Health Education in Neuro-psychiatric Set-up

Mrs. Lalitha, K.*
and
Mrs. Sukanya, S.**

Introduction

Ignorance is the root cause of all physical and mental troubles while scientific knowledge is the basis of happiness. - *Charak*

Health education is a process that aids people in finding out their health needs and achieving them by modifying their present health behaviour and removing the barriers of ignorance, prejudices and misconceptions. Further, it includes development of the individual, community and social environment for better living and quality of life independently.

Keeping in view the WHO goal of "Health for all by the year 2000", health education must progress considerably. The International Conference on Primary Health Care organized jointly by UNICEF and WHO in Alma Ata, USSR in 1978, declared that "people have the right and duty to participate individually and collectively in the planning and implementation of their health care" and that "education concerning prevailing health problems and the methods of preventing and controlling them" is the first of the eight essential activities in Primary Health Care. In this light and context a new look at Health Education is essential.

The role of Health Education in all its aspects of medical care is being increasingly recognized. Although the hospitals are primarily concerned with curative services but in the context of diagnosis and treatment, several facts relating to preventive and promotional aspects of health care need also be imparted there.

Patients are accompanied by their friends/relatives when they are brought to hospitals and the scope of health education, therefore, gets enlarged encompassing them also. The anxious relatives are very keen to know the ways and means of preventing further deterioration, relapse, future rehabilitative measures and also the follow-up regime. Hence, they are very receptive of health education in the hospital set-up.

NIMHANS is one of the pioneering institutes which has Neuro and Psychiatric set-up where a large number of patients visit every day and there are in-patients in a sufficient number who get frequent opportunities of inter-personal contact with the multi disciplinary team to get health education.

The dependent condition of the neuro patient motivates him to receive health education, to learn to live with limitations and the convalescent psychiatric client to re-equip himself with problem-solving abilities.

Health Education in Neuro Set-up

In Neuro Centre, health education makes people aware of the "do's" and "don'ts" that they need to follow in their daily life to keep themselves healthy. It is now an established factum that preventive measures are much more effective and purposeful than the curative ones. The educational process makes them to think, to act and finally to adopt such practices and norms that contribute to a healthy life.

Areas of Education

Neurological

Preventive measures of Meningitis in general with the description of causation of illness, mode of spread, incubation period, signs and symptoms, treatment, prevention and control measures of meningitis etc. are explained.

Other commonest neurological problem which seeks education is "Hypertension with strokes". The illustration of high risk factors of stroke and the emphasis on life-style after an attack is highlighted.

Patients with epilepsy often neglect the continuity of treatment and consider epilepsy as a contageous disease. Their ignorance and misconceptions about epilepsy are detailed to them. Description of the illness, the prolonged duration of the treatment, the ill effects of disruption of drugs intake, the precautionary measures to be taken while a person is on anti-epileptics are explained. Demonstration of epileptic fit and its first-aid management are well emphasized in this educational process.

In Karnataka, the toll of Brain fever (Japanese Encephalitis) rises epidemically in summer. The causation of illness, mode of spread and preventive measures are detailed to the patients. Simple domestic preparation of nutritive liquid diets for rehydration therapy, hydration therapy for bringing down the temperature and the importance of keeping the environment clean to prevent further spread of infection and its procedure are demonstrated.

Surgical

Ear infection, primary complex, warm infestation and its pathology on the brain are explained often with projection of slides for easy under-

* Associate Professor in Nursing, NIMHANS, Bangalore.
** Tutor in Psychiatric Nursing, NIMHANS, Bangalore.

standing. Pelvic exercise for disc prolapse, lung exercises (deep breathing and coughing for post-operative neurosurgical cases), ambulatory procedures of paraplegic patients are also demonstrated along with the description of the illness.

Paediatric

Among children, congenital disorders of nervous system like hydrocephalus, meninsocele, T.B., meningitis, epilepsy, brain tumour and brain abscess are requiring health education. Parents are always with children. They are often worried about the prognosis of the illness and the fear of future. To them, after shunt care, treatment regime of epilepsy, importance of deworming, rehabilitative measures of a child after removal of brain tumour, the need of mass screening of the family and neighbours are explained to them to their level of understanding.

In General

The underlying principles for the maintenance of general health, such as general hygienic practices, environmental sanitation, regular follow-up of treatment, side effects of specific drugs, areas for important observation, after care, and discharge planning are repeatedly detailed to the in-patients and their relatives in the ward.

The opportunities at neuro outpatient department and in the neuropsychiatric extension clinics are regularly used. Since the patients and relatives have to wait for a long time to get treatment usually they are anxious and restless. Short, concised, demonstrative type of health education on the topics like, T.B., meningitis, epilepsy, brain fever, importance of regular OPD consultation and the follow-up are emphasized.

The personnel giving health education in neuro sciences are often neurologists, a nurse and a social worker with their team effort ranging for about 20-30 mts found that "group enhancement" method as very effective one. Many a time, learning by doing" has become very effective and interesting.

Health Education in Psychiatric Set-up

Health education aims at modifying human behaviour. It also aims at changing the attitude and the behaviour of the community as to how best to adopt practices which will ensure a normal and healthy life for the individual, the family and the community as a whole and make them more understanding and conscious of health problems. Since changing of behaviour patterns is a long-drawn process, it calls for perseverant efforts to educate the community.

In general, the mental health education is given to the hospitalized clients

- to help the client to live a happy life within the hospital.
- to direct on how to develop good habits and attitudes.
- to develop independent ability and aptitudes.
- to develop favourable personal characteristics.
- to develop interest in work.
- to encourage to think for himself to his capacity.

In mass mental health education programme; it aims at

- telling people and advising them not to waste their energy, money and time by seeking help from unqualified people.
- making use of available mental health facilities as early as possible.
- helping people to develop a particular life-style and observe certain precautions so that mental illnesses are prevented and mental health is promoted.
- understanding the fact that if one is not 'health conscious' no outside agency can provide him health.
- explaining the brain-behaviour relationships in terms of:
  - How our body works, how important and how different organs function.
  - What is illness? How it is caused?
  - How to nurse ourselves when we are ill?
  - How to prevent illness?

Unscientific beliefs, misconceptions and wrong attitudes about the causation and management of mental illness as well as ignorance about the available modern psychiatric facilities contribute to under-utilization of services.

Many patients who need psychiatric treatment refuse to make use of the available facilities (Verghese; 1978). Carstairs and Kapur (1976) and Chandrashekar *et al.* (1981) report that people do identify mental patients in the community and they generally seek help from traditional healers. However, people often hesitate to come to mental hospitals or psychiatric units because of fear of social stigma.

Thus there arises a need for imparting mental health education to the public. People should be provided with proper mental health consciousness, *i.e.*, they should know their mental health needs. There cannot be effective mental health care without mental health education and mental health consciousness.

Hence the following objectives are laid down for mental health education:

- What is mind/behaviour and what are its functions?
- How does the mind/behaviour develop and how does it function?
- What are the factors which affect the development and functioning of the mind/behaviour? What is the relationship between the body/brain and the mind/behaviour?
- What is mental illness? What are the concepts of psycho-somatic medicine?
- What are the causes of mental disorders?
- Description of different types of mental disorders and their symptoms.
- When, how and who to consult in

case of mental illness.
- How to nurse oneself or somebody else during illness.
- How to reduce disability and recover from the illness quickly. What are the do's and don'ts?
- How to prevent a relapse?
- Developing a life-style which can prevent mental illness.
- What is mental health and how can one achieve and promote it?
- What are the individual and social responsibilities for mental health?
- The mental health needs and how to work to fulfil these needs.
- Consistent support and supervision of the growth and direction of the mental health movement.

Approach to Mental Health Education

Who can give Mental Health Education?

It is neither appropriate nor feasible to have separate individuals or agencies to carry out mental health education. It is the mental health professionals (psychiatrists, psychologists, psychiatric social workers, psychiatric nurse, occupational therapists, etc.) who should shoulder this responsibility and carry out this job.

Mental Health Education to whom?

To patients, their family members, concerned people, neighbours, important individuals like teachers, village leaders and volunteers, the interested individuals and almost everybody.

Where and how to give Mental Health Education?

It can be given in the walk-in clinics, psychiatric outpatient departments, child guidance clinics, mental retardation clinics, day care centres, occupational therapy and rehabilitation centres, half-way homes, sheltered workshops, acute wards (during visitors time), chronic wards and also to the patients in child-adolescent psychiatry units and in the family wards.

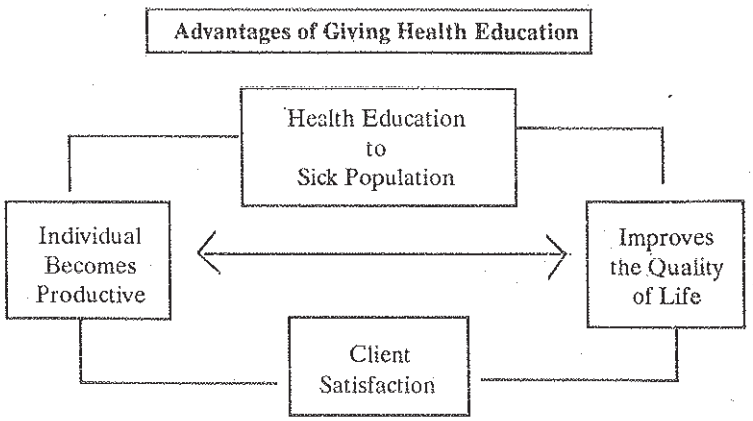
Giving mental health education is both science and an art. It is a continuous process. Since around 70% of the people in our country are illiterate, the medium of instruction for mental health education has to be as simple as possible. It should be promoted in visual form as far as possible. Audiovisual-aids would be ideal in the hospital set-up.

What one should not do?
- Making fun of the beliefs of people.
- Blaming them for being dull, ignorant.
- Confronting and arguing unnecessarily.
- Threatening, and challenging.

One can plan and organize the contents, methods and other aspects of mental health education, in any given unit of the mental hospital. A specimen of the programme undertaken in a hospital is given below as an example:

Calendar of Health Education Programme in (a Hospital) Child Adolescent Psychiatric Ward

What (Topic)	When (Day/ time)	Where (Place)	Who (Speaker)	To whom (Audience)	How (Teaching Method)
1. Effect of unhealthy Parent- Child relationship leading to social maladjustment mechanism	Monday (2-3 p.m)	Discussion (Room of Children Ward)	Miss A. (Psychiatric Nurse)	Parents of children with the diagnosis of conduct disorders.	Lecture with slide projection.
2. Harmonious relationship in the family is indispensable for integrated personality of the Child	Tuesday (2-3 p.m.)	Play (Therapy Room of Children Ward)	Mr. X (Psychologist)	All the parents of the children admitted in the Children Ward	Lecture accompanied by a video show
3. Habit Training	Wednesday (2-3 p.m.)	Play (Therapy Room of M.R. Clinic)	Mrs. X (Psychiatric Nurse)	Parents of mentally retarded children (5-6 parents)	Demonstration
4. Social Habits	Thursday (2-3 p.m.)	Play (Therapy Room of C.G.C.)	Mr.Y. (Social Worker)	Parents accompanying children	Lecture with a film show to C.G.C.



The change in one's belief and attitude is a slow process and takes time. Therefore, health education has to be imparted repeatedly and over a long time so that the sick individual may become socially productive and improve his life-style and achieve the satisfaction of leading a life like any healthy individual.

The health education modifies the human behaviour in a desirable manner and enhances them to adopt healthy practice. Therefore, overstaying in the hospital is reduced. The hospital beds also will be kept free for the needy people and the quick turn over of the patients avoid overcrowding of the wards.

As the individuals adopt healthy practices regularly over a long period of time, the physical, mental and social disabilities are brought down and they are also sent back to the community to lead healthy life although they are left with the limited potentialities after the illness.

From the point of view of economy in health care, hospital income is cut short and the cost spent per patient comes down.

Aids to give Health Education

Mere didactic lectures do not leave much impact on educating the illiterate. To sustain the attention and maintain the interest of learners, different form of visual/audiovisual-aids are essentially used. Techniques quite often used are:

1. Charts, posters, flash cards.
2. Handouts.
3. Models.
4. Role plays and socio dramas.
5. Video shows and film shows.
6. Live demonstrations.
7. Slide projections.
8. Exhibitions.
9. Small group discussions.
10. Lectures and talks.

Time taken to conduct Health Education

Parents and relatives of mentally ill and neuro-patients readily come forward to take up the health education. In the hospital set-up, it is most of the time that structured health education is given. Hence, the educators of various disciplines are well aware of the time and place of giving health education. The time usually taken for the different steps of health education process are as follows:

Preparation of educator	- 3 mts.
Collecting of group	- 5-10 mts.
Seating	- 3 mts.
Physical arrangement (varies depending on the techniques)	- 5 mts.
Education of self	-10-20 mts.
Evaluation of education	- 10 mts.
Summarizing	- 3 mts.

At NIMHANS, educative materials are easily accessible to the literate group. In each ward of the Neuro Centre, the books and the journals pertaining to neurological sciences are available. At the request of patients and their relatives, they are provided to them to read in the ward itself. But this area requires a little more attention of increasing the materials and its preservation carefully.

In Psychiatric wards, the general magazines are made available. But the library is kept open for the patients and to the relatives to make use as and when they want from 9 a.m. to 4 p.m. every day except on general holidays. This library is also being used by the neuro-patients and their relatives.

Health Education during Home Visits

Psychiatric side, there is an established programme of home-visits by the psychiatric team which consists of a psychiatrist, a psychologist, a psychiatric social worker and a psychiatric nurse who make regular home visits. During their visit, every discipline looks for their opportunity to impart health education. Most of the time, this kind of health education goes as very informal. When the team identifies that villagers have common misconception about mental illness, then they go for structured health education.

In neuro-psychiatric extension clinics, the cases are identified. Then neuro-psychiatric team joins to give health education during its visits. But giving health education at door-steps is yet to come up.