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# 1 Introduction

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*Caring for Adults with Mental Health Problems* aims to offer a foundation for those who provide, or wish to provide, health care and support for people with mental health problems. Those who have contributed to the book come from various backgrounds – both practice and academia. The authors are committed to creating and sustaining a positive mental health environment for all; they believe that each person is a unique being with individual needs and aspirations – each chapter of this book reflects these values, attitudes and hopes.

Caring for those who have mental health problems can be complex and rewarding; making a difference really does mean that. It is estimated that at least as many as one in six adults experiences mental ill health at some time in their life; furthermore, the World Health Organization predict that by 2020 depression will be the leading cause of disability (Collishaw *et al.* 2004). Those who have mental health problems can face discrimination and prejudice in society, for example they may have difficulty in accessing education and other statutory services as a result of their illness. There are some members of our society who are excluded from accessing services because of mental health legislation; Lee in her chapter concerning legal matters (Chapter Six) considers those individuals.

We wholeheartedly believe that people with mental health problems deserve the best possible care and support; in order to offer this, mental health professionals must have an understanding of the context of the individual service user's life, both in the community and also within the various healthcare settings. Those who are supported effectively in the community can remain well. This text is designed to encourage the reader to push forward the possibilities associated with mental health care, providing innovative and contemporary approaches to care and support. The notion of partnership is central to effective client-centred care. It is vital that care and support are to be delivered in the most appropriate manner, and this text encourages the reader to apply this approach to care delivery in any situation in which they may be working. In Illingworth's chapter (Chapter Four), the importance of partnership working and the benefits that this may bring the patient are emphasised, looking beyond a disease-orientated approach to one where the patient is central. Such an approach is in tandem with the current Government's

desire to provide a health service that is designed around the patient, as opposed to the needs of the patient being forced to fit around the service already provided (Department of Health 2006).

The primary audience for this text are nursing students, those who are undertaking NVQ/SNVQ, Access to Nursing, Cadet nursing programmes of study and those returning to practice, but not exclusively those cited. The text may feel as comfortable on the shelves of a book case at home as in an academic library. However, the text should not be seen as a comprehensive book discussing all the needs of the person with a mental health problem – that would be an impossibility – rather the reader is encouraged to identify further topics of importance that have not been considered here and to delve deeper. The terms and the philosophies applied to this book can be adapted to suit a number of health care workers at various levels and in a range of settings in order to develop individual health care workers' caring, informed skills.

The book uses up-to-date information that the reader will require in order to begin to understand how to help, support and care for those with mental health problems both in the institutional setting (e.g. the hospital) and in the community (e.g. the home setting). The material is organised in such a way that it reflects contemporary practice in a user-friendly manner; in addition, information is related to clinical practice issues that may be experienced when working with people with mental health problems, their families and friends. It is not envisaged that the text be read from cover to cover in one sitting; it has been designed to be used as a reference book (a resource, a reader) either in the clinical setting, classroom or at home.

The text should be seen as a handbook or a manual that has a sound evidence base, and one that will challenge and encourage the reader to develop a questioning approach to care provision. It emphasises the integration of theory and practice. If you are currently studying, in order to get the most out of this book you are strongly encouraged to attend all of your classes associated with your current programme of study, using this text to supplement and support your theoretical and clinical learning. Much of the discussion is placed against the backdrop of the Mental Health Act 1983 and *A National Service Framework for Mental Health* (Department of Health 1999). Other key documents, publications and statutes are also used to inform debate.

The overarching aims are to help the reader to understand the fundamental aspects of care in order to facilitate safe and effective practice; to stimulate thought and to generate discussion – this will encourage the development of effective caring skills underpinned by a sound knowledge base. This is a foundation text that will enable personal growth in relation to mental health care.

## **CHANGES IN SOCIETY**

It is important to set the scene, putting into context the extent to which society lives and changes in an attempt to understand the needs of those who you may need to

provide care and support for. The proportion of those who live alone is expected to increase over the next 20 years. This is due to several factors, for example an increased longevity, as well as changes in familial structures. Contemporary society is much more geographically mobile than it was 20 years ago. Twenty-one per cent of those aged 65 years or over see their family or friends less than once a week or not at all (Office of National Statistics 2001). The consequences of these changes can result in profound mental health problems and challenges, and will have an impact on the individual, their friends, carers and service providers.

## **MENTAL HEALTH ISSUES AND THE OLDER POPULATION**

The number of those aged 65 years and over with mental health problems is growing. Those aged 65 years and over with mental health problems will rise in the next ten years by 10%, with the greatest burden being on those who are aged over 80 years. Depression and dementia are common problems that will increase in the elderly population (Department of Health 2005). Hahn in her chapter regarding the dementias (Chapter Thirteen) discusses these issues further.

## **A WORD ABOUT TERMINOLOGY**

Often a difficult task when writing a textbook is the choice of the terms to be used. It is important to define terms from the outset as different terms can mean different things to different people. There are a diversity of terms that can be used to describe people with mental health problems. Using any term can lead to labelling; Brownbill in his chapter considers the implications associated with using labels in his discussion on contemporary views associated with mental health and mental illness (Chapter Three).

A common expression that is often used within the NHS is 'patient', and on a few occasions this has been used in this text. It is acknowledged that not everyone supports the use of the passive concept associated with this term; it can emphasise the medical focus of the relationship between the person and the service.

The use of 'client' can have the potential to emphasise the professional nature of the relationship. Client and consumer have their roots in health care provision during the 1980s and 1990s, when market forces and consumerism were to the fore.

More recently, the term 'expert' has been used, the emphasis being placed on a participative approach, which acknowledges a person's capacity to work towards their own rehabilitation. Experts are seen to be on a par with the experts who provide care, for example a nurse or doctor. This term values the views and experiences of the expert: the service user.

Not all people like the terms 'service user' or 'user'; such terminology could lead to the grouping together of an otherwise diverse community of individuals with very individual needs. The term 'user' may also have some negative connotations

associated with it. It could be used to identify those who are involved in the use of illicit substances.

‘People with mental health problems’ is a term that has already been used in this introductory section. This is a broad definition that is often used by various agencies. In this context, it has the potential to acknowledge that many people can experience mental health problems and that those problems cannot necessarily be understood in terms of being an illness or a disease.

‘Survivor’ is a term that is relatively new and can be used to describe people who have experienced life events such as sexual abuse, torture, racism or sexual oppression. When used appropriately, it can empower the person. Often the term is used by self-help groups and other voluntary organisations.

This text uses various terms and aims to promote the care and support of those with mental health difficulties and mental health distress. The terms used here cover a wide range of experiences that may affect anyone at any time. There are many terms, which should be avoided, that will only result in stigma and prejudice, causal words such as ‘mad’ or ‘crazy’ must be avoided at all times. Try to listen to and respect the terminology that is being used by those who are experiencing mental health difficulties themselves.

The phrase ‘carer’ has been used on many occasions in this book. This term is used to describe those who look after others, whether they be ill, healthy or have a disability. ‘Carer’ has many interpretations and may refer to a professional health care worker or to an unpaid relative, friend or volunteer providing care. It has been estimated that there are approximately six million unpaid carers in the UK (Carers UK 2005); this figure includes parents, grandparents and siblings who are looking after sick children.

## **THE CHAPTERS**

It has already been stated that this text does not attempt to address every aspect of mental health care. The chapters have been arranged in order to provide insight into the complexities of providing care to those who may have a mental health problem. This book endeavours to provide the reader with a straightforward understanding of some of the issues that may impinge on an individual’s well-being.

Chapter Two sets the scene and places mental health care in an historical context. The history of mental health care is brought up to date with a discussion of contemporary philosophies and ways of understanding the complex phenomena associated with mental health and mental health illness. Chapter Three considers the various perspectives regarding mental illness. The chapter includes a discussion of the models of mental health care that can be used and also the effects these may have on an individual’s well-being.

Chapter Four considers the importance of partnership working within mental health care. The health care worker never operates in isolation, he or she is a part of a multidisciplinary team, and effective communication within this team

is vital if the best quality care is to be provided. Caring for the person with mental health problems can sometimes be challenging, and those working in the mental health arena must liaise with a range of health and social care professionals from various statutory, independent and voluntary agencies. Those health and social care professionals and their roles are described.

Mental health promotion is primarily concerned with how individuals and communities can enhance and influence the mental health of the nation. Chapter Five identifies how emotional resilience can be enhanced to enable an individual's positive sense of well-being, promoting dignity and worth. Mental health promotion takes place in various settings, and the application of mental health promotion in some of these settings is discussed. Fulfilling an individual's health potential is central to care, and this chapter discusses various health-promotion strategies.

In Chapter Six, issues concerning the law, ethics and morals are discussed. Insight into some of the key statutory legislation that governs mental health care is provided. In addition, the chapter is designed to enhance the reader's understanding and knowledge of the legal ramifications of working with people with mental health problems in order that they may be able to confidently approach this work.

Chapters Seven to Thirteen provide the reader with insight and understanding associated with a number of common presenting mental health problems. These chapters also outline the potential interventions required. Generally, the aetiology, prevalence (if appropriate), presenting features, care and management of various mental health problems are outlined. Consideration has been taken to steer away from labelling as well as using a medical model approach. A holistic, individualised approach is advocated by the authors of these chapters.

Approaches associated with mental health care are described in Chapter Fourteen in an attempt to explain how carers can help the individual, a therapeutic/helping approach is advocated. The care planning process is outlined; effective communication and interpersonal skills are central to practice. The chapter explores various types of intervention – from medical interventions to psychotherapeutic ones and art therapies, such as dramatherapy and art therapy – as well as discussing the role of the service user's family.

We have endeavoured to provide you with an interesting, informative and up-to-date snapshot of mental health care. We have enjoyed this challenge and hope that you find the chapters interesting and thought-provoking, and, most importantly, we anticipate that the care and support you provide will be enhanced as a result of your learning.

## REFERENCES

- Carers UK (2005) *A Manifesto for Carers*. London, Carers UK.
- Collishaw S, Maughan B, Goodman R, Pickles A (2004) *Time Trends in Adolescent Health*. London, Nuffield Foundation.
- Department of Health (1999) *A National Service Framework for Mental Health*. London, Department of Health.

Department of Health (2005) *Independence, Well-being and Choice: Our Vision for the Future of Social Care for Adults in England*. London, Department of Health.

Department of Health (2006) *Our Health, Our Care, Our Say: A New Direction for Community Services*. London, Department of Health.

Office of National Statistics (2001) *Living in Britain: General Household Survey 2001*. London, The Stationery Office.