Unit I Psychiatric Social Work

History – Scope – Changing perspective of Psychiatric Social Work – Changing trends in Mental Health Care – Indian view of Mental Health and wellbeing.

History

- Mental health considered as illness because of demons and sins
- Barbaric treatment during medieval period in the name of cleansing and propitiation (pacify)
- Common adopted treatments were blood letting, starvation, blistering, purging (removal), whippings.
- There was overcrowding in insane asylums, criminal houses, jails and prisons.
- Pioneers in mental health care – Dorothea lynde dix, Rank, Meyer, Sullivan

- First social worker in mental health is considered as handmaidens to psychiatry
- First social worker in mental health field was in Massachusetts Neurological Department – then Manhattan state hospital NY – Boston psychopathic hospital.
- The surgeon general asked American Red Cross to establish SW federation in hospitals after World War I
- Child Guidance Movement supported SW'ers
- II world war emphasized need of SW for war veterans.
- Mental health act insisted the importance of social worker in psychiatric field.
- American Association of Psychiatric Social Workers – AAPSW (now merged into NASW – National Association for Social Workers) was formed – released journals and newsletters.
- Now – a – days PSW recognised worldwide.

Dates and important events in the history of Psychiatric social work

- Began in hospital setting in 1905 – nurse Garnet I. Pelton appointed by physician Richard Cabot at Massachusetts General Hospital in Internal Medicine Clinic
- 1907 – SW'ers placed in Neurology clinic of MGH – said to be the beginning of psychiatric Social work
- No distinction between MSW and PSW
- Ida Cannon succeeded Garnet I. Pelton – said – practice from Dr's office to home visits – diagnosis and treatment.
- Speech by Cabot – 'Hospital and Dispensary SW' @ international conference of SW Paris 1928 – agreed that primary function of SW'er is to teach Dr's and nurses about the social & psychological aspects of disease
- ***Period of Conflict*** – cannon spoke about – the direct treatment role of SW in health care, ie, removing obstacles in patients surroundings for successful treatment
Cabot spoke about – SW'er a bridge, ie, liaison between hospital and patients.

Separation of MSW from PSW
- Both MSW and PSW same before 1920
- Separation because of Freudian Psychoanalytic concept around 1920
- Separation increased by Mental Hygiene Movement after I world war – soldiers suffered from Shell Shock (now PTSD)
- Abraham Flexnor – stated SW as not a profession
- Training school for PSW @ Smith College – 1918
- Section on PSW organized with AAHSW – 1922 (American Association of Hospital SW)
- After I and II World War Veterans Administration (VA) hospitals employed both MSW and PSW
- Deinstitutionalization Movement – Push patient from institution to community – 1950
  Movement because
      Mental hospitals overcrowded
      Increased warehouse and decreased treatment and rehabilitation centers
      Social disability – secondary disability created
      Increased cost to tax payers
- So found psychotropic drugs (drugs that alter mood and mental functions) – and patients treated in community
- CMHC (Community Mental Health Centres) and CMH services acts of 1963 and 1965

In India
- First psychiatric social worker in a child guidance clinic in 1937 @ Sir Dorabji Tata Graduate School of Social Work, Mumbai.
- Banarjee – pioneer of PSW training in India.
- Others – Vidyasagar, Saradha Menon (SCARF), Bhatia
- Training started @ NIMHANS National Institute of Mental Health and Neurological Sciences – institute for psychiatry and mental hygiene.

Scope of Psychiatric Social Work

- Scope is wider and broader
- PSW'ers can work as
      Case Managers
      Researchers
      Rehabilitators
      Work in acute psychiatric hospitals
      In mental health
      In community mental health
      In multidisciplinary team

Changing perspectives and trends in mental health and PSW

Negative trends so far

- Salary
- Aging patients
- Doctors
- Communication
- Amotivation
- Tangible results
- Appreciation
- Funding
- Role
- Education
- Competition
- Supervision

Positive and Changing trends (cited by NASW)

- Old hierarchical method to team work method
- Importance of case management
- Research and evaluation
- Introduction of new models
    - Brief models
    - Critical models
    - Solution models
    - Research models
- Focus on
    - Health education
    - Health promotion
    - Health prevention

Indian view of mental health and wellbeing

History
- Mental disorders mentioned in Ayurveda, Unani and Siddha
- 3 stages of understanding
    - Mental illness because of sin
    - Introduction of psychoanalysis
    - Community psychiatry

- Institutionalisation of mentally ill in India
- King Ashoka concentrated on Mental Health
- Lord venkateswara temple – tirumukkudal, chingelput – chola period referred Sri Veeracholaeswara Hospital
- Maulana Fazulur – Hakim & Mahmood Khiliji – started Asylums

- Kilpauk Mental Hospital

Dates and important events
- National Mental Health Program started in 1982
    - Training of mental health team within the state
    - Awareness about mental health problems
    - Services for early detection – treatment (OP, IP treatments)
    - Provide data and experiences for future planning and research
- District Mental Health Program started in 1996 – now in more than 20 districts and 18 states
- National Institute of Mental Health & Neurosciences, Bangalore (after recommendations of Bhore Committee)
- Integrating all other therapies like Ayurveda, Siddha, Unani, Yoga, Naturopathy & Homeopathy in the cure of Mental Illness.
- Mental Health Act 1987
    - Minimum standards
    - Authorities appointed
    - After care
    - Modern knowledge
    - Exclusion of Mental Retardation and Drug abuses (separate hospitals)
    - Simple procedures
    - Preservation of Human Rights
- Community Mental Health Camps
- Continuing Medical Education (CME)
- Psychiatric Association in India
- Indian Psychiatric Society
- Indian Journal of Psychiatry
- Prevention strategies with multidisciplinary team