reviews

Whose Values? A Workbook for Values-Based Practice in Mental Health Care

Kim Woodbridge and Bill Fulford
London: The Sainsbury Centre for Mental Health, 2004, £20.00, 120 pp.
ISBN: 1-870480-62-7

This new workbook, produced by the Sainsbury Centre for Mental Health and written by a distinguished philosopher of psychiatry plus an expert on values in mental healthcare, is aimed at mental health practitioners of all kinds, as well as service users and carers. It provides a series of exercises designed to help practitioners to reflect on the way that they work, and recognise the influence of different values on their practice.

Values are complex and although frequently associated with ethics, in their widest sense could be considered to include basically anything that is valued. Values-based practice – which this workbook intends to encourage – is supposedly based on mutual respect – so while starting from the values of the user or user group involved in a given decision, value-based practice also attends to the values of others concerned – the informal carers, clinical staff, managers, etc.

Of course where things get interesting in psychiatry is when values collide – the values of mental or medical health, or that of the legal profession, often are in conflict with other values, such as individual freedom to do what impulses command. This workbook includes several written exercises which the reader is intended to collaborate with and which clarify the reader's value system. For example, one is a clinical vignette with a quiz that is completed afterwards that illuminates the reader's attitudes to the problem (e.g. is it an illness?), what should be done about it and how people should be treated.

Values and science are often perceived to be in conflict

> 'it's not that you are "ill" and need "treatment"; merely that I have a different values system to yours.'

Respondents to the consultation on the National Institute for Mental Health in England Values Framework who were from the research community indeed talked of a 'propaganda' war against the methods of medical science being fought with the 'weapons of jargon and political correctness'.

This is certainly an interesting and thought-provoking book for the individual reader in uniquely raising awareness of implicit value systems that often go unrecognised. This awareness would help clinicians achieve a deeper and often surprising understanding of why they so often find themselves in conflict with patients and other professionals. Yet it was a pity there was not more advice and guidance on how to resolve value conflicts, as this is the problem area at the heart of what can be so stressful about the clinical practice of psychiatry.

At least the book reassures you that the reason you can't seem to get yourself understood by anyone else in the ward round is not because we are in the grips of a plague of endemic personality disorder – it's just that everyone else has different values to yours. I feel so much better now.

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From Toxic Institutions to Therapeutic Environments: Residential Settings in Mental Health Services

Penelope Campling, Steffan Davies & Graeme Farquharson (eds)
London: Gaskell, 2004, £25.00 pb, 286 pp,
ISBN: 1-904671-07-1

Based on the concern that the therapeutic community has been neglected as a modus operandi for residential mental health settings (whether high security hospitals, acute wards or longer stay rehabilitation), this edited collection of relatively brief chapters certainly has a worthy commitment. Because despite all the community initiatives and, more recently, the introduction of specialist teams such as assertive outreach, early intervention and crisis resolution, the heart of modern mental healthcare remains the in-patient unit. But the decline of that purpose-built therapeutic institution, the asylum (the historical context of which is nicely summarised in Kathleen Jones' opening chapter), has left mental health provision under-resourced, in terms of coherence, space for illness, recognition and staffing resources. It is a touch odd to see Anthony Sheehan (architect of the poorly evidenced new 'teams' currently depriving wards of staff)

writing a foreword. It is also worrying to see few front-line authors, i.e. acute ward nurses or doctors, or even managers of homeless hostels or high dependency units in the community.

There are some useful chapters of course, for example 'Delivering psychological therapies in acute inpatient settings' by Peter Kinderman and 'Measuring the therapeutic environment' by Christine Timko and Rudolf Moos. The best and most practical is 'A carer's perceptions of the therapeutic value of inpatient settings' by Peter Ruane, in that at least he mentions the process of 'sectioning', in contrast to the strange absence of any mention of the Mental Health Act 1983 throughout the rest of the book. All chapters also suffer from a limited research base, although there are some useful references, mainly to descriptive papers, the various well-known guidelines and to local audits. There is much mention of politically correct terms like 'social inclusion' and 'recovery', and every chapter ends with a 'Conclusion'. However, many of these are rather bland and idealistic, for example that on 'Rehabilitation and continuing care'. The final words of this chapter suggest that specialist rehabilitation units 'used flexibly within a well-managed, integrated network of care . . . can act as a source of social support and psychological containment that helps to enable the start of the recovery journey'. This is irrefutable, but the heart of the problem, the lack of resources, is not addressed.

Whether or not one considers that the therapeutic community movement needs to be reinstituted – and the original Northfield experiments were not exactly high-class social research – there is sufficient detail in this collection to stimulate those organising and managing in-patient services. Psychiatric institutions are by definition paradoxical, in that they try to 'treat' people who do not have a 'mental illness' (i.e. those with personality disorders) and they are also asked to treat people in hospital who do not want to be there, while constantly discharging those who would like to stay. They have always been criticised, historically and in modern times, because by definition they attract stigma within and outside psychiatric communities. How we make them better in the 21st century will need hard-nosed research as well as better-trained staff. This committed book only really tells half the story.

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