

INTRODUCTION

In the first decade of the twenty-first century mental health practitioners have witnessed unprecedented changes in mental health law and policy that have had profound consequences for their professional practice. In this book we explore the historical, theoretical and political contexts underpinning these changes and their impact on mental health practitioners and on users of mental health services and their carers. Many of the changes that have taken place (and are still taking place) relate to the emergence of new professional roles, skills and systems of service delivery that are no longer so clearly tied to traditional disciplinary lines. The traditional boundaries around 'who does what' in mental health care are being renegotiated and users of mental health services and their carers are increasingly influential in shaping the modern mental health system.

In this context it might then appear strange that this book should address itself to understanding *social work* practice in mental health. However, the focus on social work is deliberate and our defence of this rests in our belief in the central importance and distinctive contribution that social work makes in advancing a *social* model of mental health theory and practice that is highly valued by users of mental health services and their carers. Unlike many other mental health professions, social work has not always been very good at articulating precisely what it is that it brings to the field of mental health. In recent years this has started to change and, as we will discuss in this book, perhaps out of the necessity to ensure its survival, social work is reasserting its identity.

Understanding Social Work Practice in Mental Health will enable students of social work develop core knowledge, understanding, skills and values for professional social work practice in the mental health context. However, it is not an instruction manual on 'how to do mental health social work'. Rather, we firmly believe that it is only through a critical social scientific interrogation of the modern mental health system that students can learn to develop as critically reflective practitioners. Social workers are currently the only mental health practitioners with social science training. Whereas traditionally the emphasis in mental health education and training is on medical diagnosis, treatments and medication and mental health law, social work students are concerned with:

- developing an understanding of mental health theory, law, policy and practice as contested arenas
- developing a critical awareness of various theoretical and ideological perspectives that have contributed to knowledge about mental health and mental distress in multi-professional contexts

- developing an understanding of the complex moral and ethical dimensions underpinning mental health theory, law, policy and practice
- developing an understanding of, and way of working with, the personal and social consequences of inequality, discrimination, stigma and abuse
- learning to tolerate uncertainty and complexity in practice.

This book is deliberately designed to encourage students to critically examine the world of mental health theory, law, policy and practice from a variety of perspectives – those of users of mental health services, their carers and mental health professionals. To achieve this we use case studies, exercises and questions to stimulate debate and engage readers in critical reflection on key contemporary issues in mental health practice. Explicit links are made to academic and professional standards, codes of practice and frameworks for social work and mental health. Saying this, the book is not *exclusively* directed at students of mental health social work. The range of issues explored here should be of equal interest and relevance to other mental health practitioners – particularly given the strong drive in government policy towards interprofessional education, training and practice. Additionally, the book is designed to be of interest to anyone studying mental health and mental distress outside of the professional context.

In Chapter 1 we explore the contested nature of mental health and mental distress, introducing the different terminology, concepts and theories used in the field. This will include lay understandings of and attitudes towards mental distress in addition to professional perspectives, as both are significant in contemporary mental health practice. The power of language, images and representations of mental health and mental distress that circulate in society and contribute to the construction of the person in mental distress as ‘other’ is a key theme. Readers are invited to examine and reflect on their own personal attitudes to mental distress as a basis for understanding the stigma that is associated with receiving a mental health diagnosis. We outline and debate the relative contribution of medical and social models of mental health and illustrate the tensions between them in the context of how a person becomes a user of mental health services. We conclude with a discussion of the importance of developing a holistic, user-centred approach to mental health assessment.

In Chapter 2 we review the background to the modern mental health system with specific reference to the various historical perspectives on the emergence of British psychiatry and the development of formal institutionalized mental health care – from madhouses to asylums; from asylums to mental hospitals; and from hospitals to community mental health care. The origins and development of social work practice with the mentally distressed in this early period are also outlined and discussed.

Building on the discussion from the latter part of Chapter 2, Chapter 3 traces the implementation and further development of community care policy and practice for the mentally distressed from the early 1990s to the present. We begin by exploring what is meant by ‘community care’, acknowledging the role of ‘informal carers’ – that is care provided by relatives, friends, neighbours and

volunteers. The implementation of the NHS and Community Care Act 1990 is subjected to critical evaluation and the role of the media in cultivating a climate of fear amongst the general public around community care for the mentally distressed is also explored. The chapter moves on to outline the 'modernization' policy reforms introduced by the New Labour government from the late 1990s onwards, including the *National Service Framework for Mental Health* (DH, 1999a) and the modern Care Programme Approach. The chapter concludes with a critical discussion around New Labour's 'personalization agenda' as it relates to those in mental distress.

Chapter 4 deals with the highly controversial subject of the compulsory detention of individuals identified as mentally disordered and the inherent tensions and conflicts faced by mental health practitioners when implementing mental health law. Indeed these tensions and conflicts have dominated the history of mental health legislation in England and Wales. The statutory context for modern mental health practice is explained, including the sectioning process and the roles of the various individuals and organizations related to it. The politics of compulsory detention and treatment are debated in the context of the burgeoning contemporary emphasis on managing risk in mental health practice. The chapter concludes with a discussion of the significance of human rights legislation in mental health practice and establishes some principles of good practice in implementing mental health law.

One of the most important consequences of the power of psychiatric theory is that it determines how people with mental health problems are responded to. Throughout the history of mental health care it has been possible to identify preferences in the approach to 'treatment'. However, there is an overriding unresolved tension between those psychiatric technologies that are primarily directed at the body and those which focus on the mind. In Chapter 5 we explore and critique some of the main contemporary approaches to treating mental distress – physical, psychological and social. Recent developments around the notion of 'recovery' in mental health care are discussed with particular emphasis on user-definitions of what this term means and how best to promote it. The chapter concludes with a critical discussion of evidence-based practice and the dynamics of power in mental health research. Crucially this will address the question of 'what counts as evidence and who decides'? It is argued that those in mental distress and their carers are 'experts by experience' and therefore user-focused and user-led approaches should be at the heart of mental health research and evaluation.

Drawing on Thompson's (2006) PCS (personal, cultural, structural) analysis, we begin Chapter 6 by theorizing the processes that produce and sustain inequalities, discrimination and oppression in the lives of people who use services. We then move on to explore how the dynamics of discrimination and inequality shape the lives of people in mental distress and their experiences of mental health services. Key diversity issues for mental health practitioners are highlighted including: class; race and ethnicity; gender; sexual orientation; disability; and age. The history of collective resistance to psychiatric oppression is acknowledged in an examination of the

growth and impact of the mental health user movement. The chapter concludes with a discussion of the need for human rights based approaches to mental health care.

Chapter 7 provides an overview of the policy developments underpinning the move towards integrated services and interprofessional working in mental health, and critically analyses the implications of these for workforce development, education and training and service delivery. Messages from research studies evaluating interprofessional working in mental health are highlighted and the tensions between social work and health practitioners are explored. The chapter concludes with a discussion of the challenges currently facing social workers in integrated mental health teams and reasserts the distinctive contribution of social workers to high quality user- and carer-centred mental health care.

Finally, in the conclusion we revisit some of the central themes of the book and reassert the argument that critically reflective practice must be underpinned by a solid grounding in critical social science. We focus on what it means to be a critically reflective practitioner, emphasizing how the knowledge, skills and values of social work in particular are consistent with the expectations of what is required to meet the 'future vision' for mental health services (Future Vision Coalition, 2008).



UNDERSTANDING MENTAL HEALTH AND MENTAL DISTRESS

This chapter can be used to support the development of knowledge and skills in professional social work as follows:

National Occupational Standards for Social Work

Key Role 1: Prepare for and work with individuals, families, carers, groups and communities to assess their needs and circumstances

- Prepare for social work contact and involvement.

Key Role 3: Support individuals to represent their needs, views and circumstances

- Advocate with and on behalf of, individuals, families, carers, groups and communities.

Key Role 6: Demonstrate professional competence in social work practice

- Managing complex ethical issues, dilemmas and conflicts.

(TOPPS England, 2002)

Academic Standards for Social Work

Honours graduates in social work:

4.4 should be equipped to understand, and to work within, the context of contested debate about the nature, scope and purpose of social work, and be enabled to analyse, adapt to, manage and eventually to lead the processes of change.

4.6 must learn to:

- recognise and work with the powerful links between intrapersonal and interpersonal factors and the wider social, legal, economic, political and cultural context of people's lives
- understand the impact of injustice, social inequalities and oppressive social relations
- challenge constructively individual, institutional and structural discrimination.

4.7 should learn to become accountable, reflective, critical and evaluative which involves learning to:

- think critically about the complex social, political and cultural contexts in which social work is located.

5.1 should acquire, critically evaluate, apply and integrate knowledge and understanding in relation to:

5.1.1 Social work services, service users and carers

- the social processes (associated with, for example, poverty, migration, unemployment, poor health, disablement, lack of education and other sources of disadvantage) that lead to marginalisation, isolation and exclusion and their impact on the demand for social work services
- explanations of the links between definitional processes contributing to social differences (for example, social class, gender, ethnic differences, age, sexuality and religious belief) to the problems of inequality and differential need faced by service users
- the nature and validity of different definitions of, and explanations for, the characteristics and circumstances of service users and the services required by them, drawing on knowledge from research, practice experience, and from service users and carers.

5.1.4 Social work theory

- research-based concepts and critical explanations from social work theory and other disciplines that contribute to the knowledge base of social work, including their distinctive epistemological status and application to practice
- the relevance of sociological perspectives to understanding societal and structural influences on human behaviour at individual, group and community levels
- the relevance of psychological and physiological perspectives to understanding individual and social development and functioning
- models and methods of assessment, including factors underpinning the selection and testing of relevant information, the nature of professional judgement and the processes of risk assessment and decision-making.

5.5.3 should be able to analyse and synthesise information gathered for problem solving purposes to:

- assess the merits of contrasting theories, explanations, research, policies and procedures
- critically analyse and take account of the impact of inequality and discrimination in work with people in particular contexts and problem situations.

(QAA, 2008)

Key themes in this chapter

- The scope and definitions of mental health and mental distress
- Examining personal attitudes towards mental distress
- The power of language, images and representations of mental health and mental distress
- Theorizing mental health – medical and social models
- Becoming a user of mental health services
- Developing an holistic, user-centred approach to mental health assessment.

INTRODUCTION

This chapter introduces the different terminology, concepts and theories used to describe and understand mental health and mental distress. This is an important starting point as it is vital that practitioners appreciate the diverse, often antagonistic, nature of the language, ideas and explanations that have evolved in this area over time. Pilgrim and Rogers (2005) and Parker et al. (1995) explain that what we know about mental health and mental distress has been influenced in two ways; first through popular culture (everyday language, popular fiction, painting, photography, songs, news and entertainment media) and secondly through professional discourses (psychiatry, psychology, social work and the law). These interact in complex ways producing a powerful fusion of common-sense and ‘scientific’ knowledge that can be difficult to unravel. Therefore this chapter also involves a critical analysis of the relationship between lay and professional knowledge in this field in order to understand the basis of contemporary mental health practice. The process of becoming a user of mental health services is subjected to critical examination, and in particular the process of mental health assessment. As you engage with the materials and exercises you will learn to appreciate that the knowledge base of mental health social work is far from straightforward. Social work practice in this field is inherently complicated, with assessments and interventions often fraught with controversy, tension and contradiction.

DEFINITIONS AND TERMINOLOGY

It is often argued that lay attitudes towards people in mental distress reflect a lack of understanding and knowledge (MIND, 2007a; Thornicroft et al., 2007). For example, surveys of the general public consistently show confusion about what mental distress actually is (DH, 2003a). However, this is not really surprising since there is significant disagreement amongst academics and professionals on this. Ways of understanding and defining mental health and mental distress are constantly