

# Sharing of conference: Social aspect in mental health social worker

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# United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)

- United Nations Convention on the Rights of Persons with Disabilities (UNCRPD)
  - China has ratified in 2008 and is applicable to Hong Kong
  - To ensure the integration of a human rights perspective into all disabilities issues, including mental health issues, policies and laws

# Related concept

- Article 1
  - Purpose The purpose of the present Convention is to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.
  - Persons with disabilities include those who have long-term physical, mental, intellectual or sensory impairments which in interaction with **various barriers** may hinder **their full and effective participation** in society on an equal basis with others.



# Putting the 'social' back into mental health social work

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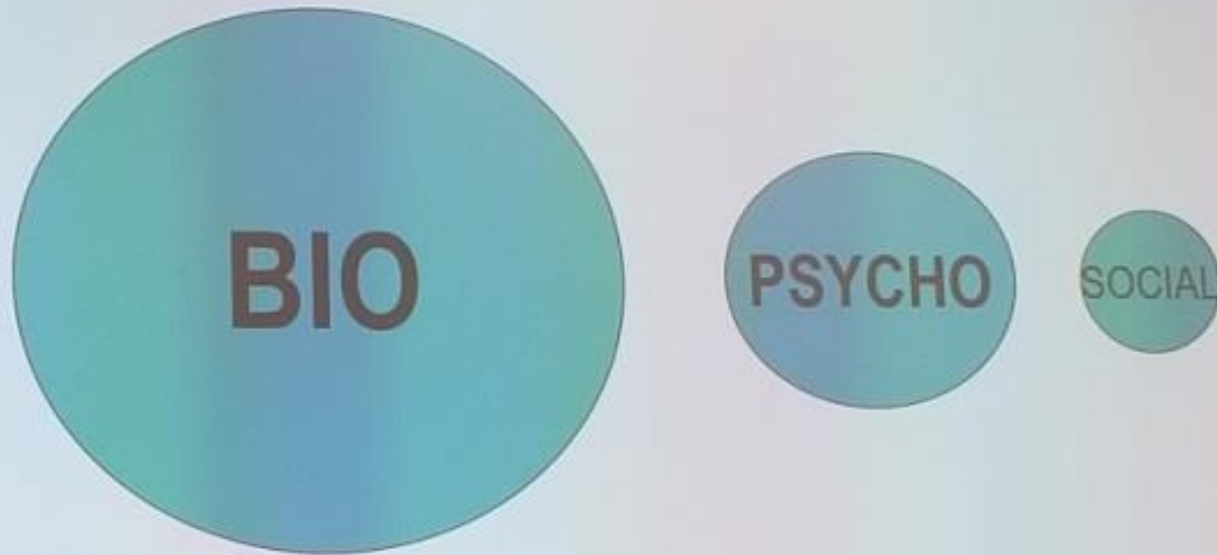
***Jerry Tew***

*Professor of Mental Health and Social Work*

*University of Birmingham*

# THE BIOPSYCHOSOCIAL MODEL

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# What is recovery?

- Clinical definition: remission of symptoms
- Social/personal definition:
  - Getting a life
  - Hope
  - Control
  - Personal Responsibility
  - Opportunity

# What influence recovery?

(Warner 2004, Tew et. Al. 2012)

- No correlation between introduction of medical treatments and recovery rates (Clinical or social)
- Strong correlation with employment rate
- Social Acceptance / capability to access social opportunities

# Practice framework

- Strengths-based social work practice
- Socially informed analysis
- Recovery



# Strengths-based social work practice

- Control, citizenship, connectedness
- Personalization, co-production
- Working in partnership to develop codesigned solutions to prevent harm & abuse, reduce obstacles, discrimination, restore & support family relationships
- Different conversation – “Doing with” rather than “Doing to” or “Doing for”

# Recovery Capital

- Need a more specific framework for evaluating the personal and social resources that a person may require if they are to make a sustainable recover – recovery capital

# Recovery Capital

- Economic capital
  - Reclaim economic power both as a productive citizen and a consumer
- Social capital (Bonding & Bridging)
  - Social networks (or potential) / Sense of belonging
  - Develop new forms of social capital and power together (e.g. peer-led organizations)
  - Community level opportunities (with and without experiences of MI)

# Recovery Capital

- Relationship capital
  - Beneficial personal relationships
  - Problematic personal relationships
  - Re-established connections
- Identity capital
  - Uncertain, threatened or in crisis self-identity.  
What may feel more secure?
  - Professional practice/ social context, e.g.  
constructing people as “patients”, issues of stigma

# Recovery Capital

- Personal capital
  - Internalization of problematic or constructive ways of seeing self and engaging with the wider world

# One service approach: Open dialogue

- A national multi-centre Open Dialogue pilot
- seeks to transform the model of health care provided to patients with major mental health problems in the UK.
- Involves whole family or network, rather than just the individual, and equipping staff of all disciplines with the key skills to do this, and thus effect change at deeper levels.

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# What is Open Dialogue?

- A model of mental health care pioneered in Finland
- Involves a consistent family and social network approach where all healthcare staff receive training in family therapy and related psychological skills.
- All treatment is carried out via whole system/network meetings which always include the patient.
- Has been discussed for several years with interest by several NHS Trusts around the country.
- Open Dialogue was pioneered in Finland and has since been taken up in a number of countries around the world, including much of the rest of Scandinavia, Germany and several states in America.



# What is Open Dialogue?

- Inclusive approach – family and friends involved in ongoing dialogue to understand and resolve unease and mental distress
- Focus on meaning and context
- Medication only used selectively
- Strong emphasis on social capital, employment, community engagement

# International results

- Some of the results so far from nonrandomised trials are striking.
- For example, 72 per cent of those with first episode psychosis treated via an Open Dialogue approach returned to work or study within two years, despite significantly lower rates of medication and hospitalization compared to treatment as usual.

- Individual topic: Mental health social work.  
My thesis topic: Social Works Changing Profession in adolescent psychiatry
- Miina Arajärvi
- University of Eastern Finland, Kirkkonummi, Finland

# Problems

- Relocate social workers from health care to social service sector
- Need to redefine social workers role in adolescent psychiatry

# Social work psychosocial profession

- Social Parts: cultural, environmental, patients experience
- Goal: Restore personal and social functions
- Key tasks (need to be defined)
- Task not belong to SW (need to be defined)
- Negotiation among multi-professional team
- Clients participation

# Preliminary results

- 71% social work tasks serve customers needs
- 28% social worker role is not clear
- More than 50% social worker role clear
- In adolescent psychiatry, SW Psychosocial profession is based on
  - Social science, systemic work, family orientation, being familiar with service systems
  - Understanding psychiatric symptoms and how those symptoms effect on adolescent ability to perform

# Sharing

- Co-production: insight in visiting in-patient unit
- Case conceptualization of mental health issues
- Mental health issues: Young people (multi-disciplinary team)
- Evidence based intervention / Conference presentation