

Guideline for Social Work Assessment in Mental Health Settings

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Abstract: It is observed that new social work trainees face difficult to do social work assessment in mental health setting. Authors propose a social work assessment guideline within biopsychosocial frame work for social work assessment in mental health/psychiatric setting. This guideline will empower the new trainees to conceptualise the case in a comprehensive manner and to provide rights based interventions.

Key words: *Guideline, social work assessment, mental health, psychiatry.*

I. INTRODUCTION

Social work considers the reciprocal impact of people and their environments in assessing human behaviour. From this perspective, problems in social functioning might result from stressful life transitions, relationship difficulties, or environmental unresponsiveness (Corcoran & Walsh, 2010) and all other areas. Much changed as the profession grew and developed, incorporating ecological, bio-psycho-social, cognitive, family-centred, and various other approaches as indicated by the workplace setting, particular theories of practice, or by client or patient needs (Heinonen & Metteri, 2005). The values and interests of the social work profession require a broad approach to assessment and formulation that integrates social justice, ecological, systemic, biological, cultural, spiritual, and psychological perspectives (Dean & Poorvu, 2008). The social worker in mental health settings is expected to have adequate skill in clinical evaluation (history taking and Mental Status Examination). Knowledge of the

Diagnostic and Statistical Manual (DSM) or International Classification of Diseases (ICD) is critical so that social workers can be conversant with other mental health professionals. Biopsychosocial (BPS) framework can be used for assessment, goal formulation and intervention planning (Corcoran & Walsh, 2010). It is observed that new social work trainees face difficulty to do social work assessments in mental health/psychiatric settings and conceptualising case. This may be because of lack of proper assessment guidelines. Here, authors propose a guide line; i.e. social work assessment frame work and areas of social work assessment in psychiatric settings for Indian context.

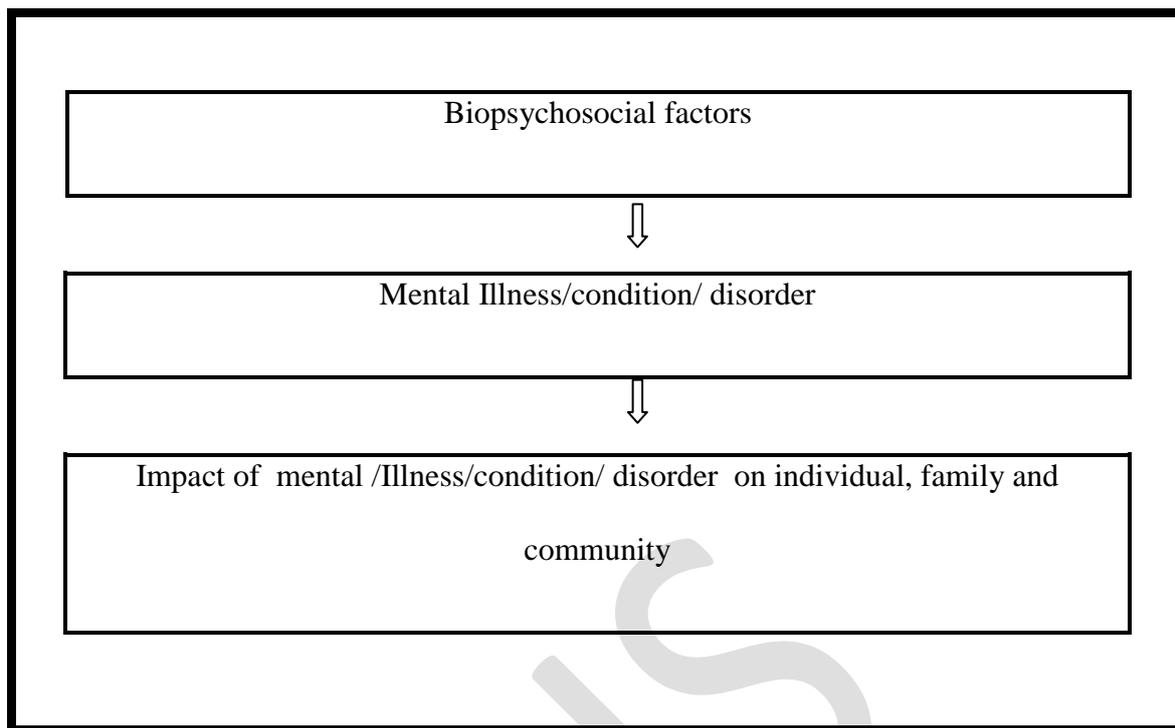
II. THE GUIDELINE

Authors advocate that all the social workers should understand the biopsychosocial aspects of the current problems and also understand the impact of mental Illness/condition/disorder on individual, family and the community. Along with that; the needs, concerns of the persons with illness and families should be assessed; which would help in planning interventions. Authors adopt BPS framework for the assessment and assessment should be addressing the rights and social justice of persons with illness and their family for comprehensive understanding of the problems and rights based interventions (Figure-1).

Figure - 1

The social work assessment frame work

(Assessment should be addressing the rights, social justice and needs of the person with disorder and family)



The steps in social work assessments and interventions in psychiatric settings are;

1. Clinical evaluation (to understand the psychopathology of the client and making provisional psychiatric diagnosis. This may be done after consultation with a psychiatrist)
2. Psychosocial Assessment
3. Analysis and formulation
4. Psychosocial diagnosis
5. Psychosocial interventions plans

2.1 Psychosocial Assessment

Mental health disorders are determined by interacting BPS factors. The social worker should understand these factors

act in terms of predisposing, precipitating, maintaining, risk and protective. Also, assess the needs and concerns of client (the person with disorder and family). When do the assessment, the social worker should mention; whether the problem is present or not, duration, changes in the patterns, severity (mild/moderate/high) or frequency (how frequent it happens) or adequacy (adequate/inadequate) or levels (high, moderate or low) of each and every problems/variables in the factors. To make it easy, authors divided the areas of assessment as ‘factors’. The individual factors involve ‘biological and psychological’ aspects and the ‘social’ factors divided into few other aspects such as family, neighbourhood and friends, workplace, school/college, financial, welfare and rehabilitation, legal, other social factors and other important areas (Table- 1).

Table- 1

Areas of assessment

<p>1. Individual factors</p> <ul style="list-style-type: none"> ○ Basic needs (food, clothing, shelter) ○ Explanatory model of illness and pathways to care ○ Activities of daily living ○ Intelligence ○ Personality ○ Coping strategies ○ Substance abuse ○ Insight/ knowledge on psychiatric illness ○ Knowledge about need for inpatient care and readiness for treatment 	<p>2. Family factors</p> <ul style="list-style-type: none"> ○ Family structure ○ Details of each and every family members ○ Boundary issues ○ Healthy or unhealthy alliance among family members ○ Interaction pattern ○ Interpersonal relationship issues ○ Communication pattern ○ leadership styles and decision making process ○ Role structure and functioning
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<ul style="list-style-type: none"> ○ Compliance to treatment ○ Disability and rehabilitation needs ○ Risk to self and others ○ Unemployment or job related issues ○ Marriage related issues (marriage plans, selection of spouse etc.) ○ Medical illness ○ Spiritual issues ○ Psychiatric illness ○ Education related issues ○ Interpersonal issues other than related to family (e.g. friends) ○ Social & occupational functioning in general ○ Sexual orientation, high risk sexual behaviour, number of partners etc. ○ Sexual dysfunctions ○ Sexual abuse history ○ Birth and early development ○ Life events and stressors ○ Violence faced if any ○ Traumatic events ○ Grief ○ Cognitive impairment ○ Magico-religious or cultural beliefs which hinder in seeking or continuing treatment ○ Excessive technology use (internet/mobile/video games) or behavioural addiction if any ○ Pregnancy/reproductive issues ○ Social skill ○ Bonding with children ○ Cognitive distortions ○ Patients' concerns and future plans ○ Homelessness/abandonment ○ Future plan (short, mid and long term) ○ Disability ○ Social support perceives and received ○ Human rights violations ○ Motivation and capacity for change ○ Need of rehabilitation ○ Other aspects if any 	<ul style="list-style-type: none"> ○ Coping strategies ○ Reinforcement of behaviour of a person by the other family members ○ 'We' feeling among family members ○ Support within the family and support to the family from others. ○ Influential person/persons in the family other than persons living in the family ○ Explanatory model of illness and pathways to care ○ Presence of domestic violence (nature, duration, from whom and to whom and duration) and actions taken against. ○ Caregiver burden/burn out ○ Expressed emotions ○ Knowledge & attitude of family members about the illness ○ Parenting issues ○ Presence of any stressful events in family ○ Housing facility ○ Presence of health/mental health issues /substance abuse in any other family members ○ Living arrangements ○ Supervision of medication or treatment by family members ○ Primary care giver and his/her concerns ○ Other family issues and future plans regarding patient and family ○ Major concerns and needs of family members
<p>3. Financial Factors:</p> <ul style="list-style-type: none"> ○ Sources of income ○ Poverty if any ○ Financial burden, debts and other financial issues 	<p>4. Neighbourhood and friends</p> <ul style="list-style-type: none"> ○ Support from neighbourhood ○ Discrimination and violence from neighbours ○ Relationship with neighbours ○ Number of friends, relationship with them, support etc.
<p>5. Work /employment</p> <ul style="list-style-type: none"> ○ Nature of work ○ Hours of work ○ Payment and leave structure ○ Duration of work in the place and past work places ○ Occupational health hazards if any ○ Attitude and relationship with colleagues and higher officials ○ Issues at workplace ○ Any threat to job ○ Welfare programmes available at workplace ○ Policy of employers and its effect on client 	<p>6. School/college</p> <ul style="list-style-type: none"> ○ Class studying ○ Regularity in attending class ○ Syllabus ○ Performance ○ Attitude and relationship with other classmates and teachers ○ Academic difficulties ○ Behavioural problems if any ○ School environment ○ Any gang activities

<p>7. Legal Issues and protection services:</p> <ul style="list-style-type: none"> ○ Impending case ○ imprisonment (past and current) ○ Need of legal protection from violence/abuse ○ Any other legal issues/concerns 	<p>8. Welfare Needs:</p> <ul style="list-style-type: none"> ○ Disability pension/other welfare measures available or needed ○ In need of government welfare services even to any other family members ○ Other welfare needs
<p>9. Other Social Factors</p> <ul style="list-style-type: none"> ○ Social stigma ○ Religious/cultural issues and acculturation difficulties ○ Political conditions where the person is coming from ○ Resources in the community (rehabilitation, health care facility etc.) ○ Other social issues if any 	<p>10. Other areas:</p> <ul style="list-style-type: none"> ○ Government rules, welfare policies and programmes which can be utilised for helping the person and family. ○ Pre-discharge issues and Post discharge plans and follow up issues to be addressed ○ Other issues, concerns, needs & wants of client.

2.2 Analysis and formulation

After the assessment, social worker is expected to analyse the factors in terms of cause-effect relationship, predisposing, precipitating, maintaining, risk and protective- aspects by applying appropriate theories.

2.3 Psychosocial diagnosis

After the analysis and formulation, the social worker gives a diagnosis on which he/she plans interventions. The diagnosis may be presented as descriptive or statement formats. After making the diagnosis, social worker may plan interventions on individual, family, group and community basis. Communication with other mental health professionals would help to confirm the details collected and minimising the duplication of work and which will give better result.

2.4 Psychosocial interventions

After the assessment and analysis, the social worker may plan for social work intervention on individual, group, family and community level.

III. CONCLUSION

The current guideline can be used in in-patient, out-patient, rehabilitation and community mental health care settings. It can be applied for different population with all kinds of mental health issues such as adults, geriatric, children and adolescents. This guideline was applied in clinical setting and used for training post graduate trainees in psychiatric social work for more than one and half years and observed effective. The current guideline is proposed for a general understanding of the client's problems. Social worker is advised to use appropriate assessment tools to understand each problems of client, in depth.

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