Areas of Practice, Challenges and Way Forward

Edited by Abraham P. Francis
Social Work in Mental Health
Areas of Practice, Challenges and Way Forward

Edited by
Abraham P. Francis
To
my fellow authors
and
my family
Thank you for choosing a SAGE product! If you have any comment, observation or feedback, I would like to personally hear from you. Please write to me at contactceo@sagepub.in

—Vivek Mehra, Managing Director and CEO, SAGE Publications India Pvt Ltd, New Delhi

Bulk Sales
SAGE India offers special discounts for purchase of books in bulk. We also make available special imprints and excerpts from our books on demand. For orders and enquiries, write to us at

Marketing Department
SAGE Publications India Pvt Ltd
B1/I-1, Mohan Cooperative Industrial Area
Mathura Road, Post Bag 7
New Delhi 110044, India
E-mail us at marketing@sagepub.in

Get to know more about SAGE, be invited to SAGE events, get on our mailing list. Write today to marketing@sagepub.in

This book is also available as an e-book.
Contents

List of Illustrations ix
Foreword by Vimla V. Nadkarni xi
Acknowledgements xiii
Prologue: The Making of the Book xv
Introduction by Abraham P. Francis xxi

Part 1: Areas of Social Work Practice in Mental Health

Introduction to Areas of Social Work Practice in Mental Health 3

Rosamund Thorpe

1. Engaging Children with Mental Health Issues: Review of Approaches to Practice 9

Abul Khan

2. School Mental Health Practice: Challenges for School Social Work in India 35

V. Sayee Kumar

3. Child and Adolescent Mental Health in India 52

Archana Dassi

4. Psychosocial Intervention Model for the Well-being of Institutionalised and Non-institutionalised Adolescent Girls in the Institutions for Care 68

Sheeja Remani B. Karalam

5. Gender-based Violence and Mental Health 97

Ines Zuchowski

6. Domestic Work and Migration: A Dual Burden to Women’s Mental Health 118

Kalpana Goel

7. Mental Health Issues of Home-based Elderly and Geriatric Social Work Intervention 135

Sheeba Joseph
8. Ageing, Religiosity and Mental Health: Some Reflections
   Braj Bhushan
   153

9. Mental Health and Well-being among Older Persons:
   Gerontological Social Work Perspectives
   Ilango Ponnuswami and P. Udhaya Kumar
   164

10. Social Work Interventions for Comprehensive Psychosocial
    Care in Substance Use Disorders
    Lakshmi Sankaran and Pratima Murthy
    176

11. The Dead End: Reflections on Suicide in Developing
    Economies of South-East Asia
    Sonny Jose, Reefa P. S. and Faheema Mustafa
    205

Part 2: Challenges and Way Forward

Challenges and Ways Forward
   231
   S. Kalyanasundaram

12. Social Justice and Human Rights Issues in Mental
    Health Practice
    Mark David Chong and Abraham P. Francis
    244

13. Ethical Considerations in Mental Health Research for
    Evidence-Based Practice
    Nonie Harris
    265

14. Community Mental Health and NGO Engagement:
    The Kerala Experience
    Chitra Venkateswaran, Sonny Jose and Abraham P. Francis
    276

15. Emerging Issues for Social Work Practice
    Anthony McMahon
    301

16. Future Directions and Implications for Social Work
    Practice in Mental Health
    Abraham P. Francis and Ilango Ponnuswami
    309

Appendix 1: Glossary
   326
Appendix 2: Reflective/Practice Questions
   335
About the Editor and Contributors
   341
Index
   348
List of Illustrations

Tables

4.1 Sample Format for Preparing the Programme 84
6.1 Migration Phases and Associate Factors Linked to Psychosocial Distress 120
7.1 Measure of Well-being, Anxiety and Depression due to Age 146
7.2 Correlational Analysis 148
11.1 Variation in Suicide Rates in India between 1995 and 2010 210
11.2 Gender-wise Incidence and Rate of Suicides in Kerala between 1995 and 2007 214
11.3 Regional Classification 218

Figures

1.1 Challenges of Therapy: The Clockwise Motion of Human Developmental Gear is Challenged and Halted by the Effect of Anticlockwise Motion of Abuse, Neglect and Trauma 11
1.2 Progress of Psychodynamic Interventions 15
1.3 My Imaginary World 18
1.4 My Feelings Barometer 19
1.5 Behaviour Management Programme 22
1.6 About Me 26
1.7a Systematic Factors of Child Development and Well-being (Outer Factors) 28
1.7b Systematic Factors of Child Development and Well-being (Inner Factors) 29
4.1 Model Programme for the Psychosocial Well-being of Adolescent Girls 80

8.1 Projected Growth of the Geriatric Population in India 154
8.2 Percentage Distribution of Different Religions in the Indian Population 156

11.1 Typology of Suicide Based on the Dimensions—‘Regulation’ and ‘Integration’ 208
11.2 Suicide Rate in Kerala—Trend during 1995 to 2007 215
11.3 Age Distribution and Gender Differences of Those Who Died due to Suicide in Kerala (Year: 2007) 215
11.4 Means Adopted by Those Who Died by Suicide in Kerala (Year: 2007) 217
11.5 Social Status of Those Who Died by Suicide in Kerala (Year: 2007) 219
11.6 Professions of Those Who Died by Suicide in Kerala (Year: 2007) 220

Boxes

4.1 Excerpts from the Evaluation of the Model Intervention Programme for the Well-being of Institutionalised and Non-institutionalised Adolescent Girls in Thrissur District, Kerala 79
4.2 Sample Sessions 84
4.3 Skills Needed for the Peer Educator 87

5.1 A Checklist for Relationship Violence 106
5.2 A Practitioner’s Reflections by Di Plum (Senior Counsellor, The North Queensland Combined Women’s Services, Inc.) 108
5.3 A Practitioner’s Reflections by Meg Davis (The Townsville Multicultural Support Group, Inc. [TMSG]) 111
5.4 A Practitioner’s Reflections by Pauline Woodbridge (Co-ordinator, The North Queensland Domestic Violence Resource Service) 113

10.1 Four Principles of Motivational Interviewing 185
10.2 Refusal Skills 190
I am pleased to introduce this book titled *Social Work in Mental Health: Areas of Practice, Challenges and Way Forward* edited by Abraham P. Francis, Senior Lecturer at the James Cook University in Australia. It has been quite a challenge for him to bring together a range of professionals, mostly social work educators and practitioners from Australia and India on social work practice in mental health. This book will be useful in teaching, skill development of social work practitioners and for future researches and collaborations. The chapters cover current practices, theoretical debates, social work interventions and challenges faced by the social workers in the field of mental health.

Mental, neurological and substance use disorders are common in all regions of the world, affecting every community and age group across all income countries. While 14 per cent of the global burden of disease is attributed to these disorders, most of the people affected—75 per cent in many low-income countries—do not have access to the treatment they need (WHO 2013). Only between 76 per cent and 85 per cent of people with severe mental disorders in low- and middle-income countries receive no treatment for their mental health conditions compared to the corresponding figures for high-income countries, which were also unenviable, that is between 35 per cent and 50 per cent (WHO 2011 and 2013).

There is a growing recognition of the global community that countries, especially low- and middle-income countries need to pay greater attention to mental disorders and prevention of mental health problems as a large number of those can be prevented and treated. As people living with mental disorders have to suffer the dual burden of the disease and the stigma arising out of gross misconceptions, there is great need to develop appropriate interventions to change attitudes and to protect the human rights of this highly vulnerable population. Among those caretakers and health care providers, professional social workers play a major role in working with the affected individuals, their families and the community at large. Professional social work also has a very significant contribution to make in the prevention of these disorders and for the promotion of mental health.
I am sure that this book will find a place in many of our social work educational institutions, especially in the Asia and Pacific region, and will be a good reference book for our social work students and faculty.

Vimla V. Nadkarni, PhD
President, International Association of Schools of Social Work (IASSW)
Vice-President, Bombay Association of Trained Social Workers (BATSW)
Founder Dean and Professor (Retd), School of Social Work
Tata Institute of Social Sciences
Mumbai, India

References


It is with a great sense of hope, excitement and accomplishment that I would like to present this book to the readers, especially social work students. There have been a number of people who have been instrumental in bringing this book project to fruition. I would like to first of all acknowledge the loving providence of God, who protected me, and blessed me with some fantastic colleagues and friends to work on this project. Likewise, support and assistance have come from many corners for which I am indebted and grateful.

Mental Health as a subject has always been a fascination for me. During the course of my own studies and practice I developed a passion for this subject. The greatest of all learning in this field occurred when I started working with my clients. They taught me a lot—many of which were matters that I had not learned through my formal studies. Therefore, I would like to thank all my clients and colleagues who supported me, guided me, and challenged me in my clinical practice. In particular, I would like to thank all my team members at Clare Mental Health, South Australia, and very specially John Banister, our then team leader who allowed and supported me to venture into community mental health practice, and Pat Glenister for mentoring me in mental health social work. Their support has been a key inspiring aspect of my journey in editing this book.

I would like to thank Vimla V. Nadkarni, Professor and Founder Dean, School of Social Work, Tata Institute of Social Sciences, and the President of the International Association of Schools of Social Work for writing a foreword for this book. I would like to also express my gratitude to all chapter authors for offering the readers excellent insight into social work practice within a mental health setting. I am aware that many of them were extremely busy with their teaching, research and other academic commitments, but nevertheless found time to be a part of this wonderful project. You honour me with your participation in this project, and for that I am truly grateful.

This book would not have been possible without the help and assistance of my students and colleagues at James Cook University. Very special thanks to S. Sharma who provided with some anecdotal evidence for this project and for being part of this work. At each step of this journey, my colleagues provided me with overwhelming support and encouragement, particularly...
Mark David Chong, Debra Miles, Wendi Li, Peter Jones, Ines Zuchowski, Nonie Harris and Beth Tinning.

I am equally indebted to Professor Robert Bland, from the University of Queensland, who constantly encouraged me, provided feedback and mentored me in this project. I am likewise thankful to John Ashfield, from the Australian Institute for Male Health Studies, for his tireless support and inspiration. I also thank Professor Sanjai Bhatt from Delhi University for his support to this project.

During the course of this project, I have been blessed to have come into contact with so many scholars hailing from different walks of life. Some have been able to contribute to this book, while others offered me words of appreciation, direction and further references. I thank them all. I would like to especially thank Professor R. Srinivasa Murthy, who graciously allowed me to reproduce his outstanding paper as a chapter in the book.

I am also deeply touched and honoured by the support of my friends. To that end, I would like to thank my friend Kalpana Goel from the University of South Australia, for her support and excellent suggestions. Special thanks are also due to my friend and colleague Professor Ilango Ponnuswami from Mangalore University for his encouraging words, reviewing some of the chapters and for his insightful comments. My gratitude likewise goes out to my friend and colleague Venkat Pulla, University of the Sunshine Coast, for sharing his knowledge and understanding of strengths-based social work practice and mental health issues with me. He has been a keen supporter of this project and I really thank him for all he has been to me through the various roles that he has played over this period as an author, colleague, supporter and critic. I thank Shoba Ramachandran, for critically reviewing some of the chapters that came to us for this book, and doing such a good job at it.

On the production side, I wish to thank Rekha Natarajan, the executive editor of SAGE Publications, Sutapa Ghosh, the commissioning editor, and Supriya Das, Anupam Choudhary, Saima Ghaffar for their professional support, comments, suggestions and commitment to seeing this work published.

As you can imagine, this has been a long but passionate journey for me and for my family. I thank my wife, Mini, for her critical questions, deep and meaningful reflections and her invaluable suggestions for the book. I also thank my children, Abhijith and Alka, for their understanding, and for patiently waiting for me to help them with their academic work and sports activities.

Abraham P. Francis
The inspiration to lead a book on social work practice in mental health did not just happen overnight. There were a couple of incidents and events that influenced my thinking and practice in the field which motivated me to take this work. Social work practice in mental health is an important area of practice. This collection deals with a variety of gaps in the literature and also provides a fresh outlook for an international audience. This book finds a niche for itself as it brings academia that are involved in interdisciplinary practice. A series of incidents has prompted me to shape this book. As a faculty member in social work some 15 years ago, I was responsible for a field placement for one of my students in a mental health hospital in India. At that time, it was not a course unit taught at the college, but a mere placement option in a psychiatric hospital setting that was made available to interested students, although subject to discussion and negotiation with the said medical facility. A number of my peers were a bit concerned about sending students to a place that represented great misery and disappointment for social workers at that time. The question then arose as to whether it would be a prudent action to place a young and naive social work student in a mental health setting that offered a difficult practice context and a grim future. I still remember that a student came bravely to express her keenness. While some of my colleagues were apprehensive about sending her into such a potentially harsh environment, the student not only received a start but finished her placement and went on to do a masters in social work. While I deeply appreciated the practical issues that many of my colleagues in the 1990s warned me about, clearly there was an ideological difference that permeated our discussions in those years. The primary issue was: Is this place suitable for an undergraduate placement? Or was there an undercurrent of resistance due to stigma attached to mental illness even in the social work field 15 years ago? I did not have a clear answer then; but this made me reflect about the role of social workers in the field of social work practice and was a key motivating factor behind the making of this book.

Meanwhile, I was very keen to provide a safe, supportive environment for my student and an opportunity to see, grasp and fathom for herself and to experience what a gigantic task it would be to be involved with mental health
issues. The student was well supported and received much appreciation from many, which not only motivated her but also later motivated other students to undertake placement in a psychiatric setting.

I felt that mental health is everybody’s business and social workers have a special role to play in this field. Thus began an impulse to write a book for new students about the role of social work in rehabilitation and/or treatment. For a long time, nearly 15 years, this remained a dream. In the meantime, another student of mine took up the cudgel and wanted to do his placement in a mental health facility, and upon successfully completing it, both these students gave me the confidence, courage and anecdotal evidence to engage in developing culturally appropriate literature and trainings for students in mental health. On reflection, these early challenges really spurred me on to develop meaningful materials that would attempt to de-stigmatise and demystify issues in mental health for my students.

After a long hiatus, I came into contact with my first mental health placement student again in 2011. She was by then actively engaged in social work and was settled in the United States. While we were catching up, she said something to me which rekindled this idea to lead this book. This is what she had to say:

Being a Social Work student in India was always a choice everyone questioned. It was hard for even my own family to sometimes understand what good a degree in social work could be as a career? After all these years of its presence, social work still struggles for its place in the working world as a profession. Starting a career in social work was a decision that I made not just because it was different but also because it offered learning through working. So far, pursuing a career in this field has meant a great experience for me. It has moulded me into the person that I am today and how I perceive the world around me.

During the course of my study (Bachelor’s in Social Work), there were several challenges I was faced with, but the major one arose in the final year. I was to be placed for my concurrent fieldwork at a mental health hospital. There were doubts raised by the hospital social workers that Bachelor’s students lacked the experience required to make the best of the training in a mental health set up and to make any contribution as a part of their team. Similar doubts were raised by some of my college faculty members as well, stating that Psychiatric Social Work was much too complicated for Bachelor’s students, and had not been attempted before. There also was an unfounded fear within me, making me doubt my own ability to work in that place, since it was so overwhelming to see as much sadness and people dealing with all the problems they had that it almost depressed me. I felt at a personal level that I might not be able to deal with it.
So the first hurdle in my way I had to leap over was my own mindset, and I did overcome my fear. After my first couple of visits to the hospital, I had an epiphany and realised this is what I wanted to do. I saw that all the people coming in to the clinics everyday were dealing with so much and still doing what they must despite their problems. The people I observed and I was going to work with, themselves, became my inspiration to work there. I believed that this is what I was meant to do, no matter how hard it may seem.

Fortunately for me, our college supervisor had faith enough in my willingness to work there and my readiness to take on what everyone else thought was an oddball of a task. He discussed these issues with the college as well as the hospital’s social work department and thus my training started. It was decided that for the first quarter I would only be making observations in the OPD clinics and if the hospital supervisor felt I had learnt enough by then, I could be an active participant in the team’s work.

And so it happened, the training began, I made the most of my hours of observation in various outpatient clinics, reading at the library and discussions with the doctors and gaining from the perspective of teams of all professionals and understood the role of social workers in the whole scenario. Upon completion of the first quarter I was gauged by the supervisors and was then allowed to practise at the hospital. With guidance from my supervisors and the hospital doctors I gained knowledge about various psychiatric, psychological and other mental health disorders. But most of all I learnt of the social issues surrounding mental health problems. I came to realise that, till date in our country (India) mental health problems were considered a ‘taboo’. The families most of the times failed to recognise the actual problems of the patients. Even when they do find out about the problem, they do not wish to seek help for it, for the fear of being ostracised by the society. There were several patients in the rehab centre who had been brought over by their families for treatment, but never taken back by that family member, thinking of them as a liability. This display of sheer apathy on the part of family members was the most difficult to comprehend and saddening. But the reason for such behaviour was clearly the fact that our society still does not understand mental health; even something as depression is looked down upon and people refuse to see doctors for it, fearing what others might think of them. So one can safely say that the role of a social worker in the field of mental health is quite crucial especially in a country like India, where awareness needs to be brought about amongst the masses about these issues and people need to be rid of their biases and prejudices against those ailing.

At the end of the year, my determination and my teachers’ belief in me paid off, and I completed the training successfully. Thanks to this experience and all that I learnt from it, I want to be a social worker in the field of mental health. (Personal communication with S. Sharma, 2012)
My professional experience of working in the mental health sector has definitely influenced my thinking and I was very keen on including the consumer’s voice in the subjects that I was responsible for teaching. All of these experiences, reflections and ambitions have in a way directly or indirectly affected my ethos and created a thirst in me for wanting to contribute to the social work fraternity. Unfortunately, it has taken almost 15 years for me to crystallise this dream into reality.

The need for such a book was also another factor which spurred me on. This book, therefore, represents an effort to bring together various academics in this field from Australia and India to share their knowledge. There are a number of Indian-born social workers employed as mental health social workers in Australia, and there are many others who aspire to provide their therapeutic expertise in this country as well. I hope that this text will intellectually scaffold these groups by facilitating greater awareness of the areas of convergence as well as the points of departure between social work theory and practice in Australia and India.

One in four people develop some kind of mental illness at some point in their lives. But although mental illness is one of the most common health conditions worldwide, it can be one of the hardest to come to terms with. Both for those who are ill, and for those who are close to them. People suffer twice over—from the illness itself, and because they are shunned by their families, exiled from their communities and isolated by society. (Mental Health Atlas 2011)

From this account, it is apparent that mental health problems are very common in contemporary society. The key message from the Mental Health Atlas 2011 is that the gap between what is needed for mental health care and what is available, remains very large. This gap is also replicated in social work education, especially in developing countries. It is likewise hoped that this book will be useful in teaching, enhancing practitioners’ skills and facilitating future research and collaborative endeavours among social workers in these nations. As explained by Professor Robert Bland, ‘All social workers, whether in specialist or generalist settings, need specific knowledge, skills and values to work effectively with people with mental health problems’ (Bland et al. 2009). The book is therefore aimed at: (a) students pursuing Bachelor of Social Work, Master of Social Work and MPhil in Medical and Psychiatric Social Work; (b) social work practitioners; (c) field educators; (d) researchers; and (e) social work educators. This book will orient the reader through the various local and international concepts used in mental health, the intellectual base for such practice, current practices, models, debates in
the field and challenges for social work practice. The contributors to this
book have come from various backgrounds and they are from social work,
psychology, psychiatry, law, criminology and education, which presents
a multidisciplinary view of the current practice models. The book is also
enriched by the voice of the consumers, which is also a new direction of
practice. Principles of ‘social justice and human rights’ are the core values
that underpin the philosophical framework of this book as social workers
are called to advocate on behalf of the marginalised, under-represented and
vulnerable sections of society.

The book is divided into two parts, with each part containing a number
of related chapters. The first part explores the various practice models, and
the second part outlines the challenges that confront social work practice
in the area of mental health. At the end of the book, you will find two
appendices. Appendix 1 explains the key terms that are used in this book
and Appendix 2 provides you with a set of reflective questions that will help
the reader to engage in critical reflections and help you formulate an action
plan for practice.

I present this book to you in the hope that it will be useful for your critical
thinking, education and practice.

Abraham P. Francis

References

Crows Nest, New South Wales: Allen and Unwin.
WHO. Mental Health Atlas. 2011. ‘Transcript of the Podcast’, retrieved from
Introduction

Abraham P. Francis*

Welcome to Social Work in Mental Health: Areas of Practice, Challenges and Way Forward. This book has two parts: the areas of social work practice in mental health, and the challenges and ways forward. The Australian Association of Social Workers (AASW) identifies social justice as a key value integral to ethical practice. Social justice considers issues of stigma, disadvantage, discrimination and marginality, and values the lived experience of mental illness and the importance of partnerships, mutuality, participation and choice (AASW 2010). Human rights are based upon the recognition of the inherent dignity and worth and inalienable rights of every person; it is the foundation of freedom, justice and peace in the world and is endowed to all humans regardless of mental health status or culture (Hunter 2007). ‘Human rights refer to the basic rights and freedoms to which all humans are entitled. They are socially sanctioned entitlements to the goods and services that are necessary to develop human potential and well-being’ (Ife 2010: 148).

* This book is conceived and edited by Abraham P. Francis. He has had extensive discussions with the contributors of this book at every stage of the production. It is a work that has involved many authors from various backgrounds, professional disciplines, professional backgrounds and countries. The focus of the book is about social work practice and mental health. The ideas, concepts and practice frameworks discussed in this book are useful in any social context, but with a caution that it needs to be adapted with cultural sensitivity and appropriate level of consultation/guidance with supervisors while engaging in clinical/community practice. The editor of this book has been to orient the students or practitioners to the current areas of practice in mental health and provide a common platform for further reflection and action in their respective field of practice. The editor is responsible for the ideological framework, identifying the authors for this book and providing an overall structure and presentation of this book, while the individual author/authors are responsible for the key ideas presented in their respective chapters. Some of the chapters are based on research studies and others are views, experiences and reflections of the authors engaged in this field of research and professional practice.
The second philosophical ideal underpinning the social work profession is social justice, which can be described as an act of working towards combating human rights violations (Taylor et al. 2008). According to Ife,

Social justice refers to the concept of a society in which justice is achieved in every aspect of society, rather than merely through the administration of law. It is generally considered as a social world which affords individuals and groups fair treatment, equality and an impartial share of the benefits of membership of society. (Ife 2010: 148)

Individuals who experience poor mental health are more likely to be discriminated against and to have their rights violated than people with optimum mental health. Due to individuals with mental illness being more likely to be discriminated and have their human rights violated, it is essential to provide a supportive and understanding service that seeks to promote mental health well-being. The Australian social work Code of Ethics (AASW 2010: 12) states there are three key values that are fundamental to all social work practice: 'respect for persons, social justice and professional integrity'. Social workers are required to value and seek to preserve each individual's unique worth, and all individuals are entitled to dignity, respect, self-fulfilment and self-determination. The social work profession values honesty, transparency, reliability, empathy, reflective self-awareness, discernment, competence and commitment (AASW 2010). This requires social workers to have open and honest communication with the people they work with. It is also important for social workers to provide mental health consumers with information on their rights and responsibilities. Throughout this book, we will explore as to how these important issues are identified and addressed in a practice context.

In the first part of the book, we will look at the various areas of social work practice. With one in five Australians experiencing mental illness at some stage in their lives, social workers will engage with individuals who experience mental health concerns in almost every specialist area (Australian Government Department of Health and Ageing 2009). The interventions, interactions and expectations of social workers differ depending on at what point the contact is and the context of their work. As Bland et al. (2009) remind us that social workers will have to be equipped to handle any such issues that may come before them in their practice. We also need to understand the social contexts in which social workers practice. Social workers are employed in a wide variety of settings and contexts, from individual case management to community development, from clinical work to non-clinical work, from a solo practitioner to a member of a multidisciplinary team or working in a rural/remote background to urban settings. Wherever
the social worker is employed, one will definitely come across the issue of mental health. The content of this book is aimed to throw some light on the current areas of social work practice. You will find some chapters that deal with children, youth, women migrants and older people, and the authors discuss the implications for practice. These chapters not only give you a good understanding about the context and relevance of practice, but it also challenges you and gives you the opportunity to engage in further readings and research. You can devote more time to the specific areas of interest by immersing in the literature which is given at the end of the chapters.

In the second part of the book, we will focus on the challenges faced by social workers in the mental health field, gain an understanding about the emerging knowledge base and will discuss some of the strategies that will strengthen the profession itself, and also will equip the necessary skills needed for individual workers to be effective in their practice. Mental health is a complex area with many social, environmental and psychological influences as well as physical illness and other stressors impacting on an individual’s mental wellness. Individuals who experience poor mental health are more likely to be discriminated against and have their rights abused than individuals who do not experience poor mental health. It is for this reason that social workers must treat mental health consumers with the utmost respect and advocate social justice. Social workers need to work with ‘head, heart and hand’ (Kelly and Sewell 1991: 120).

Reviewing the direction that current mental health policy is taking in Australia, it is important to be able to continue promoting an emphasis on concepts such as participation, recovery and social inclusion in a way that will improve the access to and relevance of services, whilst accommodating the standardised measures of practice (Bland et al. 2009). The social work profession’s strength is its ability to understand the social context and consequences of mental illness and the need for culturally appropriate practices to be utilised (AASW 2004). Therefore, social work practice has a role in building understanding that people, who may be experiencing mental illness, are impacted by direct and indirect discrimination, a general lack of understanding of their specific needs and current policy reforms that are not always culturally sensitive adding to barriers of access to support services, and that this affects them in many domains including employment, housing, education and welfare. This is both a challenge and opportunity for the social worker. Bland et al. (2009: 65) state that ‘Care is effective when multidimensional solutions are provided which build on existing community strengths and capacity and include counselling and social support, and when necessary, support during family re-unification’.
In order to provide effective and reliable service to individuals who experience mental illness, it is important for social workers to continue professional development through research, supervision and critically reflecting on current practices within mental health (AASW 2010). Working in this manner ensures that the social worker provides a service that is of high quality, promotes the principles of social work and is impartial. It is vital that our own personal values, views and preferences do not impact on the people we work with. It is also important that as a social worker, service to humanity is the foundation of our practice. This involves ensuring the interest of the human well-being and social justice takes precedence before a worker’s individual aims, views or objectives (AASW 2010).

So, with this purpose in mind let us now look at the sections in the book. Towards the end of this book, you will find two appendices. Appendix 1 explains the key terms used in the book and Appendix 2 provides you with a list of reflective questions. I hope you will find them useful and will be able to engage with these questions and resources to critically reflect your practice in the best interest of providing a great service to your clients and community.

References


