

## 6.14 Mental health nursing



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### 6.14.1 An overview of mental health nursing

Mental health nursing is an exciting and varied field. It includes a range of acute and long-stay inpatient, community and general practice settings, services for older people and for people with co-existing drug or alcohol use problems. It also embraces child and adolescent, perinatal and forensic or consultation-liaison mental health.

### 6.14.2 Learning opportunities

Excellent mental healthcare depends on multidisciplinary teamwork. In your placement you will meet many health professionals who possess a wealth of interesting experiences and insights, which they will be happy to share if you show an interest and ask relevant questions. Take the time to understand their roles: a nurse unit manager usually is in charge of the ward, and community teams are led by a nurse, a clinical psychologist or a social worker; ask them about their responsibilities. Usually a psychiatrist heads the clinical team, with one or more psychiatric registrars working under direction. Confusion can arise about the different functions of psychiatrists and psychologists: the former are medical doctors who have undergone further specialist training and prescribe medication; clinical psychologists specialise in the assessment, diagnosis and treatment of psychological and mental health problems.

Through their ongoing close relationship with the client, nurses observe and often intervene in a variety of ways that range from calming a distressed or angry client, to assessing risk of self-harm and monitoring the effects of medication. Physical care and managing such matters as food and fluid intake and physical discomfort are vital aspects of mental health nursing. One way in which mental health nursing varies greatly from other areas is the necessity to understand relationships and interactions between the clients, and manage these in a therapeutic way.

### 6.14.3 Preparation for the placement

Preparing for a placement can stir conflicting emotions. Some students will be very excited, others perhaps anxious about how they will 'perform' and whether they will be suited to mental health nursing. Negative messages in media stories about people with mental illness can raise concerns about safety, or disturbing impressions of their behaviour. Remember that if on appropriate treatment these people are no more likely than anyone else to commit a crime, and that your placement hospital or community unit has nurses skilled in managing aggression should it arise. Other media-disseminated ideas are wrong also: Mental illness does not mean developmental disability, people with schizophrenia do not have split personalities and people with a mental illness are rarely 'unpredictable'.

One in five of us will experience mental illness at some time in our lives—most frequently anxiety or depression. Most of us know someone close who has experienced mental health problems. If you have any misgivings, please talk with your course coordinator who will ensure you have an appropriate placement and the support you need; counselling services are available at your education institution.

You will need to know about the most common types of illness you are likely to encounter, such as anxiety, depression, bipolar disorder, schizophrenia, borderline (and other) personality disorders and drug-induced psychosis. An informative resource for an overview is the *Mental Health First Aid Manual* (Kitchener & Jorm, 2009), downloadable from [http://www.mhfa.com.au/course\\_manual.shtml](http://www.mhfa.com.au/course_manual.shtml), but the essential preparation is to revise the counselling and interpersonal skills learnt so far in your nursing program. A mental health placement will provide an excellent chance for you to practise these skills.

'The right attitude' is the most desirable quality you can bring to a mental health placement. Harms (2007, p.11) defines the major core practice values as 'respecting the person, promoting social justice and people's right to a good life; privileging the right to self-determination, empowerment and autonomy; valuing people's strengths and resilience, and being authentic.' Respect is about really appreciating intrinsic worth without negative judgement. We demonstrate respect in the way we interact with and talk about people. In nursing, especially in mental health nursing, we deal with the extremes of human behaviour, with people who have suffered childhood abuse and trauma and whose experiences still colour their interactions with others. Those with severe mental illness are among the most vulnerable in our society; many live in poverty and isolation, perhaps with poor social skills and with values and beliefs that you do not share; you might find it difficult to afford them the respect you would for someone less challenging.

Even if you do not plan to work in mental health services at the end of your education, your placement is an outstanding opportunity to learn as

much as you can about it. All nurses will, at some time, care for people who have a mental illness because they use the same services as anyone else for their health needs. For example, think how useful it will be if in midwifery you are asked to assess a new mother for depression. The ED, where people can be in extreme pain, in great stress and frequently under the influence of alcohol or drugs, is another area where a knowledge of aggression minimisation and excellent counselling skills is vital. Paediatric nurses have to develop high-level skills to assess and interact with the whole family. These are skills that you can begin to learn in mental health.

#### 6.14.4 Challenges students may encounter

In mental health settings you might be asked to wear your own clothes, as an outward sign of respect from clinicians to clients that there are no artificial 'barriers.' Think carefully about what you will wear so that your dress demonstrates professional respect. Revealing clothes detract from your professional status and may send the wrong message to clients with difficulties in maintaining boundaries. We talk about professional boundaries a lot in mental health, so please revise this section in Chapter 4. While working with mental health clients and affording them respect, remember you are not their 'friend', a rescuer or a potential partner; your dress and language should reflect this. Everything you say should have, at its core, the intent to be therapeutic. Sharing stories about past boyfriends or girlfriends, chatting about the hangover you suffered on Sunday morning or talking about your own problems are examples of interactions that are generally not therapeutic.

Do take the opportunity to actually talk with clients. Shutting yourself in the nursing station reading client files might be the more comfortable option, but it is not nearly so rewarding. Knowing what to say to start an interaction is sometimes the most difficult thing, but you might want to experiment with introducing yourself, mentioning which university you are with and asking where they come from. You will probably be surprised at how freely some people will talk about their mental health issues. Assisting with an activity such as making a bed, playing a game or going for a walk can make interaction easier. Observe other professionals interacting and from what you see learn what is effective or ineffective, and enjoy what could be your most rewarding placement.

#### References

- Harms L. *Working with People*. Melbourne: Oxford University Press; 2007.
- Kitchener B, Jorm AF. *Mental Health First Aid Manual*. 2009. ORYGEN Research Centre, University of Melbourne. Online. Available <[http://www.mhfa.com.au/course\\_manual.shtml](http://www.mhfa.com.au/course_manual.shtml)>.