

# Stages in Providing Hope Intervention in Overcoming Mental Disorders: A Systematic Review

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## ABSTRACT

Surveys show that 1 among 6 people (15-20%) is having one or more mental disorders. Hope intervention overcomes mental disorders by forming positive emotions. Reviews on the provision of Hope Intervention, however, are yet to be found. To describe stages in providing *hope intervention* in overcoming mental disorders. Articles used in this review were taken from PubMed, Science Direct, MEDLINE, Sagepubs, Scopus, Web of Science, and PsycINFO and searched with the keywords of *hope therapy*, *hope intervention*, *hope intervention program*, *mental disorder*, and *psychiatric symptoms*; published in the period of 2000-2018; *quasi-experimental*, *randomized control trial*, *clinical trial*; in *full text* form; and written in English. The quality of the articles was evaluated using Joanna Briggs Institute (JBI) and Critical Appraisal Skills Programme (CASP) checklists. Data were analyzed using narrative analysis. Not including duplicates, 8664 titles and abstracts, and 10 fully read full texts were found and 5 articles met the set criteria. Stages in giving hope intervention are introduction, setting goals, identifying strategies to achieve goals, motivation reinforcement to implement strategies in achieving goals, and evaluation. Intervention strategies are adjusted based on population and problems faced by clients.

**Keywords:** Hope intervention, hope therapy, mental disorders, psychiatric symptoms

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## INTRODUCTION

Global Burden of Disease Study 2015 (GBD 2015) predicts that seven of the 25 causes of life disability are general mental disorders, i.e. major depression disorder, anxiety disorders, mood disorders, and alcohol abuse disorders.<sup>1,2</sup> Researches show that mental disorders occurs in women by 15% and in men by 14.6% with the age range of 18-25 years old by 19.2% and 26-49 years old by 16.5%.<sup>3</sup> Surveys have shown that 1 among 6 people (15-20%) are having one or more mental disorders<sup>4</sup>. Other researches indicate that 1 of 5 people (17.6%) are identified to have mental disorders and 29.2% experience the same mental disorder during their lifespan<sup>5</sup>. Based on various researches, there are several factors causing high prevalence rate of mental disorders in populations of various communities.

Mental disorder is one of the most prevalent health problem in adult population.<sup>2,6</sup> Mental disorders in general population are often associated with an increased risk of injury,<sup>7</sup> cardiovascular disease<sup>8</sup>, vulnerability to infections<sup>9</sup>, diagnosis of cancer,<sup>10</sup> expensive health and medical costs,<sup>11</sup> and detention in detention centers/prisons<sup>12</sup>. Mental disorders bring negative impacts to sufferers. The impacts of mental disorders among others are decreasing quality of life and degrading participation in professionalism and social life<sup>13,14</sup>. However, 35 to 50% of patients with mental disorders do not have care and medication<sup>14</sup>. Therefore, Hope intervention can be one of alternative interventions in order to overcome mental disorders.

Hope intervention focuses in cognitive assessment to achieve the goal as source of emotion, strategy to achieve the goal, and motivation in achieving such goal<sup>15,16,17</sup>. Hope intervention also focuses on emotional reaction that encourages someone to realize affection and response given<sup>18,19</sup>. Some studies have shown that hope intervention can overcome various psychological

problems<sup>19,20,21</sup>. Reviews on hope intervention stages, however, are yet to be found. Therefore, a systematic review aims to describe the stages of providing hope intervention in dealing with mental disorders in order to answer the question of what/how are the stages in providing *hope* intervention to deal with mental disorders.

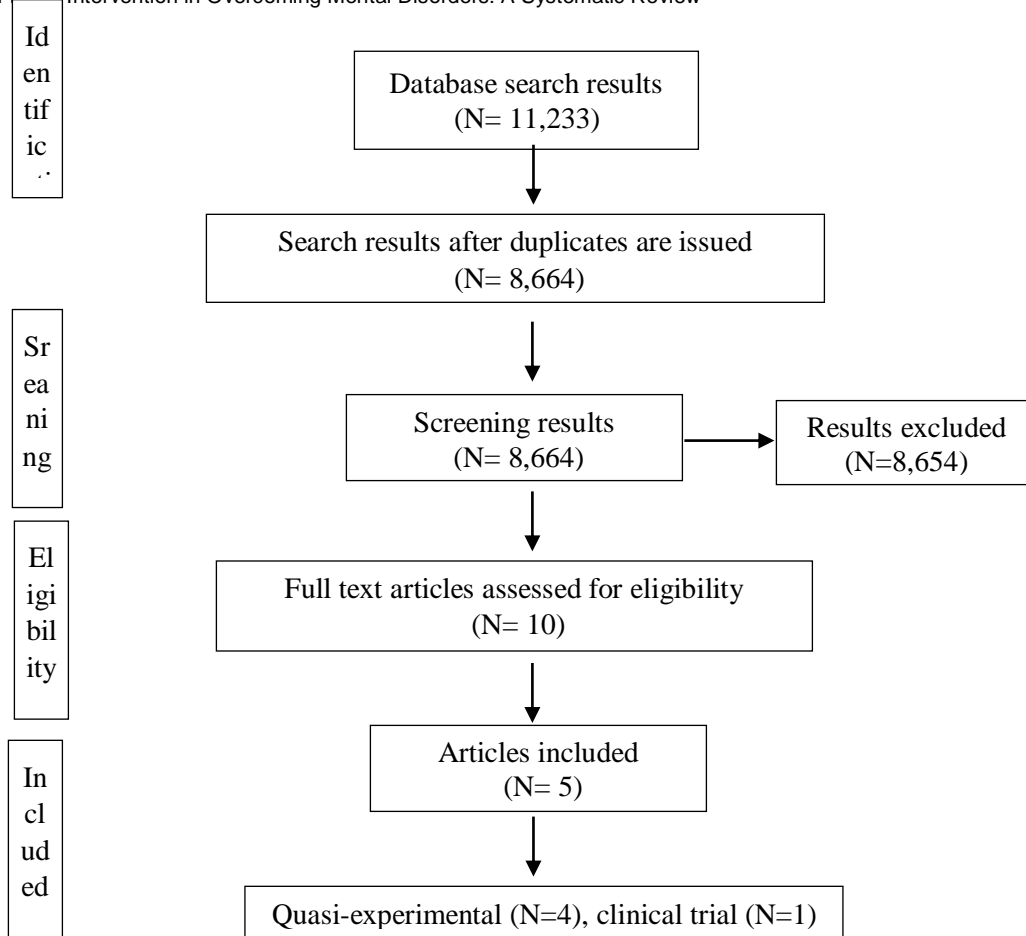
## METHOD

Sources for references used in this review are portals PubMeds, Science Direct, Medline, Sagepubs, Scopus, and PsycINFO. The references were searched using the following keywords: "*hope therapy*", "*hope intervention*", "*hope intervention program*", "*mental disorder*", and "*psychiatric symptoms*". Searching strategy is as follows: *hope therapy\* OR hope intervention\* OR hope intervention program\* AND Quasi-experimental\* OR randomize control trial\* OR clinical trial AND mental disorder\* OR psychiatric symptoms\** and *NOT review*. The articles were published in the period of 2000-2018.

Inclusion criteria in this study are all respondents with mental disorders, all ranges of age, hope intervention, hope intervention programs, hope therapy, quasi-experimental, randomized control trial, clinical trial, full text, and written in English. Exclusion criteria in this study are unpublished studies and proceedings. The researchers conducted analysis on titles and abstracts of all articles from the search database. Articles that met all inclusion criteria were chosen to be fully evaluated and extracted.

Article quality was evaluated using JBI check-list for quasi-experimental studies and CASP for randomized control trial studies.<sup>22,23</sup> Articles were extracted with forms that include: research title, writer, year of publication, research design, stages of intervention, components, and research results. The writers then conducted a narrative analysis in order to synthesize extracted data from the chosen articles/studies.<sup>24</sup>

Fig.1 PRISMA Flow Sheet Stages of Hope Intervention in Overcoming Mental Disorders: A Systematic Review



**RESULTS AND DISCUSSIONS**

From the searching process, 8664 titles and abstracts, not including duplicates, were found along with 10 fully-read full texts. Five articles were found to meet the criteria (Figure. 1). The writers identified 5 non-randomized studies of hope intervention in order to obtain psychological indicators on women with husbands that experienced addiction,<sup>25</sup> overcome psychiatric symptoms on infertile women,<sup>26</sup> depression, stress and anxiety on patients undergoing haemodialysis,<sup>27</sup> depression experienced by elderlies,<sup>28</sup> and hope and depression on mothers having cancers.<sup>29</sup> Provision of hope intervention is done in several stages.

Stages of providing hope intervention among others are introduction of hope intervention, goal setting, identification of strategy to achieve goals, reinforcement of motivation in implementing strategies to achieve goals, and evaluation. Complete elaboration of providing hope intervention can be seen in Table 2.

**First Stage: Introduction:** Provision of therapy begins with building good communication as the success of therapy is dependent on how well communication is conducted.<sup>30</sup> Introduction of hope intervention is performed by examining *hope* in life so as to give a clear picture of how *hope*

establishes positive psychology.<sup>15</sup> Patients undergoing hemodialysis often experience unease due to treatments that they have to go through so that in the introduction stage they are given explanation on the correlation among hope therapy, terminal stage kidney disease, hemodialysis and psychological problems in order to focus clients' ability in maintaining health<sup>27,31,32</sup> Introduction of hope intervention to the elderlies is done by self-narration in order to help clients to understand perspective of hope as well as to build togetherness and participation in the provision of intervention.<sup>28</sup> Introduction stage and intervention strategies for elderlies emphasizes on exploration of experiences and considers the process of aging.<sup>33</sup> Therefore, therapists need to consider the introduction stage as well as strategy that is going to be implemented based on population and problems faced by clients.

**Second Stage: Goal Setting**

Snyder expresses that goal is the source of emotion so that unrealized goal will result in negative emotion just like depression and vice versa.<sup>17</sup> Negative emotional reaction are not always similar from person with high *hope* to person with low *hope*.<sup>34</sup> The basic assumption about goal is that all human activities are aimed at reaching certain goals. Goal is the target of mental activity and becomes the

cognitive component of hope theory. Goals that are set can be short, middle or long terms and have to contain values that are realistic and can be reached. In addition to that, realization of goals faces uncertainty due to obstacles.<sup>35</sup> Therefore, goal becomes one of the most important elements in providing hope intervention.

**Third stage: Identification of strategy in order to achieve goals:** Strategy reflects one's ability to create solutions in order to realize certain goals.<sup>36</sup> People with high hope can adapt with unrealized goals by creating solutions to overcome existing obstacles. Thoughts that are full of hope are not only for realization of goals but also for directing people to overcome obstacles.<sup>34</sup> One of the biggest fears experienced by parents whose children have cancer is relapsing of the disease that has been remised or cured so that the strategy to prevent relapse becomes an important topic in hope intervention stages.<sup>37</sup> Moreover, holistic investigation on infertile women is conducted so as to identify to what extent patients are able to reduce and adapt their mentality towards infertile therapy that will be or being conducted in order to speed up recovery process.<sup>17,26,38,39</sup> Therefore, strategies that are planned must be adjusted to clients' ability. Alternative strategies, on the other hand, must also be provided in dealing with any obstacles during the realization of goals.

**Fourth Stage: Reinforcement of Motivation to implement strategies to achieve goals:** Motivation to achieve goals is reflected in positive self-talk that can be a kind of energy to start and maintain actions to achieve goals through predetermined strategies.<sup>40,41</sup> Motivation becomes very relevant when the initial strategies used to achieve the goal are hampered and there is a need to continue the motivation to carry out the appropriate alternative strategies.<sup>36</sup> 25-30% of parents experience an increase or prolongation of mental stress that affects family functions for a long time so building mental and physical strength becomes an important point.<sup>42</sup> Therefore, motivation becomes a source of strength that drives clients to achieve goals, especially when meeting obstacles in achieving goals.

**Fifth Stage: Evaluation:** Evaluation of interventions carried out aims to measure the overall effectiveness of interventions.<sup>43</sup> Evaluation is done by reviewing the sessions that have been conducted,<sup>25</sup> making a summary of the meetings that have been conducted,<sup>25,26</sup> and assessing the therapy using instruments.<sup>25-29</sup>

## CONCLUSION

The stages of hope interventions consist of introduction, goal setting, identification of strategies, reinforcement of motivation, and evaluation. The strategy of implementing hope intervention is tailored to the population and problems. Nurses, in stage hope interventions, are recommended to take into account the stages of hope intervention and strategies that are going to be used.

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Table 1. Stages Of Hope Intervention In Overcoming Mental Disorders: A Systematic Review

No	Research Title, Writer, and Year	Research Design	Stages of Intervention	Strategies	Results
1	Effectiveness of Group Hope Therapy on the Psychological Indicators in Women With Addicted Husbands (Anahita Khodabakhshi-Koolaee, Leili Mosalanejad, Morteza Gholami, Omid Massah, 2014)	Quasi-experimental study with pretest, posttest control group	<ol style="list-style-type: none"> <li>1. Introducing working mechanism and rules in the group</li> <li>2. Introducing basics of hope</li> <li>3. Finding hope on someone</li> <li>4. Increasing/improving hope</li> <li>5. Reinforcement and building strength</li> <li>6. Building determination</li> <li>7. Belief to solve problems</li> <li>8. Finishing of hope therapy</li> </ol>	<ol style="list-style-type: none"> <li>1. Building communication and training to be good listener</li> <li>2. Reviewing basics of hope in life</li> <li>3. Helping mothers to understand elements of hope and write down hopes in life</li> <li>4. Creating solutions to overcome problems</li> <li>5. Setting actions to achieve goals</li> <li>6. Determining things that can be done and cannot be done</li> <li>7. Maintaining hope in mothers</li> <li>8. Making summaries and reviewing meetings that have been conducted</li> </ol>	Hope therapy increases positive elements of psychology such as determining goals and meaning of life on the wives of male patients experiencing addiction
2	Therapeutic Vaccines: Hope Therapy and Its Effects on Psychiatric Symptoms among Infertile Women (Leili Mosalanejad, Khadije Abdolahifard & Masoumeh Golestan Jahromi, 2014)	Quasi-experimental study with pretest, posttest control group	<ol style="list-style-type: none"> <li>1. Explanation related to intervention</li> <li>2. Directing hope</li> <li>3. Affirming hope (2 meetings)</li> <li>4. Restoring/repairing hope (2 meetings)</li> <li>5. Maintenance of hope</li> <li>6. Comprehensive investigation</li> <li>7. Evaluation</li> </ol>	<ol style="list-style-type: none"> <li>9. Giving description of hope therapy</li> <li>10. Explaining hope and its positive results, expression of optimism result and role of hope in mental health and improvement of quality of life.</li> <li>11. Organizing components of hope, i.e. goals, looking for components and strategies, and effects of behavior that one shows towards life.</li> <li>12. Creating specific logical goals in life related to management of infertility therapy and satisfying husband-wife life.</li> <li>13. Trying to achieve life goals</li> <li>14. Exploring infertility treatment, strategy and</li> </ol>	Hope therapy is effective in increasing hope and improving infertile women's health

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No	Research Title, Writer, and Year	Research Design	Stages of Intervention	Strategies	Results
				psychological techniques to be used 15. Assessing success of therapy and summarizing stages that are conducted in the group	
3	Effect of hope therapy on depression, anxiety, and stress among the patients undergoing hemodialysis (Meisam Rahimpour, Nahid Shahgholian, Mohsen Yazdani, 2018)	Clinical trial	1. Introduction and explaining about therapy that will be conducted 2. Developing hope 3. Developing method of problem solving and talking about life experiences 4. Categorizing the client's story into the components of the Snyder hope theory 5. The client prepares a list of recent events, the most important thing, determining the importance and level of satisfaction 6. Explaining the characteristics of objectives based on Snyder's theory and encouraging clients to set goals in each domain of life 7. Explaining the characteristics of the pathway and finding the right strategy to achieve the goal Evaluation	1. Establishing communication and conveying the stages of therapy and the relationship between terminal stage kidney disease, hemodialysis, and psychological problems including stress, anxiety, and depression. 2. Increasing hope and discussing the effect of hope on stress, anxiety, and depression and the role of hope in solving problems and disorders encountered 3. Encouraging clients to use their strengths to achieve hope. Helping clients to create logical hope and identifying behaviors that interfere with hope to form psychological structures 4. Finding problems related to hope and experience of success in the client's life to identify factors and pathways 5. Revealing clients' experiences related to success in overcoming loss of hope 6. Helping clients to overcome obstacles in achieving goals through increased understanding of the physical and mental aspects 7. Teaching clients about positive strategies for self-report and self-image to achieve goals and clients learn to form and maintain the factors needed to achieve goals and realize the strategies needed Measuring the level of depression, anxiety and stress after getting therapy	Hope therapy reduces depression, anxiety and stress in patients undergoing hemodialysis
4	The Efficacy of Hope Therapy on the Elderly Depression in Mehriz Day Care Centers (Leila Farzadegan, Hassan Zareei Mahmoodabadi and Mansoreh Nasirian, 2016)	Quasi-experimental study with pretest, posttest control group	1. Finding hope; recognizing hope through self-narration 2. Reinforcement/Strengthening of hope 3. Augmentation of hope 4. Continuity/Sustainability of hope	1. Encouraging clients to tell the problem at hand and helping clients change the events told based on the perspective of hope 2. Strengthening client's hope by building solidarity and cooperation between therapist and client 3. Determining logical goals, determining strategies to achieve goals, saving energy to achieve goals, interpreting obstacles that cannot be overcome as problems that must be overcome 4. Helping clients increase hope through the recognition of hopeful thoughts, identifying obstacles, and determining the right target by considering obstacles	Hope therapy plays an important role in reducing the level of depression in the elderly.
5	The Effectiveness of Group Hope Therapy on Hope and Depression of Mothers with Children Suffering from Cancer in Tehran (Ghazaleh Shekarabi-Ahari, Jalal Younesi, Ahmad Borjali, Shahla Ansari-Damavandi, 2012)	Quasi-experimental study with pretest, posttest control group	1. Introduction of Hope theory 2. Emotions come from unrealized and realized goals 3. Concrete goals 4. Physical/Mental Strength 5. Making Goal Diagram 6. Physical Willingness 7. Obstacles 8. Healing Interval and Relapse	1. Providing an explanation related to the definition of goals and obstacles, strategies to achieve goals, and strategies to maintain motivation 2. The hindered goals are challenged with will and the goals that are realized motivate determination 3. Making goals that can be achieved and measured 4. Positive expression towards yourself to achieve goals 5. Defining the steps to achieve the goal 6. Healthy eating and exercise to improve physical abilities 7. Recognizing obstacles to goals or obstacles in achieving the goals 8. How to avoid the recurrence time interval	Hope therapy increases hope and reduces depression in mothers with children who have cancer

Table 2. Result of Review of the Stages of Hope Intervention in Overcoming Mental Disorders

No	Stages of Hope Intervention Provision	Strategies
1	Introduction to hope interventions: a. Introducing the mechanism of work and regulation in the group <sup>25</sup> b. Introducing the basics of hope <sup>25</sup> c. Explanation related to the intervention that will be given <sup>26</sup> d. Directing hope <sup>26</sup> e. Confirming hope <sup>26</sup> f. Introduction and explaining the therapy that will be done <sup>27</sup> g. Finding hope; recognizing hope through self-narration <sup>28</sup> h. Reinforcing hope <sup>28</sup> i. Introduction to the theory of hope <sup>29</sup>	1. Creating communication and training to be a good listener <sup>25</sup> 2. Reviewing the basics of hope in life <sup>25</sup> 3. Providing an overview of hope therapy <sup>26</sup> 4. Explaining the hopes and positive results, expressions of the results of optimism and the role of hope in mental health and improving quality of life <sup>26</sup> 5. Organizing the hope component, i.e. goals, looking for components and strategies, and the effect of the attitude shown towards life <sup>26</sup> 6. Establishing communication and conveying the stages of therapy and the relationship between terminal kidney disease, hemodialysis, and psychological problems including stress, anxiety, and depression <sup>27</sup> 7. Encouraging clients to tell the problem at hand and helping clients change the events told based on the perspective of hope <sup>28</sup> 8. Strengthening client's hope by building solidarity and cooperation between therapist and client <sup>28</sup> 9. Providing explanations related to the definition of goals and obstacles, strategies for achieving goals, and strategies for maintaining motivation <sup>29</sup>
2	Goal setting: a. Finding hope <sup>25</sup> b. Fixing hope <sup>26</sup> c. Explaining the characteristics of objectives based on Snyder's theory and encouraging clients to set goals in each domain of life <sup>27</sup>	10. Helping mothers to understand the elements of hope and write down hope in life <sup>25</sup> 11. Creating specific, logical goals in life related to management of infertility therapy and satisfying husband - wife life <sup>26</sup> 12. Helping clients to overcome obstacles in achieving goals through increased understanding of the physical and mental aspects <sup>27</sup> 13. Setting goals <sup>28</sup>

Table 2. Result of Review of the Stages of Hope Intervention in Overcoming Mental Disorders

No	Stages of Hope Intervention Provision	Strategies
	<ul style="list-style-type: none"> <li>d. Augmentation of hope<sup>25</sup></li> <li>e. Emotions originate from goals achieved and not achieved<sup>29</sup></li> <li>f. Concrete goals<sup>29</sup></li> </ul>	<ul style="list-style-type: none"> <li>14. Hampered goals conflict with will and goals achieved motivate determination<sup>29</sup></li> <li>15. Making goals that can be achieved and measured<sup>29</sup></li> </ul>
3	<p>Identify strategies to achieve goals:</p> <ul style="list-style-type: none"> <li>a. Increase hope<sup>25</sup></li> <li>b. Reinforcing and building strength<sup>25</sup></li> <li>c. Comprehensive investigation<sup>26</sup></li> <li>d. Developing problem-solving methods and telling life stories<sup>27</sup></li> <li>e. Categorizing client stories into components of the Snyder hope theory<sup>27</sup></li> <li>f. Explain the characteristics of the pathway and find the right strategy to achieve the goal<sup>27</sup></li> <li>g. Augmentation of hope<sup>28</sup></li> <li>h. Making the goal diagram<sup>29</sup></li> <li>i. Obstacles<sup>29</sup></li> <li>j. Healing interval and relapse<sup>29</sup></li> </ul>	<ul style="list-style-type: none"> <li>a. Creating ways to solve problems<sup>25</sup></li> <li>b. Determining actions to achieve goals<sup>25</sup></li> <li>c. Exploring infertility treatments, strategies, psychological techniques used<sup>26</sup></li> <li>d. Encouraging clients to use their strengths to achieve hope. Helping clients to create logical hope and identify behaviors that interfere with hope to form psychological structures<sup>27</sup></li> <li>e. Finding problems related to the hope and experience of success in the client's life to identify factors and pathways<sup>27</sup></li> <li>f. Teaching clients about positive strategies for self-report and self-image to achieve goals and clients learn to form and maintain the factors needed to achieve goals and realize the strategies needed<sup>27</sup></li> <li>g. Strategies to achieve goals<sup>28</sup></li> <li>h. Identifying steps to achieve goals<sup>29</sup></li> <li>i. Recognizing goal barriers<sup>29</sup></li> <li>j. How to avoid relapse<sup>29</sup></li> </ul>
4	<p>Strengthening motivation to carry out strategies to achieve goals:</p> <ul style="list-style-type: none"> <li>1. Building the power of determination<sup>25</sup></li> <li>2. Confidence to solve problems<sup>25</sup></li> <li>3. Maintenance of hope<sup>26</sup></li> <li>4. The client prepares a list of recent events, the most important thing, determining the importance and level of satisfaction<sup>27</sup></li> <li>5. Sustainability of hope<sup>28</sup></li> <li>6. Mental / physical strength<sup>29</sup></li> <li>7. Physical strength<sup>29</sup></li> </ul>	<ul style="list-style-type: none"> <li>a. Determining the do's and don'ts<sup>25</sup></li> <li>b. Maintaining expectation in mothers<sup>25</sup></li> <li>c. Maintaining hope<sup>26</sup></li> <li>d. Revealing client experience related to success in overcoming loss of hope<sup>27</sup></li> <li>e. Helping clients increase hope through an understanding of hopeful thoughts/thinking, identifying obstacles, and determining the right target by considering obstacles<sup>28</sup></li> <li>f. Positive affirmation towards yourself to achieve goals<sup>29</sup></li> <li>g. Healthy eating and exercise to improve physical abilities<sup>29</sup></li> </ul>
5	<p>Evaluation</p> <ul style="list-style-type: none"> <li>a. Completion of hypotherapy<sup>25</sup></li> <li>b. Evaluation<sup>26,27</sup></li> </ul>	<ul style="list-style-type: none"> <li>a. Making a summary and reviewing the meetings that have been conducted<sup>25</sup></li> <li>b. Assessing the success of therapy and summarizing the stages carried out in groups<sup>26,27</sup></li> </ul>