Study calls for shake-up in mental health provision to improve patient outcomes

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A new study published in the journal *Social Theory & Health* has called into question how patients interact and respond to psychiatry when they present to mental health services.

The research focuses on how the public view mental disorders and treatments, ranging from anxiety and depression through to schizophrenia, in order to consider how care might better be deployed and managed.

By analysing published research on the topic and examining the wider context which has seen mental health services rise in prominence among policy-makers, the study advocates that service provision must adapt in line with patients' views on mental health.

Since the 1960s there has been an ongoing debate about whether psychiatry is helpful or is harmful to those who use it. Many of these criticisms have focussed on whether psychiatry has a valid evidence base.

Several ways of thinking about 'mental disorder' have been proposed since the 1970s with some focussing on the biology of the brain; others focussing on psychological factors such as a person's upbringing and others focussing on social factors—such as a person's living environment. Whilst these arguments have gone on for some time, psychiatry still lacks a unifying theory which is widely accepted.

Reflecting this mixed picture, the new study finds that members of the public increasingly accept the view that mental health problems are genetic and can require medical treatment. But it also highlights an ambivalence towards psychiatry and a widespread belief that the public see mental illness as being highly influenced by social factors.

In addition, the public tends to prefer treatments that are not favoured by psychiatry, often giving preference to talking treatments over drug treatments. Against this backdrop, argue the researchers behind the study, mental health professionals need to acknowledge the beliefs that exist and adapt practice accordingly. Specifically they suggest that psychiatrists, nurses and social workers need 'to be transparent about the limits and uncertainties of psychiatric knowledge and to acknowledge that sharp lines cannot yet be drawn between sanity and insanity.

They advocate that mental health professionals should spend more time understanding how individual patients understand mental health problems and should adjust treatment options accordingly. They argue that attention should be given to whether a patient has mental capacity, which can be understood as the ability to make an informed decision about their care.

Where this is the case, treatment should be planned around patient preferences. Where patients are in favour of medical understandings of mental health problems, then advice about psychiatric treatment can be given. However, where patients reject biological explanations of mental health problems, other options such as talking therapies or greater social support should be explored and mental health professionals should be willing to help patients reduce or stop medications.

Lead researcher, Dr. Jeremy Dixon from the University of Bath's Department of Social & Policy Sciences, explained: "No other medical field has faced so much controversy when it comes to thinking about

illness and diagnoses than psychiatry.

Much of this debate has focussed on the polar positions for and against the psychiatric profession. Our paper takes a new approach through reviewing evidence about what the general public thinks about mental disorder and about psychiatric treatment. This shows that the public has a greater range of views about the different ways of understanding mental health problems than is commonly acknowledged either by supporters of psychiatry or its opponents.

We argue that mental health professionals have a tendency to make assumptions about what users of mental health services want. In order to improve care, mental health professionals need to question these assumptions and speak to users of services to understand what their position is.

Co-author, Dr. Dirk Richter from the University Bern Psychiatric Services, added: "By acknowledging the different ways that people understand mental illness, mental health professionals help to reduce the risk of conflicts between professionals and patients, and this will contribute to safer and more humane care settings." The research team acknowledge the dilemmas that exist for practitioners in shifting how they operate, but they suggest that adapting practice could significantly help to improve patient outcomes.

More information: Jeremy Dixon et al, Contemporary public perceptions of psychiatry: some problems for mental health professions, *Social Theory & Health* (2017). DOI: 10.1057/s41285-017-0059-9

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