophical challenges to patient participation in (mental) health care and the need for self-management training. *American Journal of Bioethics*, 14, 21–22.
- Van Grieken, R. A., Kirkenier, A.C., Koeter, M.W., Nabitz, U.W., & Schene, A.H. (2015). Patients' perspective on self-management in the recovery from depression. *Health Expectations*, 18, 1339–1348.
- Weiner, T. (2011). The (un)managed self: Paradoxical forms of agency in self-management of bipolar disorder. *Culture, Medicine and Psychiatry*, 35, 448–483.