



Unit 1

INTRODUCTION

LEARNING OBJECTIVES

After going through this unit, you will be able to:

- Describe the concept of mental health and mental illness in relation to providing comprehensive care to the patients.

UNIT OUTLINE

- Concept of Mental Health
- Principles of Mental Health Nursing
- Definitions of Terms Used in Psychiatry
- Review of Defense Mechanisms
- Mental Health Team

KEY POINTS

- Mental health is the capacity to work and love.
- A mentally healthy person does have an IQ of ≥ 70 .
- Psychological disturbances due to distress in life do cause changes in personality, behavior, emotions and thinking which are known as mental illnesses.
- Consistency is the major contribution to patient's security
- Therapeutic nurse patient relationship must be ensured.
- Ego defense mechanisms are the protective psychological efforts to exhibit coping of an individual from anxiety which arises from awareness of internal and external dangers or stressors.
- Mental health services demand multidisciplinary approach which signifies that a number of professionals need to offer their particular services in coordination to bring out the best from mentally sick patients.

CONCEPT OF MENTAL HEALTH

Mental Health

Who is a mentally healthy person? What are the parameters of mental health? The answers to these questions will make you understand concept of mental health and mental illness.

According to **Sigmund Freud**, “Mental health is the capacity to work and to love”. In simple terms, a person who is able to carry on with his life activities (communication, mobility, education, job, social and personal relationships, etc.) and to love self and others is a mentally healthy person and the individual who fails to do so is suffering from mental illness.

We can simply view mental health as the absence of mental sickness. The individual who does not possess any mental pathology is considered to be a mentally healthy person.

According to **Abraham Maslow (1970)**, an individual who is mentally healthy will be in continuous search of self-actualization, i.e., a person who is mature, emotionally stable, evolved human.

Characteristics of a Mentally Healthy Person

- A mentally healthy person does have **an IQ of ≥ 70** .
- A mentally healthy person will be in **touch of reality** which signifies his orientation to his surroundings and behavior in accordance of nature demands.
- A mentally healthy person is a **creative being**.
- A mentally healthy person **accepts his potentials and flaws too**.
- A mentally healthy person **desires privacy**.
- A mentally healthy person is **spontaneous**.
- A mentally healthy person is a **problem solver**.
- A mentally healthy person is **independent and autonomous**.
- A mentally healthy person is **able to maintain good interpersonal relations**.
- A mentally healthy person is **emotionally stable**.
- A mentally healthy person **feels worthy, wealthy and appreciates beauty of life**.
- A mentally healthy person is a **man of principles and ethics**.
- A mentally healthy person **lacks orthodoxy in thoughts and beliefs**.

Mental Illness

It is difficult to define mental illness comprehensively because many of the symptoms of mental sickness are considered normal in many societies. For example, many cultures manifest rigidity and orthodox nature in their thoughts and behavior which are not considered to be signs of mental health. A mentally healthy person is flexible on the other hand. For example, in some cultures, people do practice strict hygienic rituals but they cannot be considered to be mentally sick patients of obsessive compulsive disorder (OCD).

Basically, we can conclude that psychological disturbances due to distress in life do cause changes in personality, behavior, emotions and thinking which are known as mental illnesses. Following are the most common mental disorders are:

- Depression
- Mania
- Bipolar affective disorder (BPAD)
- Schizophrenia
- Psychoactive substance use
- Childhood psychological disturbances
- Mental retardation and other learning disorders, etc.

Mental illness causes much distress to mentally sick people and their care-givers and family members as well. According to WHO, depression will be the biggest mental health problem worldwide in future.

Misconceptions Related to Mental Illness

Myths and misconceptions about mental disorders have developed a negative attitude and stigma toward mentally sick people. Community usually discriminates and isolates people with mental sickness and never allows or appreciates their decision making. The most common misconceptions related to mental illness are as follows:

- **Mental illness is not curable and is life-long:** Mental illness is just like any other chronic medical disorder such as diabetes mellitus, hypertension, etc. Moreover, in foreign setup, depression is considered to be a medical diagnosis nowadays. If a mental sickness is diagnosed early and given prompt treatment, chances of recurrence and relapse are minimized to an extent. Like physical disorders, mental illness is also manageable and treatable.
- **Sinful and wicked persons are more prone to get mental illness:** The most common etiological factor of any mental illness is distress, which is prevalent in every sphere of life. Most people do not know how to deal with life stress in a positive way and do not have an empathetic friendship or family to support them in their life challenges. Therefore, it may result in mental sickness and not because of their wickedness and other sinful work.
- **Mentally ill are intellectually disabled persons:** This is purely a myth. Many of the mentally sick persons have proved it wrong. Following persons may astonish you with their work and success.
 - John Nash is a Nobel Prize winner in Mathematics who was suffering from paranoid schizophrenia.
 - Deepika Padukone and Anushka Sharma are established actresses who have been treated for depression.
 - Ileana D'Cruz is an award winning Indian actress, was treated for body dysmorphic disorder.
 - Angelina Jolie does not need any introduction, had depression in her teens and early 20's.
 - Princess Diana was treated for depression and bulimia.

- Honey Singh was treated for bipolar disorder.
No wonders, if these famous personalities can achieve success in life, every mentally sick has the potential to reach heights if treated and cared.
- **Mentally ill are threat to society:** People with mental sickness are not always pose a threat to others. Excited patients can also be managed with restraining and appropriate treatment.
- **Mentally ill needs to be isolated from community:** The ideal treatment for a mental sickness is on an OPD basis and person should be living in society and given life skills management in community only. But stigma related to mental illness does not allow community to practice deinstitutionalization. It is not mandatory for a mentally sick to be hospitalized and be isolated from community. Even, patients improve so quickly, if they get support from family and friends in the course of mental illness.
- **Mentally sick person's brain is damaged:** Few of the mental illnesses are organic in nature which are due to brain injuries or structural abnormalities of brain. But it cannot be generalized that mentally sick person's brain is damaged. Mental disorders may result from functional pathology of psychology.
- **Mentally sick people are demon possessed and it is the result of sins of past life:** This is another misconception related to mental illness but it is not true. The symptoms of mental sickness such as delusions and hallucinations are due to abnormal levels of neurotransmitters in brain.
- **Mental sickness is inborn illness:** Mental retardation is the only mental sickness which can be diagnosed at birth, if it is confirmed through brain imaging. Otherwise, no one is mentally sick from birth.

PRINCIPLES OF MENTAL HEALTH NURSING

Principle can be defined as set rules which should not be altered. If we add to the principles, we subtract from them. Therefore, they must be followed as mandatory rules of mental health care. The basic nature of every principle is to respect the individuality and dignity of every mentally sick client. Principles of mental health nursing are as follows:

- **Accept the patient as he is**

"Most people need love and acceptance a lot more than they need advice".
—**Bob Goff**

A nonjudgmental attitude of nurse conveys feeling of acceptance to patient. Nurse must not label patient's statements/conduct/history as good or bad. Nurse must listen to patient's expression of thoughts in a dignified manner. Honor and respect is the key to show the client that he/she has been accepted.



Follow the given rules to demonstrate acceptance:

- Be nonjudgmental and nonpunitive
- Active listening
- Show sincere interest in client
- Honesty
- Do not talk about private issues unless you have reached that level of comfort with patient.
- Allow patient to make choices.

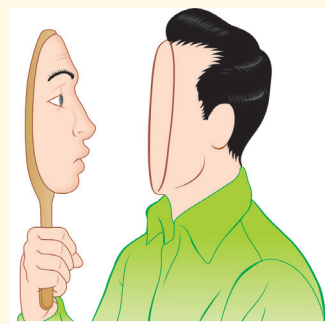
- No vain talk/use therapeutic communication techniques of reflection and interpretation.
- Talk with a purpose always.
- Demonstrate empathy.
- **Use self-understanding as a therapeutic tool**

“Self-understanding rather than self-condemnation is the way to inner peace and mature conscience”.

—Joshua L. Liebman

A nurse must know his/her strengths, weaknesses, potentials and emotions, and how they are affecting others. A nurse should have a strong self-concept.

A nurse should be mentally strong and sound to deal with mentally sick patients. A nurse cannot serve from an empty vessel so she should have peace, emotional stability and courage to distribute the content among psychiatric patients.



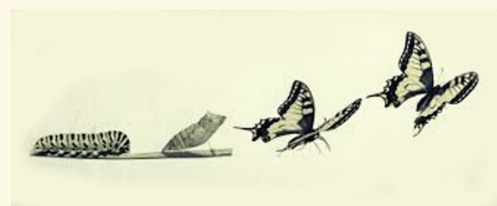
- **Consistency is the major contribution to patient's security**
 - Constant behavior as simple as following a ward routine is so much effective in adding to patient's security.
 - Consistency in conduct (no switch from friendly to aggressive and then to over friendly and again strict and rigid approach) is always appreciated by patients. It helps them to develop trust in nurse because they feel secure in nurse's consistent behavior.

“We are what we repeatedly do. Excellence, then, is not an act, but a habit”.

—Aristotle

Habits once developed, are difficult to change. So to ensure drug compliance and limit setting on patient's behavior will add to treatment.

Patients usually demonstrate obedience if nurses practice consistency.



- **Reassurance should be given in a subtle and acceptable manner**

Everyone needs a little reassurance sometimes. —Unknown

A mental health nurse should practice expertise in giving reassurance to a mentally sick client.

Patient's situation is understood and analyzed how it is bothering to him/her.

Reassurance means to clarify all the doubts and fears of patients. For example, everyone in the ward will be given equal facilities without any discrimination.



- **Patient's experience is changed through emotional experience and not by rational interpretation**

"Genius is the ability to renew one's emotions in daily experience".

—Paul Cezanne

When we talk about psychological disturbances, patient's IQ is not the matter of concern rather "Emotional quotient" is the priority issue. It means advice and rationale will not work with mentally sick patient. The patient will only follow nurses' commands, if nurse appears good and trustworthy to him/her. A nice compliment, a social smile and careful attention to patient's problems will bring better results. Care and concern of nurse will bring lasting results in patient's behavior.



- **Unnecessary increase in patient's anxiety should be avoided**

"Nobody realizes that some people expend tremendous energy merely to be normal".

—Albert Camus

Following rules if followed strictly, can avoid unnecessary anxiety in mentally sick patients:

- Do not show your own anxiety.
- Make realistic goals with patient.
- Do not say contradictory ideas to patient.
- Do not label patient's behavior as good or bad.
- Do not pay extra attention to patient's deficits.



- **Use objective observation to comprehend patient's behavior**

Example of Observations

Observation A

- Subjective
 - Personal opinions and feeling
 - No facts
 - It is hard to tell what really happened between the two boys

Observation B

- Objective
 - Factual
 - Leaves aside personal feeling
 - The observer describes only what is actually seen/hard



- A nurse must be objective in her observation. No personal opinions, judgments or emotions to be mixed with objectivity of situation.
- All the information should be factual (based on facts).

- **Therapeutic nurse–patient relationship must be ensured**

- Nurse–patient relationship is the most important work to be pondered over in care of mentally sick patients.
- Mentally sick clients are having problems due to distress in life in most of the cases. Now, their mind is fragile and only kind and affectionate words and relationships are welcomed. Therefore, a kind and therapeutic nurse–patient relationship is the great principle to be followed to have effective mental health nursing.

“There is no human relationship more intimate than that of nurse and patient, one in which the essentials of character are more rawly revealed”.

—Dorothy Canfield Fisher

- Attend to patient’s emotional needs.
- Provide care with a patient centered approach.
- Use therapeutic communication techniques.



- **Avoid physical and verbal force as much as possible**

“Emotional abuse is just as bad as physical abuse. Worse! You can heal broken bones; you can’t heal a broken mind”.

—Dia Reeves

- Avoid punishment as an approach to behavior modification.
- Avoid verbal abuse with patients. Talk with a language of kindness.
- Nurse’s polite behavior and generosity can improve patient’s mental sickness.



- **Nursing care is centered on the patient as an individual/a unique person and not on the control of symptoms**

Individualized care that treats the whole person.

- Two patients may be experiencing headache in the same ward. But the etiology may not be same, so we should use different approach to treat the same symptom. Care should be based on individualistic approach because same symptom may be having different meaning and significance to different patients.

Individualized
care plan



- Explain all procedures and routines in accordance with patient's level of understanding

"Everybody has different understanding level. What I can tell you, can only be up to what you can understand".

—HZ Mevlana

While explaining routine procedures to the mentally sick, a nurse must consider attention span of patient (only 20 minutes), level of anxiety and decision making ability. All talk must be without use of medical terminology. Use regional language as far as possible. Give instructions in a slow manner.

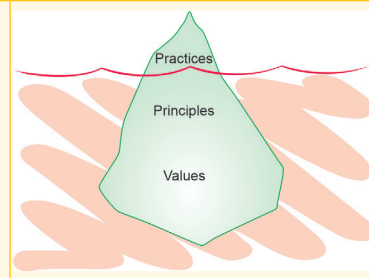


- Procedures are modified but basic principles remain same

"A person who values his privileges above his principles soon loses both".

—Dwight D Eisenhower

Oral medication/assessment of blood pressure is a routine procedure in medical field. But in psychiatry, this procedure is modified accordingly to deal with mentally sick patients without altering basic principles.



DEFINITIONS OF TERMS USED IN PSYCHIATRY

A	
Abreaction	Painful repressed feelings are expressed through hypnosis and/or suggestion by relieving the experience.
Adaptation	Adaptation is the ability of an individual to adjust with physical and psychological environment for growth.
Affect	Outward expression of inward emotions.
Aggression	An expression of anger emotion with energy to initiate a fight either results in harming oneself or others in opposition.
Agoraphobia	Agoraphobia is an irrational fear of those spaces from which escape is difficult.
Akathisia	A feeling of restlessness accompanied by an inability to sit still.
Akinesia	Absence of voluntary movement.
Amnesia	Loss of memory; permanent or transient.
Anger	A strong hostile emotion.
Anhedonia	An inability to feel pleasure.
Anxiety	An apprehensive feeling of impending doom.
Aphasia	Aphasia is inability to understand and form language.

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Aphonia	Aphonia is an inability to speak.
Apraxia	Apraxia is a motor disorder in which an individual is unable to perform a purposeful activity.
Assertiveness	A behavior which enforces protection of one's own rights without violating the rights of others.
Associative looseness	Associative looseness is a thinking disorder in which ideas and thoughts of an individual are so vague and diffuse and do not to have any logical sequence.
Ataxia	Staggered gait under the effect of alcohol or other toxic substances.
Attitude	Attitude is an individual's opinion, idea or emotion toward an object, person or event.
Autism	Autism is a psychological childhood disorder in which a child lacks social skills, verbal and nonverbal communication and has differently abled unique potentials beyond understanding.
B	
Belief	An opinion which is accepted as truth.
C	
Catastrophic thinking	Catastrophic thinking refers to thoughts of negative outcomes in future which may result in panic attacks.
Catatonia	A psychopathological state of stupor, stereotypic activity or negativism.
Catharsis	Catharsis is the means by which there is release of strong negative emotions to have relief in mind.
Circumstantiality	Circumstantiality is a psychopathological conversation in which an individual gives so many unnecessary details before reaching the goal.
Clang association	Similar sounding words are associated to form a speech, e.g., rat, cat, mat, bat, tat.
Cognition	The mental faculty of thought process to acquire knowledge, discernment and insight.
Compensation	An ego defense mechanism in which an individual relieves his/her anxiety by an over achievement in another area.
Confidentiality	Confidentiality is an ethical principle or commitment between a therapist and a patient which states that the information of patient will not be shared to others unless it is for mental welfare of patient.
Cyclothymia	Cyclothymia is a mood disorder characterized by mood swings alternatively between depression and hypomania.
D	
Déjà vu	An individual is having the feeling that he has already experienced the present situation.
Delirium	Delirium is a reversible disturbed state of mind characterized by cloudiness of consciousness.
Delusion	A false, fixed belief which is not in accordance with one's intelligence and cultural background.
Dementia	Dementia is a progressive degenerative disorder characterized by forgetfulness and decline in mental ability.

Contd...

Depersonalization	Depersonalization is a feeling of being detached from oneself in which victim states that he has been changed or is in a dream.
Derealization	Derealization is a feeling that the world is not real or has been changed.
Detoxification	Detoxification is the process in which an individual's body is being freed from toxic substances medically through physiological means.
Distraction	An extreme agitated state of mind.
Dysthymia	A chronic mild depression usually more than 2 years.
Dystonia	Dystonia is a movement disorder in which an individual's muscles contract uncontrollably resulting in involuntary repetitive movements or abnormal posturing.
E	
Echolalia	Repetition of spoken words of another person.
Echopraxia	Imitation of actions of another person.
Ego	The part of the mind which keeps balance between id (pleasure) and superego (morality) and is based on reality principle.
Empathy	The ability to understand another person's thoughts and emotions is known as empathy.
Exhibitionism	It is a psychopathological disorder in which there is a compulsion to show one's genital organs publicly.
F	
Fetishism	It is a sexual disorder having a psychological basis in which an individual's gratification is with a specific object, activity or part of the body.
Flight or fight	It is also known as acute stress reaction. It is a physiological reaction which occurs in the body as a result of real or potential danger.
Flooding	It is also known as implosive therapy. In this therapy, an individual who is having phobia is flooded with the phobic stimuli on a continuous basis until they no longer elicit anxiety.
Free association	It is a technique to bring out repressed emotions on surface. The individual is encouraged to freely speak his mind; whatever topic comes to his mind and shifting from one topic to another.
Frotteurism	A sexual disorder in which an individual obtains pleasure by touching or rubbing against a person without consent.
Fugue	In severe distress, person usually exhibits a wandering behavior, leaves home (familiar places) and adopts a new identity; individual is not able to memorize his original identity.
G	
Grief	An emotional reaction involving physiological and social responses as a result of an actual or perceived loss.
Gynecomastia	Enlargement of breast in males.
H	
Hallucination	Wrong perception in the absence of stimuli.

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Homosexuality	An individual feels sexual urge toward the same gender is known as homosexuality.
Hypersomnia	Excessive sleep usually a symptom of depression.
Hypnosis	It is an induced semiconscious state of mind where an individual is highly responsive to suggestion and direction; repressed and suppressed emotions and memories are brought out then.
Hypochondriasis	Overconcern and worry about bodily health which is psychopathological in nature.
Hypomania	It is a mild form of mania characterized by triad symptoms of elated mood, increased psychomotor activity and pressure of speech but symptoms are not severe enough to be called mania.
Hysteria	A dramatically presentation of bodily symptoms for gain.
I	
Id	It is the component of mind which dominates by pleasure principle and seeks immediate gratification to satisfy needs.
Identification	An ego defense mechanism in which an individual adopts character of another person to increase self-esteem of oneself.
Illusion	A wrong perception in the presence of stimuli.
Insomnia	It is a sleep disorder in which an individual is unable to initiate and/or maintain sleep.
Introjection	An ego defense mechanism in which an individual takes values and beliefs of another person's personality as his own personality.
Isolation	An ego defense mechanism in which an individual isolates one's thought/memory/feeling from conscious emotional tone.
K	
Kleptomania	It is a conduct disorder in which an individual feels a compulsive urge to steal objects necessarily not of his use.
L	
La belle indifference	It is a symptom of conversion disorder in which patient does not have any concern about bodily symptoms and lacks any emotion in relation to them.
Libido	It is an instinctual/psychic energy which drives human mind to fulfill his desires and needs such as hunger, thirst and sex.
M	
Maladaptation	An individual who is incapable of maintaining equilibrium (physically and psychologically) as a result of distress is known as maladaptive person. His failure to do so is maladaptation.
Mania	It is a mood disorder characterized by elated mood, increased motor activity and pressure of speech severe enough to be clinically diagnosed.
Masochism	It is a sexual disorder in which an individual obtains pleasure by afflicting oneself, i.e., through one's pain and suffering.
Meditation	It is a method of progressive relaxation in which a person sits in a quiet place and concentrates on one object, thought or idea.

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Melancholia	It is a severe form of major depression in which symptoms are so intense and all the contacts and interests with reality are lost altogether.
Mental imagery	It is a method of bringing relaxation by imagining a scenario which is relaxing to mind. For example, a beach.
Milieu	Milieu refers to an individual's social environment which is used as a therapeutic tool.
Modeling	It is a method in which an individual learns behavioral techniques by imitating alone.
Mood	An individual's present emotional tone is known as mood.
Mourning	The psychological response of an individual to adapt with a real or perceived loss. For example, loss of a loved one.
N	
Narcissism	It is the part of one's personality which obtains pleasure by strong admiration of one's own qualities and potentials.
Narcolepsy	Narcolepsy is a sleep disorder characterized by sleep attacks during day time that usually last from seconds to minutes.
Negativism	A strong resistance to follow commands and suggestions and a conduct contrary to what is expected.
Negligence	It is a conscious effort to not take proper care and concern of an object, person or event.
Neologism	Neologism refers to invention of a new word or expression which has a particular meaning for the inventor but do not possess any dictionary meaning.
P	
Palilalia	It is a speech disorder in which an individual repeats one's own sounds or words.
Panic	An attack of profound anxiety characterized by intense fear, agitation and a feeling of impending doom.
Paralanguage	It is the nonverbal communication in regard of gestures, pitch, tone, rate, rhythm and audibility of spoken words.
Paranoia	Paranoia refers to extreme suspicion and delusion of persecution.
Paraphilias	It is also known as sexual perversion or sexual deviation in which an individual focuses of on sexual drives and drifts from real human beings to atypical objects, fantasies or nonconsenting persons.
Parasomnia	Parasomnia is a sleep disorder characterized by unusual behaviors, dreams, emotions, perceptions and abnormal movements during sleep. For example, nightmares sleep walking, night terrors.
Pedophilia	It is a sexual disorder characterized by having intense sexual urges and desires, sexual fantasies for a prepubescent child.
Perseveration	Repetition of the same answer to different questions is known as perseveration.
Phobia	Phobia is a neurotic disorder in which a person has an irrational and excessive fear/anxiety toward an object, situation or a life event.
Posturing	An individual adopts bizarre postures voluntarily which is known as posturing.
Priapism	Priapism refers to the painful penile erection.

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Projection	An ego defense mechanism in which an individual projects those ideas and thoughts onto another individual which are painful and unacceptable to him.
Pseudocyesis	It is a conversion reaction in which an individual has signs of pregnancy, when in reality is not pregnant.
Psychodrama	To resolve interpersonal conflicts, individuals are asked to play the life situations dramatically to gain insight into actual problem.
Psychomotor retardation	Slowing down of motor activity due to psychopathology.
Psychosis	No touch with reality cause severe impairment in social and personal functioning is a mental condition known as psychosis.
Pyromania	An individual is having an uncontrollable urge to ignite fires.
R	
Rape	Rape is an aggressive sexual activity without consent of partner which can cause physical and mental trauma to the victim.
Rapport	A sense of mutual respect and trust between two persons as a result of share of emotions and thoughts.
Regression	An ego defense mechanism in which an individual reverts back to previous developmental stage because he/she is not able to cope up with present demands and obligations.
Ritualistic behavior	As a compulsive act to alleviate the anxiety, an individual repeatedly performs a purposeless activity. For example, hand washing.
S	
Sadism	It is a sexual disorder in which an individual considers affliction and physical suffering of the partner to be sexually exciting.
Scapegoating	It is a phenomenon in which an unsuccessful marital relationship is blamed to a third party (usually a child).
Schemas	Schemas are also called core beliefs. When a child learns morals and ethical principles as a result of learning through imitation and interaction with family, friends and community, it results in formation of core beliefs of an individual which are further reinforced later in life.
Self-concept	An individual is made up by his physical self (body image); personal self (identity) and self-esteem and together they constitute self-concept.
Self-esteem	Self-esteem is a measure of an individual's estimation of self-worth in his own eyes.
Silent rape reaction	Silent rape reaction is characterized by complete mute about the rape incident, i.e., a person does not talk about rape at all.
Somatization	When psychological conflicts are manifested in somatic complaints, this mechanism is known as somatization.
Stereotyping	A stereotyping is the adoption of a specific behavior by an entire group.
Stimuli	Stimuli are reflex provoking energy. It is that energy which is responsible for a reflex/response.

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Stress	Stress is the result of failure to cope up with present demands. A stressful person feels nervous and restlessness.
Stressor	A stressor is that chemical/biological/psychological agent which is capable of causing stress.
Sundowning	The symptoms of dementia are worse during noon and evening times; this phenomenon is known as sundowning syndrome.
Superego	Superego is that part of the personality which is based on morality principle and constitutes conscience and cultural obligations of an individual.
Symbiotic relationship	This is a normal behavior between a mother and an infant in which separation causes anxiety.
Sympathy	Sympathy is the emotion of an individual which feels sorrow for the pain and affliction of another person.
Systematic desensitization	As name suggests, this therapy implies systematically desensitizing an individual toward a phobic stimulus.
T	
Tangentiality	Tangentiality is a psychopathological conversation in which an individual gives so many unnecessary details and never reaches the goal.
Tardive dyskinesia	It is an adverse reaction of psychotropic drugs which is manifested clinically by a stiff neck, bizarre facial and tongue movements and dysphasia.
Temperament	Temperament is unique with every individual; it is the way with which an individual reacts to his internal and external environment.
Token economy	It is a behavioral modification technique in which token is given to an individual for desired conduct and at a specific time, these token can be exchanged for settled privileges.
Transsexualism	It is a psychopathology in relation with gender of an individual which is characterized by dissatisfaction with one's gender identity and an extreme desire to adopt opposite gender. In transsexualism, the diseased person may take help of surgical intervention to serve his/her purpose of adopting opposite gender.
Transvestism	It is also a psychopathology of gender identity in which an individual dresses himself/herself of an opposite gender. For example, a boy wears clothing of a girl.
Trichotillomania	Trichotillomania is also named as hair pulling disorder in which an individual is having a compulsive urge to pull his hairs.
V	
Voyeurism	It is a sexual disorder in which an individual gains sexual pleasure by watching naked people or sexual activity of people.
W	
Waxy flexibility	Waxy flexibility is a symptom of mental disorder in which a patient adopts an immobile posture and does not change it unless another person intervenes.
Word salad	Word salad refers to mixture of random words or phrases which are not comprehensible and are joined together in an unorganized fashion.

REVIEW OF DEFENSE MECHANISMS

Anxiety is the hallmark symptom of every mental disorder which signifies that every mental sickness starts with anxiety, i.e., an apprehension/an unpleasant threatening emotion in a person's mind about an unknown danger in the future. This unknown danger is uncertain; it may or may not happen. But a person feels anxiety and to deal with this anxiety and relieve its symptoms, person's mind will automatically take efforts. These efforts are the coping mechanisms which function at the psychological level (may be in conscious awareness of a person or may operate unconsciously). The coping mechanisms used by an individual to avoid emotional conflicts and are known as ego defense mechanisms.

Ego defense mechanisms are the protective psychological efforts to exhibit coping of an individual with anxiety which arises from awareness of internal and external dangers or stressors.

Every individual has its own unique way to practice individual's defenses or coping patterns to deal with psychological conflicts. This uniqueness of use of coping mechanisms is because of unique psychology of every individual. Not all individuals will use same defense mechanism to deal with same problem. For example, one may use denial and another may use, Intellectualization. This choice of defense mechanism is because of different adaptation level of the individual. The individual may operate on different adaptation levels of ego defense mechanisms.

Defense Levels and Individual Defense Mechanisms

Table 1 shows a list of defense levels and individual defense mechanisms:

Table 1: Defense levels and individual defense mechanisms

Defense levels	Individual defense mechanisms
High adaptation level • Mature defenses • These defenses operate at optimum level • An individual uses these defenses at conscious level which means person is aware of emotions, ideas and consequences of usage of defense mechanism	• Anticipation: Dealing with stressors by predicting the consequences associated with it and then overcome with realistic solutions. For example, retirement planning. • Affiliation: Dealing with stressors by taking help and support from others who are advisers/counselors/family/friends, etc. For example, support groups, spiritual counseling. • Altruism: Helping and supporting other humans who may or may not be suffering with the same psychological stressors. In this way, person experience inner mental peace and contentment. For example, a boy who has suffered a relationship breakup is helping other boys who had breakups • Humor: Always finding a funny side of every situation to avoid lose control and triggering the mind to see the positive aspects of a negative situation. For example, when entering an examination hall, to avoid anxiety, a student may crack a joke like, "today weather is so hot and all the question papers will burn before reaching the hall". • Self-assertion: Person is praising and boasting about oneself in an aggressive manner, here he/she is purposefully keeping oneself above others to get recognition and approval of others. For example, "I am not like an ordinary player; you really have to practice hard to compete with me."

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Defense levels	Individual defense mechanisms
Mental inhibitions (compromise formation) level • These are immature defense mechanisms. • A person uses these defenses to avoid threatening emotions in the mind.	• Self-observation: Acknowledging and studying one's own behavior, thoughts and emotions in order to comprehend oneself and respond in an appropriate manner. For example, keeping journal, diary, bibliotherapy. • Sublimation: Dealing with the stressful conflicts and emotions in an acceptable manner. For example, doing vigorous exercise in gym to control anger impulses. • Suppression: Forgetting the painful memories/information consciously. For example, forgetting scolding of a teacher as soon as teacher leaves the class. • Displacement: As name suggests itself, person's actual emotions are displaced onto another person or object which is seemingly less threatening. For example, a student who has got enough scolding from a teacher for failure in examination may displace his anger by throwing all books in his hostel room or may even fight with his roommate for no good reason. • Dissociation: The name itself suggests the functioning of defense mechanism; here person is dissociated (separated) from the actual world/situation or reality on a momentary basis. The person will again come into reality when someone else will bring him into consciousness again from a state of day dreaming. For example, after hearing news about disqualification in an entrance exam, person may become completely quiet and stare at wall and allow his mind to wander to mentally prepare himself to accept the reality. • Intellectualization: Avoiding psychological conflicts with the use of logical explanations and reasoning. Reacting in a calm manner focusing on intelligent aspect only. For example, a person who is having a strong sexual instinct toward a teenage may justify it by giving a logical explanation that it is acceptable to marry even children in some cultures and I am going to marry her, not having any intention to exploitation or abuse. • Isolation of affect: Here, a person attempts to avoid a painful emotion by detaching himself from it. For example, acting indifferent toward people or situations you do not like. • Reaction formation: To avoid psychological conflicts, a person will behave contrary to actual feelings and thoughts. For example, presenting gifts to a boss, when you really do not like him. • Repression: It is considered to be basis of all other defense mechanisms sometimes. Here, an individual forgets painful memories and thoughts at an unconscious level contrary to suppression where it happens at the conscious level. For example, forgetting the road accident in which amputation of leg happened; forgetting the death event of a loved one. • Undoing: In a computer, undo means reverting back to the previous situation. But in life, undoing is not possible to that extent. Nevertheless, an individual tries to reverse a thought and emotions by performing an exact opposite action. For example, to avoid guilt feelings of an extramarital affair, a husband brings flowers to wife.

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Defense levels	Individual defense mechanisms
Minor image-distorting level - In these defense mechanisms, a person distorts his/her image of self or others to keep his/her self-esteem. - Unhealthy defense mechanisms.	Devaluation: Underestimating one's worth or importance in order to pay for the balance of psychological conflicts. Here, an individual labels all of the events and people involved in the situation as completely bad and starts underestimating the worth of his own capabilities and attributes. For example, I am not good enough to have a relationship; I am too hard to love; it has happened rightly with me because I have done all wrong in my life. Things will never be right for me. Idealization: On the contrary to devaluation where a person underestimates his worth and potentials, idealization is the mental mechanism in which an individual exaggeratedly overestimates his worth and attributes. For example, I am overqualified for this job. I am so pretty to be a housewife. I am worthy of being treated as a king. Omnipotence: This defense mechanism is an unhealthy delusional defense in which an individual is having the feeling of being almighty, extremely powerful, beautiful/handsome to the maximum and irresistible. It is a symptom of mania and personality disorder in most of the cases. For example, a manic patient may offer you a job by explaining about his extreme riches.
Disavowal level In these defense mechanisms, a person does not allow unacceptable unpleasant emotions and thoughts to enter in the conscious awareness of mind.	Denial: Individual rejects and denies the reality and actual situations because they are too painful for him to handle. For example, an individual who has suffered liver disorders because of alcoholism but denies he have an addiction of alcohol still. Projection: Attributing one's own ideas and thoughts; emotions to another person because they are unacceptable to the individual and he/she is not able to cope up with those emotions. For example, an individual quarrels with his/her spouse but proclaims that other person is mad at him/her. Rationalization: This defense mechanism is used by intelligent persons. They justify their behavior and emotions by substituting acceptable logical reasons. For example, everyone cheated in the exam hall so if I did the same; it is no big deal.
Major image-distorting level - Like minor image distortion, here person distorts his/her image but distortion is severe enough and gross in nature comparatively. - Unhealthy defense mechanisms	Autistic fantasy: An individual uses daydreaming and fantastical thinking to cope with distress and avoids real social interactions to live in fantasy and daydreams. For example, an individual, who has been rejected for a relationship proposal, may fantasies about an ideal situation into a fantasy world based on his favorite movie. Projective identification: This is the defense which is used by an individual who is in a deep relationship with another person be it a parent, lover or therapist. It is used to get rid of unwanted parts of self and unconsciously thought of as being forced into the other person. For example, an individual may ask help from a therapist when actually it is not needed and the therapist helps and in that case the individual feels complete control over the situation.
	Splitting of self-image or image of others: When an individual perceives the situation as completely unbearable and feels hopeless about its outcome then the defense he/she uses is to view events and/or people as either all bad or all good. - This defense often leads to two other defenses either idealization (viewing all well) or devaluation (viewing all badly).

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Defense levels	Individual defense mechanisms
Action level In these defense mechanisms, defense is active in nature, i.e., a person actually takes action to avoid stressors.	Acting out: This is defense mechanism in which an individual performs an action instead of bearing and controlling the driven impulse. For example, antisocial behavior by a drug addict; he/she never control the impulse of addiction but fight and argue with the one who rejects such behavior. Apathetic withdrawal: Apathy means dulled emotional tone. An individual psychologically allows the body to shut down several functions. He/she does not react to external stimuli. For example, catatonic stupor. Complaining followed by rejection of help: Here, an individual feels satisfied after complaining about his problems again and again and asks for help, but rejects help when it is given. For example, I do not need your help, my problems are worse than you think in your mind. You will not understand. Passive aggression: Expressing anger indirectly onto others and expecting others to understand. For example, throwing utensils in the kitchen for husband to understand that wife is angry about his late coming.
Level of defensive dysregulation - This level is pathological adaptation to distress which leads to psychologically harmful responses to reality. - The individual loses all of his/her contact with reality.	Delusional projection: The individual exhibit false fixed thoughts, emotions and impulses which are not in accordance with reality, intelligence and in cultural background. For example, an individual proclaims that this world is coming to an end (nihilistic delusion). Psychotic denial: A more severe form of denial without any contact with reality accompanied by psychosis. For example, a mentally sick client denies his/her symptoms to avoid initiating anxiety and nervousness in others. A wife denies relapse of psychotic symptoms at home just to avoid anxiety in spouse. Psychotic distortion: Psychologically, reality is perceived differently usually wrong perception to deal with the psychological pain. For example, a lover does not complain about unfaithful behavior of partner but expecting change.

MENTAL HEALTH TEAM

Mental health services demand multidisciplinary approach which signifies that a number of professionals need to offer their particular services in coordination to bring the best out of mentally sick patients. A team implies working together for a common goal.



Following professionals are to be there for an ideal mental health services setup.

- Psychiatrist
- Psychologist
- Clinical psychologist

- Counselor
- Addiction counselor
- Mental health social worker
- Psychiatric nurse
- Psychotherapist
- Behavioral therapist
- Occupational therapist
- Vocational supports trainer

Psychiatrist

A psychiatrist is the team leader who is having a specialization in mental health and holds MD degree for professional practice in a mental hospital.

Roles and Responsibilities of a Psychiatrist

- Counseling
- Mental care of psychiatric patients
- Medical care of psychiatric patients for physical diseases and symptoms, etc.
- Mental assessment (psychiatric history and mental status examination)
- Diagnosis of the patient is also the responsibility of a psychiatrist
- Psychotropic medication ordering on the basis of need of a psychiatric patient
- Referral to a member of health team
- Admission and discharge of a psychiatric patient.

Psychologist

A psychologist is a specialized professional who owns training in study of human behavior and is an expertise in explaining feelings, thoughts and behavior of a mentally sick patient. A psychologist holds a doctorate in psychology.

Roles and Responsibilities of a Psychologist

- Assessment of psychological factors in causation of a mental sickness
- Personality assessment
- Assessment of psychological problems and their origin. For example, depression, phobia, anxiety, marital problems, psychosexual issues, etc.
- Counseling
- Helping the mentally sick to develop an insight into mental illness
- In most of the clinical setups, psychologist is not responsible for prescribing medications.

Clinical Psychologist

Clinical psychologist also holds a specialization in mental health. He/she is also an important member of mental health care team.

Roles and Responsibilities of a Clinical Psychologist

- Counseling therapy
- Assessment of mental disorders
- Family therapy
- Cognitive behavioral therapy (CBT)

Counselor

Counseling is the today's established profession. Many of the scholars have obtained specialized degrees in different approaches of counseling such as marital counseling, parent counseling, addiction counseling and grief counseling, etc.

The best quality counselors possess is "nonjudgmental attitude". Nonjudgmental approach can do wonders for a mentally sick or a person with psychological problems. Other factors which can bring life to a psychologically handicapped person are active listening and respect for a patient.

Roles and Responsibilities of a Counselor

- Counseling using various approaches and theories
- Counseling needs to be one session per week.
- Counseling should be short term to avoid dependency and social relation with counselor.

Addiction Counselor

This is a specialized field of counseling for drug addicts. Addiction counselors are expertise in counseling and treatment of those who are having alcohol, drugs and gambling addictions.

Before initiating addiction counseling, it is mandatory for a drug addict to go through a detoxification program.

Roles and Responsibilities of an Addiction Counselor

- Individual counseling
- Group counseling
- Group therapy
- Examine the triggering factors that lead to addiction
- Goals and target setting
- Establish new healthy behavior

The addiction counseling program is for 6–8 weeks and followed by an aftercare service.

Mental Health Social Worker

A mental health social worker is also a functional important member of a mental health team. The most important key function of a mental health social worker is "psychoeducation". In psychoeducation, a mental health professional explain about mental illness to individuals and their family members.

Roles and Responsibilities of a Mental Health Social Worker

- Psychoeducation
- Coping strategies teachings

- Case management
- Maximizing quality of life of mentally sick patients
- Social welfare, job training and employment with NGOs to help mentally sick to be a part of the community.

Psychiatric Nurse

An important central role as an important member of the mental health team is played by psychiatric nurse. A psychiatric nurse works in clinics, community centers and in a hospital. Nurses provide physical and psychological care to mentally sick patients. Nurses provide 24 hours services to the mentally sick patients in emergency and in regular care in wards.

Roles and Responsibilities of a Psychiatric Nurse

- Physical and psychological care services
- Family and patient psychoeducation
- Individual counseling
- Group therapy
- Admission and reception of a mentally sick patient
- Educating student nurses and community groups
- Follow-ups and discharge planning
- Mental health services in OPDs and day care centers

Psychotherapist

A psychotherapist do helps mentally sick patients to encourage expression of thoughts and emotions of a mentally sick, be it positive or negative emotions and thoughts embedded in the soul and mind of a patient.

Roles and Responsibilities of a Psychotherapist

- Helps in expression of fear, anxiety, suspicion and negative emotions
- Counseling
- Listening carefully to patient's problems
- Teaching problem-solving skills to mentally sick patients

Behavioral Therapist

Behavioral therapist does behavioral modification by teaching mentally sick to deal with their problems in a different way with different coping strategies.

Roles and Responsibilities of a Behavioral Therapist

- Systematic desensitization
- Treatment of behavioral disorders such as eating disorders and phobias
- Helping patients to control undesirable habits and irrational fears
- Aversive conditioning.

Occupational Therapist

An occupational therapist provides occupational therapy to those who are incapable to coping with everyday activities and activities of daily living to earn a livelihood.

Following are the patients who get help from occupational therapist

- Mentally disabled
- Physically differently abled
- Patients having learning disorders
- Patients having congenital disorders
- Patients having neurodegenerative disorders

An occupational therapist helps these patients to have a productive and satisfying lifestyle to manage personal and social affairs in community.

Vocational Supports Trainer

This important member of health team will inculcate skills and training for employment and earning. To be a vocational supports trainer, one may or may not have specific medical training. Following are the skills which are being trained to mentally sick patients.

- Metal work
- Office procedures
- Arts and crafts
- Life-skills
- Wood work

ASSESS YOURSELF

Long/Short Answer Questions

1. Define the following terms:

a. Illusion	b. Hypnosis
c. Phobia	d. Hallucination
e. Delusion	f. Rationalization
g. Echolalia	h. Projection
i. Defense mechanism	j. Déjà vu
k. Denial	l. Suppression
m. Tangentiality	n. Perseveration
o. Echopraxia	p. Affect
2. Enlist characteristics of a mentally healthy person.
3. Write a short note on misconceptions toward mental illness.
4. Explain about principles of psychiatric nursing.
5. Differentiate between mental health and mental illness.
6. Write a short note on ego defense mechanisms.
7. What is meant by mental health and mental illness?
8. Explain five ego defense mechanisms and explain briefly one defense mechanism with example.

Multiple Choice Questions

1. **Cloudiness of consciousness is a symptom of which disorder?**
 - a. Dementia
 - b. Depression
 - c. Delirium
 - d. Mania
2. **What is an ego defense mechanism?**
 - a. Protective psychological efforts to exhibit coping of an individual from anxiety
 - b. A martial art
 - c. A method for completion of developmental stage
 - d. A mechanism for initiating a fight
3. **The part of personality which is based on pleasure principle:**
 - a. Superego
 - b. Ego
 - c. Id
 - d. Conscience
4. **The conscience is the constituent of which part of personality?**
 - a. Self-concept
 - b. Self-image
 - c. Self-esteem
 - d. Superego
5. **Which of the following is not a member of mental health team?**
 - a. Psychiatrist
 - b. Lab technician
 - c. Psychologist
 - d. Psychiatric nurse
6. **An individual quarrels with his/her spouse but proclaims that other person is mad at him/her. Here, the individual is using which of the following defense mechanisms?**
 - a. Identification
 - b. Projection
 - c. Displacement
 - d. Denial
7. **A more severe form of denial without any contact with reality accompanied by psychosis. This is known as:**
 - a. Withdrawal
 - b. Delusional projection
 - c. Passive aggression
 - d. Psychotic denial
8. **A manic patient may offer you a job by explaining about his extreme riches. It is known as:**
 - a. Elated mood
 - b. Delusion
 - c. Omnipotence
 - d. Psychotic distortion
9. **Anticipation is:**
 - a. Dealing with stressors by predicting the consequences associated with it and then overcome with realistic solutions
 - b. Psychologically, reality is perceived differently usually wrong perception to deal with the psychological pain
 - c. Attributing one's own ideas and thoughts; emotions to another person because they are unacceptable to the individual and he/she is not able to cope up with those emotions
 - d. Dealing with stressors by taking help and support from others who are advisers/counselors/family/friends, etc.
10. **Extreme suspicion and delusion of persecution is known as:**
 - a. Psychodrama
 - b. Illusion
 - c. Paranoia
 - d. Reaction formation

- 11. Outward expression of inward emotions is known as:**
 - a. Aggression
 - b. Mood
 - c. Affect
 - d. Attitude
- 12. Helping and supporting other humans who may or may not be suffering with the same psychological stressors is known as:**
 - a. Helping attitude
 - b. Affection
 - c. Altruism
 - d. Care
- 13. Defense mechanism in which an individual performs an action instead of bearing and controlling the driven impulse is known as:**
 - a. Acting out
 - b. Aggression
 - c. Displacement
 - d. Catharsis
- 14. Justifying one's behavior and emotions by substituting acceptable logical reasons is known as:**
 - a. Repression
 - b. Rationalization
 - c. Projection
 - d. Introjection
- 15. Person is praising and boasting about oneself in an aggressive manner, here he/she is purposefully keeping oneself above others to get recognition and approval of others. This phenomenon is known as:**
 - a. Self-observation
 - b. Humor
 - c. Controlling of impulses
 - d. Self-assertion

ANSWERS KEY

- 1. c 2. a 3. c 4. d 5. b 6. b 7. d 8. c 9. a**
10. c 11. c 12. c 13. a 14. b 15. d