Psychiatric Nursing Outside Hospitals: Some Observations

Nagarajaiah[1], R. Parthasarthy[2], Mohan K. Isaac[3] and Reddamma, K.[4]

"Community mental health is legally defined to cover a variety of activities. It includes primary prevention activities that focus on the prevention of mental and emotional disorders, secondary prevention activities that try to reduce the likelihood of mental and emotional illness from developing in persons at risk, and tertiary activities that address the care and management of people who experience serious and long term psychiatric problems and who may need episodic or continuous hospitalisation in a mental institution or psychiatric unit" (Koldjeski; 1984).

According to mental health experts in the field, community mental health is distinguished from the more traditional mental health related activities by its emphasis on practice in the community as opposed to practice in Institutional settings. The ideology of community mental health embodies at least 10 beliefs that continue to be used. These beliefs have been summarised from Bloom's (1977) discussion of the meaning of community mental health. Community mental health will:

1. Provide mental health care in the community as opposed to Institutional Settings.
2. Focus services on a total community or population rather than on individual patients; catchment areas will define the population of concern for a particular community mental health center.
3. Focus on prevention services as distinguished from therapeutic ones.
4. Provide continuity and comprehensiveness of services rather than the care based on illness episodes.
5. Provide indirect services such as consultation and mental health education rather than direct service to patients and clients.
6. Innovative clinical strategies designed to meet more promptly the needs of large numbers of people.
7. Plan realistically by using demographic data and community involvement to establish priorities for needed mental health services.
8. Develop and train new mental health workers who bring in dimensions of mental health care not generally provided by the core mental health disciplines.
9. Identify sources of stress within communities on the assumption that individual pathologies do not always arise as a result of intrapsychic conflict and tensions.
10. Obtain commitment of community involvement for mental health planning and programming.

This ideology of community mental health serves as a base line by which the Psychiatric Nursing professionals might understand their contribution and services in community settings. Community Mental Health Nursing is characterised by a unique clinical process based on a synthesis of concepts from Nursing, mental health, physical health, social psychology, psychology, community networks and organisations and the basic sciences. The clinical process is applied in a systematic way to families and other kinds of primary socialization groups to promote and maintain high levels of functioning that are related to positive mental health of members.

Carr et al. (1980) identified the following six dimensions of the role of the Community Psychiatric Nurse.

1. Consultant: giving advice to other professionals in the Community, about the type and level of psychiatric nursing required for a given client/client group.
2. Clinician: delivering nursing care to clients in the community.
3. Therapist: employing psychotherapeutic and behavioral methods of treatment (e.g. in secondary prevention).
4. Assessor: the community Psychiatric Nurse may assess the care requirements of a given client/client group and may also assess the efficacy of ongoing care programmes.
5. Educator: of other professions, nursing students and vulnerable groups in the community. Education should not only be about aspects of treatment/care but about the preventive aspects of psychiatry. The potential hazards of mental disorders may be explained in primary prevention programmes (for example, explaining hazards of drugs, alcohol or solvent abuse to school children).
6. Manager: of resources and work priorities, planning and coordination of the development of future patterns of community care.

1. *Tutor in Psychiatric Nursing*
2. *Associate Professor in Psychiatric Social Work*
3. *Additional Professor in Psychiatry*
4. *Additional Professor in Nursing*

Thus, the nurses have vital role in all the five basic components of community mental health programmes, that is,

i) in-patient care
ii) out-patient services
iii) partial hospitalization
iv) consultation, research, education, and
v) emergency services.

NIMHANS Experience

At the National Institute of Mental Health and Neuro Sciences, Bangalore, the Psychiatric Nurses are integral component of the team comprising psychiatrists, clinical psychologists, psychiatric social workers and psychiatric nurses.

The Psychiatric Nurses have been working in different capacities and with different assignments related to community mental health programmes. The activities of psychiatric nurses in such programmes could be listed as follows:

- Clinical services: The Nurse offers appropriate clinical services to patients with psychosis, epilepsy, neurosis, and mental retardation, both in the outpatient setting and in the domiciliary care programme (NIMHANS, 1986)
- Counselling services: Depending on the problem, brief counselling services are offered to the clients and their families in rural and urban settings (Pai, S, and Nagarajaiah, 1984).
- Training programmes: The Nurse takes active part in short-term training programmes in mental health for the Health workers, *Anganwadi* workers, Teachers of Health and Family Welfare Training Centre and ANM Schools, General practitioners and PHC doctors. In addition, he/she is involved in the training of other mental health professionals and Nursing students (Nagarajaiah, 1987; Shama Sunder et al.,1978)
- Administrative responsibilities: He/she undertakes coordination of various activities of the centre by adequately planning and organising the potentials and resources available in the agencies in the community.
- Research activities: They significantly contribute towards the conduct of various research activities ranging from assessment of patient and family needs to evaluation of the services provided by the mental health centre in general and psychiatric Nursing in particular (Nagarajaiah, 1984).
- Community extension services: He/she takes active part in periodical neuro psychiatric extension services, mental health camps, public lectures, symposia and seminars. (Narayana Reddy et al. 1986).
- Rehabilitation and follow-up services: After assessing the potentials of family and the community the nurse guides the patients and the family members for suitable rehabilitation and follow-up measures (Parthasarthy et al., 1984; Usha. K, et al., 1982)
- Innovative programmes: The community mental health approach being new in the country, many innovative activities are being planned and organised. Some of these are District mental health programmes, School mental health programmes, Village leader orientation programme and Domiciliary care programme. In all these programmes, the nurses have been taking initiative and making efforts to make the programmes successful and useful to the community (Isaac, M.K., 1984).

The NIMHANS experience supports the following conclusion: Nurses play an invaluable role in the community through worthwhile and effective services. Nurses have been proved to be effective as part of multi-disciplinary team as well as sole professionals contributing to the treatment of psychiatric patients in the community. Yet another area where they play an important role is training and research programmes. Considering the present needs and future trends in mental health care in India, it is important that such work is replicated elsewhere in the country so as to evolve and identify the role of psychiatric Nurses outside hospitals in developing countries.

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