Mental Health : Nurses in Action

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Mental Health, as is known, implies a harmony, a balance and peace within oneself, and with the environment. It is an ability to accept, and integrate life's events, conflicts, crises, stress, and whatever comes one's way. Something can be changed, while others need to be changed in peace giving ways.

Mental Health is not merely the absence of mental illness. Physical illness and handicaps affect the mind; mental problems affects the body. These can be humbling and discouraging experiences, as the person feels powerless and helpless. Mental Health inspires and energizes the person to deal with difficult situation with calm, awareness, appropriate motivation and optimistic attitude, choosing appropriate behaviour. So, in the midst of life's problems and hurts, one is able to choose self affirming, health-promoting means, as a mentally healthy person is in contact with self in the present, along the lines of thinking, feeling, and acting.

Mental health does not mean that one is always in a state of happiness. It is an attitude, a choice, a way of life which transcends pleasures and pain. In illness, loneliness and sorrow, one can choose to experience wellness.

Biochemical imbalance, generally hit mental health. Chemical or structural problems in the brain affect behaviour. Inherited human traits and tendencies are there and effect the mental health. Alteration of certain hormones affect the brain. But how does a child grow, depends on the family and social environment is that helps in shaping the persons' personality, behaviour patterns, attitudes and responses to life.

This world contains a lot of beauty, though it is being badly and sadly torn with violence. One can try to prevent distruction or contribute to the environmental pollution, corruption in society, etc. Each individual has freedom to give meaning to life in whatever way it wants to.

Children absorb parent's personality traits and respond to the socioeconomic position of the family, and to sorts life events, and may pick up wrong models. Human weakness become problems in human conduct and relationships especially for youth who are in period of growth and development and they may damage themselves more than anybody else. And so, we have victims of substance abuse, attempted suicide, crime and violence and other such heart rendering episodes in our hospital wards badly wounded in mind and body. Their inability to cope with life's problems and pressures, or rather their choice of wrong coping mechanisms, have brought them to this stage. Their broken hearts and bodies plead for understanding and acceptance from the health care team especially from we the nurses. The families, of course surround them with compassionate care in spite of their inner pain and struggle.

When a difficult situation threatens, there is anxiety and tension. When the tension is held back, it may manifest as anger when the anger is held back, it creates guilt. Unresolved guilt emerges in depression. We may have experienced some of these perhaps, or seen someone else suffering this.

Can we now listen to and observe with sensitivity, some of the signs of communication of our patients, their turmoil confusion, anxiety, tension, fear, dejection, guilt, loneliness, etc.? Can we respond with signs of understanding, compassion and acceptance, of their unacceptable self will gradually help them to accept themselves. No one can make another change, nor can one stop another person from changing but one has to start the process. Slowly and gradually, we can inspire them to choose to be well. Some, do come to realise that in spite of unhappy circumstances they can choose to live a harmonious and happy life, and they are transformed.

When we are busy with nursing procedures and functions, it can be an emotional drain on us to cope with these difficult patients at times we may feel like avoiding them. At such moments, let us remind ourselves of a friend who walked with us, in times of our brokenness, sharing our pain accepting and supporting us with genuine love. Such thoughts will motivate us to reach out to our patients, and understand their emotional shift. We can call on our inner resources to realize that they are making choices according to their own map of the world, as all people do. We can be friends to these broken persons, who find that they are difficult persons to themselves. Difficult persons also make their best choices according to their vision.

Our bedside manners can go beyond technical expertise. Does the human person in us meets the patient, or do we wear a professional mask? See what happens, when we relate on a human level. Do we give confidence to the patient, or do we appear to be all

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knowing? Being our authentic self will do wonders.

A seriously ill patient may have much on his mind. All the recorded information regarding the patient is very important for us to know about him. How about the information we gather from the patient's causal comments? This is the real and important source for us. Do we want to hear him? His words and manners reveal something about the total person not just the illness. The patient is a person with a problem, not a 'problem patient' as we may sometimes feel. What the patient has on his mind may be directly relevant to his overall health problem. he may have serious and probably false ideas about his illness, etc. If he sees that we are authentic and not rigid or impersonal, he may open himself, and that will be extremely helpful for his recovery through our sympathetic understanding and kind care.

Life itself cannot give us wellness and joy unless we really will it. Life just gives us time, and space. We notice that some patients have an optimistic attitude to life, a happy disposition, one such patient in a ward is an inspiration to the rest. Through health talks we observing and changing their behaviour patterns and understanding the role of mental health in gaining physical health. Once we ourselves go through an illness, we realise we are no more the same, we have learned something, we have experienced some of our patients' feelings.

Slowly, our patients may see, that life has to have a purpose and meaning, and we are free to give our life whatever meaning we want to give. For this we need to have appropriate motivation and accept the responsibility for our freedom in self determination. We must identify and choose authentic joys and pleasures, and accept our need for change in choices, in life style, etc. So that we can live in maximum possible wellness, contentment, and peace.

Spiritual health is very important too. Religious values motivate and provide deep insights into life's

purposes. In illness and suffering, one is urged to look at one's inner life as never before, as religious beliefs are powerfully rooted in all people. In helpless and powerless moments, our whole being turns to God. Let us inspire, and raise their spirit to healing levels; mere mention of the Divine is sufficient to uplift the spirits.

The patient's families too need a great deal of support. The whole health care team is attentive to the patients, we need to remember that the family members also silently suffer for their dear ones.

In all these areas, we nurses have a special call and role. Let us do all we can to help our patients and families go home with a new peace, a new life, and a desire to live healthy, happy, creative lives, with harmony within themselves, within the family, in their work places and with their whole environment. Let us ask God's blessing, that they walk away from despair to hope, from fear to trust, from darkness to light. Let peace fill our hearts and homes, our world, our whole planet. Let us then continue to be 'Nurses in Action', in this process our mental health also remain good. When we share the good we can, God fills us with more good.

Emergency Drugs

Shell I tell the name
the drugs for the failing heart?
DIGOXIN OR LANOXIN all the same
Must always keep us alert.
To stimulate the heart and vessels
the drug is sure Adrenaline;
And to raise the slow rate
What else but the old Atropine?

While I am on this matter
Other drugs must I say;
Isoptin, Isopcin and Alupent,
Have their uses in the tray.

When Asthma make the patient,
Fighting and panting for the breath;
DERIPHYLLIN the drug of choice
To take away the devil's wrath.
As the heart fails to clear
And the fluid tides the chest,
Never forget, Oh ! my dear
LASIX has the action best.

I haven't told about the pain
And pair is a curse to relieve.
MORPHINE, PETHIDINE are two drugs;
Use and abuse we must believe.
When shock strikes the patient,
But the team keeps the fight,
Never forget to use some drugs
Though the chances may not bright.

DECADRON EFCORLINE and DOPAMINE
The drugs whatever we choose,
Better to start them early
And use in correct dose;
Some drugs I have told,
And for others need I tell?
Well, time so short and so CORAMINE
When the death toll the bell.

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