

## Mental health

One in four people in the UK have a mental health problem at some point in their lives, which affects their daily life, relationships or physical health.

Mental health problems can affect anyone, regardless of age, race, gender or social background. Without care and treatment, mental health problems can have a serious effect on the individual and those around them. There are more than 49,000 admissions a year under the Mental Health Act.

## What is it?

- It can mean different things to different people at different times and in different cultures
- Broadly is a term used to describe difficulties which people have with the way they think, feel and behave
- Can be very mild or very severe
- Can be short or long lasting.

## What affects our mental health?

Mental health is determined by many complex and related reasons all of which can interact to determine the state of our mental health. There are many theories and different factors that enable us to positively maintain our mental health:

## The medical (biological) model

This suggests that...

- All psychiatric symptoms are caused by physical imbalances or abnormalities
- Medicine or even surgery is the answer
- The cause of the problem lies within the affected person

## The social model

This suggests that...

- Many of the problems people face are caused / maintained by social pressure
- The way society responds to people perpetuates their difficulties
- responsibility for people's problems is placed as much in the lap of society as with the person themselves
- The way society responds to people who are psychologically different is the real problem and the consequential social stigma can be a barrier to aspects of society that people take for granted

Mental health is about how we think, feel and behave.



“Mental health is the emotional and spiritual resilience which allows us to enjoy life and survive pain, disappointment and sadness. It is a positive sense of well-being and an underlying belief in our own, and others dignity and worth”

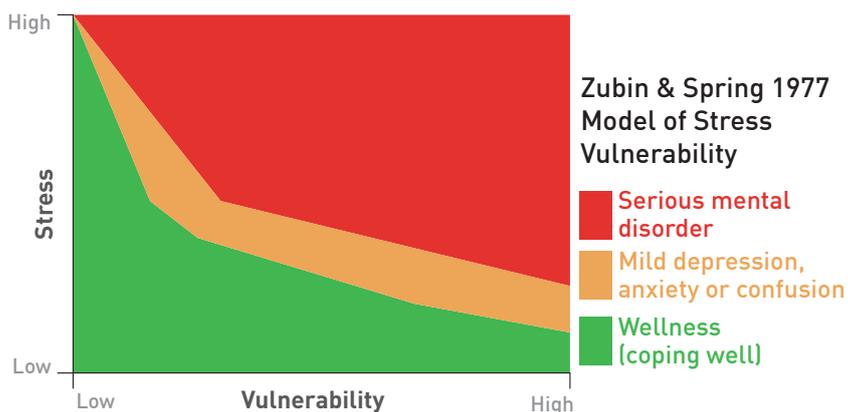
WHO / HEA 1997

## The stress vulnerability model

### This suggests that...

- Mental distress or disorder is what happens when the stresses we face are greater than we can cope with
- Our vulnerability factors determine how vulnerable we are to the stresses of life
- Some people can handle more stress than others....but that eventually all people, given enough stress, can develop mental health problems

## Model of stress vulnerability



## The five stressors

### There are 5 basic types of stressors

- Biological
- Social
- Cultural
- Psychological
- Developmental

How we respond to those stressors will affect our mental well-being

## Remember...

- Stress is what happens – not how we react to what happens
- Our reactions to stress are what Psychiatrists call symptoms
- Areas of vulnerability include genetics, psychology, environment, socio-cultural and developmental

## Myths

### Depression is not...

- Easy to recover from without professional help, support and treatments
- The same as mild 'low moods' that all of us can experience
- A guarantee that someone will express suicidal thoughts

### Schizophrenia is not...

- Split or multiple personalities - that is actually known as Dissociative Personality Disorder
- A guarantee that the client will be violent or dangerous
- Always a diagnosis for life

### Bipolar Disorder is not...

- Moods that constantly swing from high to low
- Mood swings that last the same length of time, follow the same pattern or even occur regularly
- Always a diagnosis for life

### Generalised Anxiety Disorder is not...

- The same as a phobia, fear, stress or a panic attack
- Untreatable
- A guarantee that someone will then develop other illnesses e.g. OCD or an eating disorder

## Depression

- Depressed mood or anhedonia must be present for 2 weeks plus at least 5 other symptoms
- 2% suffer severe depression
- Further 8% suffer milder forms
- 15 - 20% will commit suicide

### Symptoms include...

- Marked diminished interest or pleasure in all or most activities
- Significant weight changes
- Sleep disturbance
- Psychomotor retardation
- Fatigue/loss of energy
- Feelings of worthlessness, guilt
- Diminished concentration, poor memory
- Recurrent thoughts of death, suicidal ideation

## Psychosis

- A condition in which the mind's functioning is altered
- Characterised by loss of contact with reality
- 3 - 4 out of 100 young people will experience a psychotic episode
- Main risk period 14 - 35, men affected earlier than women

### Symptoms

- Confused thinking
- False beliefs or delusions
- Hallucinations
- Altered affect

## Schizophrenia

- Characterised by disorganised thinking; mood, motivation and behaviour disturbances
- 25% experience complete recovery
- 40% experience recurrent episodes
- 35% remain chronically disabled

## Bipolar affective disorder

- Bipolar disorder is a chronic psychiatric illness characterised by "alternating episodes of mania (or hypomania) and depression" (NICE 2006).
- There are two principal types of bipolar disorder: bipolar I and bipolar II.

## The 3 major groups of mental disorders

- Neurosis
- Personality Disorders
- Psychosis

## Useful categories

- Affective disorders (Depression)
- Psychotic disorders or disorders of perception (Schizophrenia)
- Anxiety disorders
- Eating disorders (Psychosomatic disorder)
- Dementias (Organic disorders)
- Personality disorders

## Mania – the ‘high’

### Characterised by

- Expansiveness, grandiosity, overconfidence, increased sexual preoccupations, inappropriate spending, irritability, disinhibition, overactivity, elevated mood, flight of ideas, pressure of speech, impaired judgement, poor sleep, increased creativity / sociability
- Changes in emotion, thoughts, body and behaviour

## Depression – the ‘low’

- Usually more sudden onset than unipolar depression
- Lack of motivation and fatigue often more severe
- In serious episode, may cause muteness and immobility
- Psychotic symptoms of loss of insight, guilt, delusions and hallucinations more likely – often paranoia and derogatory voices
- Changes in emotion, thought, body and behaviour

## Anxiety disorders

### Anxiety disorders are

- Common
- Chronic
- The cause of considerable distress and disability
- Often unrecognised and untreated

### Anxiety is...

- A psychological reaction to the interpretation of physiological events.

### Clinically.....

- A feeling of apprehension, uncertainty and fear without apparent stimulus or an objective source of danger;
- It is associated with physiological changes;
- It ranges from moderate to severe.

## Panic attacks

A discrete period of intense fear or discomfort in which symptoms develop abruptly and peak within 10 minutes.

### Psychological symptoms

- Apprehension
- Discomfort
- Dread or impending doom
- Fear or panic
- Fight or flight response

## Mental Health Act

A mental illness can mean that someone isn't able to make the best decisions about their treatment.

The Mental Health Act allows others to do so.

The law has strict rules to try and make sure the person gets what is best for them and that they aren't mistreated.



## Sections

- **Section 2** - Detention for assessment
- **Section 3** - Detention for treatment
- **Section 4** - Emergency holding powers
- **Section 5** - Emergency detention
- **Section 135** - Search and remove
- **Section 136** - Mentally disordered persons in a public place
- **Section 17** - Community Leave and treatment

## Sectioning

- 3 must agree
- AMHP or nearest relative
- Doctor
- registered medical practitioner

## Clear reason

- Own health
- Your safety
- Protect others