



Course Companion

for OCR L3 (AAQ) Cambridge Advanced
National: Health and Social Care

Unit F093: Supporting People with Mental Health Conditions

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Teacher's Introduction

This is a Course Companion for **F093: Supporting people with mental health conditions**, part of OCR's Level 3 Alternative Academic Qualification (AAQ): Cambridge Advanced Nationals in Health and Social Care. The aim of this resource is to guide students through the core content of this unit, providing them with in-depth information that covers each of the specification points. This resource aims to provide students with the knowledge and skills that will help them succeed in the assessment for this unit.

Remember!

Always check the exam board website for new information, including changes to the specification and sample assessment material.

For clarity and ease of use, the content of this Course Companion matches the order of the specification points.

The content is structured as follows against the unit's content:

Chapter (Topic Area)	Sections (Teaching Content)
1. Definitions and views of mental health	1.1 Definitions of mental health 1.2 How society views mental health
2. Mental health conditions	2.1 Types of mental health conditions 2.2 Signs and symptoms of mental health conditions 2.3 Individual factors which can increase the risk of suffering from mental health conditions 2.4 Effects of mental health conditions
3. Provision of mental health services	3.1 Types of provision and mental health services in each type locally and nationally 3.2 Referral to different services 3.3 Practitioners who work in mental health 3.4 Legislation and individual rights relating to mental health
4. Treatment and support for mental health conditions	4.1 Types of treatment and support and how they work 4.2 Factors affecting access to treatment and support 4.3 Person-centred approaches to support people with mental health conditions

Throughout the resource, there are key features to keep an eye out for:

Keywords: used to draw students' attention to various keywords throughout the unit.

Did you know? Provides further information and additional content to inspire and engage students.

Case studies

Help students to apply the issues identified in the resource to real-world scenarios.

Applied activities: encourage application of knowledge to the case studies or to real-world scenarios in the health and social care sector.

Research activities: inspire further research and stretch and challenge higher-ability students.

Some of the activities can be completed using either computers, mobile phones or tablets to aid students' research, and/or can be completed outside the classroom as homework.

Also throughout are:

Formative discussion questions

To encourage students to apply theory to a case study designed specifically for this resource (see **Appendix: Tomasz Case Study**). Teachers can direct students to respond individually, in pairs, in small groups, or as part of a whole-class activity.

At the end of each section (see table above) there are also **two sets of questions (Qs)**:

- Checking my understanding:** multiple-choice, objective-test and short-answer questions to recap students' knowledge of the specification content.
- Developing my skills:** short-answer and scenario-based questions and activities to reinforce students' knowledge, deepen their understanding, and provide practice in their skills for the assignment.



A web page containing all the links listed in this resource is conveniently provided on ZigZag Education's website at zzed.uk/12786

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June 2025

Chapter 1: Definitions and v mental health

Everyone defines mental health differently; therefore it is crucial for us to consider as it can significantly impact how we approach and treat this topic. In addition, the matters deeply; our perspectives not only affect individual attitudes but also impact Our society is now recognising more than ever how vital our mental health is; how misunderstandings surrounding mental health. It is, therefore, crucial for us to consider views can be, both for individuals suffering with poor mental health and for society we are going to explore how key organisations define mental health, examine their views, and discuss the impact of these perspectives.

1.1 Definitions of mental health

Mental health is a complex concept with many definitions. While most agree on different aspects that shape and affect it. Understanding these perspectives helps a comprehensive view of mental health and its importance.

Key organisations and how they define mental health

In this section, we will explore how key organisations – such as WHO, NHS and MHA – share their views on what they regard to be good and poor mental health.

World Health Organization (WHO)

The World Health Organization (WHO) defines mental health as:

‘... a state of mental well-being that enables people to cope with the stresses of life, realise their abilities, learn well and work well, and contribute to their community’ (WHO, 2014)
https://www.who.int/health-topics/mental-health#tab=tab_1

The World Health Organization considers mental health to extend beyond just the diagnosed condition. Its definition takes a holistic approach and considers many factors:

- **Emotional** – how we cope with daily stresses and challenges
- **Social** – how we contribute to the community
- **Psychological functioning** – whether we can work productively

WHO suggests that mental health follows a continuum, indicating that it can vary in levels of distress and severity. This idea shows how subjective mental health is – there is no single definition that fits everyone. Each person’s experience is unique.

WHO considers an individual to have good mental health when they are able to cope with everyday challenges, such as managing work deadlines or spending time with family and responsibilities as a parent. It also means building positive relationships and connections with family, friends and colleagues, and contributing positively to a community. On the other end of the scale, WHO views a person as having poor mental health when they struggle to deal with life’s pressures, stay productive or maintain positive relationships. This highlights how mental health can affect all aspects of life – work, relationships and

Case study
John has been overwhelmed by his new job, often struggling to avoid it. Although he has a good relationship with his colleagues, he is increasingly struggling.

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Applied activity: Read the case study, above. Discuss with a partner whether John has good mental health, according to WHO’s definition.

NHS

The NHS defines mental health as:

'... our emotional, psychological, and social well-being. Our mental health affects how we think, feel and behave. It also impacts on how we cope, interact and form relationships with others, as well as our ability to manage stress. (NHS)
<https://hampshirecamhs.nhs.uk/issue/mental-health-and-mental-illness-professional/>

This definition also recognises that mental health is made up of emotional, psychological, and social well-being. It begins to recognise that mental health can impact mental processes (e.g. how we think, feel and behave). It also identifies that mental health can affect our ability to manage stress, cope, interact and form relationships with family, friends and others around us. Finally it indicates that mental health affects how we function on a day-to-day basis, such as the decisions we make, how we handle stress, and how we solve problems.

The NHS recognises good mental health as someone who has a positive state of mind, is able to cope with daily challenges, and is able to connect with people close to them (e.g. family and friends) and wider community.

Good mental health can be maintained with:

- Routine
- Sufficient sleep
- Being organised
- Eating a healthy diet
- Participating in enjoyable hobbies
- Good work–life balance
- Limiting use of screen time (e.g. social media and screen time)
- Having things to look forward to (e.g. holidays, family time)

This can also help build **emotional resilience**, supporting individuals to maintain a positive outlook on life.

The NHS recognises that mental health can vary according to a number of factors, including genetics, environment, relationships with others, how much sleep we get and whether we lead healthy lifestyles. It also recognises that mental health can be a temporary response to specific stressors or demands we face, such as dealing with a crisis, or a long-term condition, such as mental illness, which is typically as a result of persistent poor mental health. Mental health can affect how we think, feel, behave or interact with others, and can affect well-being and how we function on a day-to-day basis (e.g. how we manage stress and academically).¹



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¹ <https://hampshirecamhs.nhs.uk/issue/mental-health-and-mental-illness-professional/>

MIND

MIND is a mental health charity that views mental health in a slightly different light. Its definitions may not accurately define the complex nature of mental health. Instead, mental health is defined by our actions, how we behave and how we treat ourselves.

MIND defines good mental health as:

‘... being generally able to think, feel and react in the ways that you need and want for your life.’ (MIND)

<https://www.mind.org.uk/media/7593/mind-mental-and-physical-activity-too>

Those with good mental health care for themselves, practise self-love, prioritise their needs, embrace the imperfect nature of being human. They display emotional stability, resilience, and the ability to cope with difficult situations with confidence. This suggests that good mental health is not the absence of problems but the capability to handle them. On the flip side, poor mental health is characterised by life's pressures, constant overthinking, unpleasant feelings, or reactions – which are difficult to manage daily.

MIND places mental health on a spectrum that we all experience. Everyone fluctuates between good and poor mental health at different times. This perspective helps reduce the stigma (negative perception) of mental health by framing it as something everyone has. Similar to physical health, it can be managed and maintained.

Applied activity: Suggest how mental health can be nurtured and maintained.

Applied activity: Read the case study (right). How might MIND's definition of mental health apply to Emily's situation?

Case study

Emily, 28, is a graphic designer who struggles to meet deadlines at work, which affects her productivity. She has lost touch with her friends and becomes increasingly isolated. However, she used to feel fulfilled by her creative work.

In conclusion, each of the above organisations takes a holistic approach to mental health, considering psychological and social factors which can impact it.

- WHO emphasises the importance of productivity and community involvement, as well as decision-making and problem-solving skills.
- MIND highlights the significance of individual experiences.
- All three organisations view mental health as a continuum, with MIND explicitly reflecting variations in mental health across different situations.
- Both WHO and the NHS highlight that mental health extends beyond the medical model.
- Additionally, while WHO and the NHS emphasise coping and managing mental health, MIND takes a more personal approach by addressing how individuals feel and manage their mental health.

Applied activity: Which organisation's definition suits your idea of what mental health is?

Discussion question

Read the case study on Tomasz (see A1.1.1). Using the definitions of mental health from WHO and MIND, how do you think each organisation's view of mental health explain Tomasz's situation?

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1.2: How society views mental

Back in the Middle Ages, people held the view that mental illness was caused by demonic possession (being controlled by an evil spirit)! This led to extreme treatments such as exorcisms (spiritual practice to drive out evil spirits) or even execution (legally being put to death). These views not only **stigmatised** mental health but also reflected a deep misunderstanding of what the term means.

Luckily, we now live in a society which views mental health in a much more positive and beneficial way due to a large shift in attitudes, realising how important our mental health is. However, misunderstandings in mental health still exist, which can fuel negative views on mental health by causing stigma, **prejudice** and **stereotype**. Therefore, it is crucial to consider how damaging these views can be and how we want to keep moving forwards as a society.

The work of the key organisations

As mentioned in the previous section, each organisation has a unique perspective on mental health, highlighting the challenges of coming up with one universal definition. However, they all aligned and share a commitment to influencing views about mental health through education with the overall goal of reducing stigma and the discrimination of individuals experiencing mental health issues.

World Health Organization (WHO)

This key organisation has significantly contributed to changing how we view mental health by drawing attention to the importance of this matter.

Here are some of the key influences this organisation has:

- **Research initiatives** – WHO has introduced a number of impactful reports, all leading to needed changes to how we view and treat mental health. An example of this is the *World Mental Health Report*,² published in 2022. This was aimed at tackling the ever-increasing mental health issues in society, discrimination that we still face and the limited access to optimal mental health services.
- **Development policies** – These research initiatives can have far-reaching implications and lead to the development of effective policies. Such policies can tackle the challenges identified in research initiatives, such as increasing awareness about mental illness to reduce stigma and improving mental health services to overcome gaps in optimal care.
- **Training** – Alongside these influences, WHO provides e-training which offers online platforms. This makes it easier for more people to learn the skills needed to support, helping to improve access to care for everyone universally.
- **Global awareness campaigns** – WHO has also introduced a universal public health campaign with a focus on raising awareness about critical health issues and encouraging global action.

An excellent example of this is World Mental Health Day, which helps to raise global awareness surrounding the importance of mental health and the changes we still need to put in place. This day also inspire us to self-reflect on our own mental health and realise we are not alone in our struggles.



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² <https://www.who.int/publications/i/item/9789240049338>

NHS

The NHS is giving more priority to mental health services than ever before, to influence the views of the public and help reduce stigma surrounding mental health, and help individuals to come forward and seek support if they are experiencing poor mental health.

Did you know?
£12 billion of the NHS budget is spent on mental health services in England, accounting for 17% of the total NHS budget.

The following are some initiatives and services the NHS provides to help influence

- **Promotional campaigns** – such as ‘Every Mind Matters’⁴ which aims to raise awareness of mental health and promote understanding
- **Accessible resources** – the NHS website has an abundance of information to help with mental health, including advice, symptoms, behaviours, as well as access to services. They also promote well-being apps and support for individuals suffering with poor mental health, including offering coping strategies and mindfulness techniques.
- **Mental health services** – the NHS offers a range of services to support individuals suffering with mental health, including counselling, therapies and support groups. Different NHS trusts also offer crisis helplines offering urgent mental health support.
- **Training and education** – NHS staff receive training to increase awareness and understanding of situations regarding mental health patients to ensure they can provide appropriate support. Additionally, they may run training workshops in schools and workplaces.
- **Research** – the NHS invests a lot of money into mental health research to better understand and improve treatments and support available.
- **Partnership** – the NHS works with other organisations, including charities (e.g. Rethink⁵) and local authorities, to create a network of support for mental health.

Research
Every Mind Matters (h
mind-mat
notes to su
aims to ac

Research
NHS Trust
to outline
influence

By providing all of the above, the NHS can help to shape positive views on mental health.



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³ <https://www.kingsfund.org.uk/insight-and-analysis/long-reads/mental-health-360-funding-costs#:~:text=According%20to%20the%20National%20Audit,health%20services%20and%20inpatient%20care>

⁴ <https://www.nhs.uk/every-mind-matters/>

⁵ <https://www.rethink.org/campaigns-and-policy/policy-and-influencing/the-nhs/>

MIND

This leading mental health charity has significantly contributed to changing how we view mental health, by encouraging open conversations about the experience of mental health and the misunderstandings on how we view this. As a result, this charity is helping to promote what this term means, as well as challenging the stigma surrounding mental health.

Here are some of the charity's key areas of influence:

- **Support services** – MIND offers diverse support services online, via phone and in person to help normalise conversations surrounding mental health, creating an environment where people can open up about their experiences. Having access to diverse support services allows people to choose one that fits them best, and may help break down the misunderstanding that help can only be provided in person.
- **Public awareness campaigns** – MIND recognises that work still needs to be done in terms of how we approach, view and treat mental health. As a result, their work has contributed significantly to confronting damaging attitudes towards mental health, helping to promote a more understanding and compassionate environment surrounding this topic.
- **Challenging misconceptions** – MIND provides a wealth of accurate and up-to-date information, helping to break down misunderstandings and harmful views surrounding mental health in many ways, such as addressing common myths about mental health, and the importance of seeking help. This is helping to educate and create awareness about the true nature of what mental health is for everyone.
- **Providing personal accounts** – this charity has also created a platform for individuals to share about their experiences of mental health. In doing so, this promotes representation and allows individuals to see themselves reflected in the stories, as well as helping individuals by showing them they aren't alone in their struggles. By normalising these conversations, this encourages individuals to open up and talk about their mental health, which in turn can help reduce stigma.

Research activity

Explore the charity's work in advocating for mental health, highlighting the importance of mental health and the reasons why it is important.

<https://www.mind.org.uk/campaigns/campaigns/>

Go to



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Media coverage

The rise of the media has been extremely influential in shaping how we view the world, especially mental health. It has played a significant role in raising awareness, understanding and promoting open conversations surrounding this topic. However, the media can also be a dangerous platform for spreading misinformation and harmful views about mental health, having the potential to reverse the positive progress society is making. It is therefore crucial to consider the media we consume, and create awareness about the positive and negative influences it can have on how we perceive mental health.

Positive influences	Negative influences
<ul style="list-style-type: none"> + Raising awareness + Breaking stigmas + Providing support resources and education + Influential campaigns on social media 	<ul style="list-style-type: none"> - Reinforcing stigma - Spreading misinformation - Oversimplifying - Negative framing

Case study

Erin, 18, recently watched a documentary featuring a young Olympic runner who bravely shared her struggles with social anxiety. Erin has been feeling overwhelmed and fearful, making it difficult for her to leave the house. Until now, she hadn't realised that what she has been experiencing is social anxiety. The documentary resonated with her, making her feel understood and guiding her on how to seek help. Inspired by the runner's story, Erin has taken the brave step of reaching out for support to address her challenges.

Applying this to your own experience, what has been your view on mental health? How has this been influenced by the media? Document your thoughts.

Discussion question

Read the case study on Tomasz (see A1.1.1).
How did the documentary influence Tomasz's understanding of mental health and his decision to seek help?

Role models

An increasing number of role models are now stepping forward to share their experiences with mental health. Their openness is influential, encouraging open conversations, awareness and inspiring messages surrounding mental health. In turn, this can help to destigmatise how we view mental health and encourage individuals to seek help. However, while role models can be a positive influence, spreading inaccurate, oversimplified and harmful messages can fuel stigma, prejudice and stereotypes. Therefore, it is so important for role models to be mindful of their messages and to spread accurate and compassionate narratives about mental health.

Applying this to your own experience, what has been your view on mental health? How has this been influenced by the media? Document your thoughts.

Case study: Lady Gaga

Lady Gaga shared her experiences with post-traumatic stress disorder, which inspired the Born This Way Foundation, a non-profit organisation dedicated to promoting the well-being of young people.



Case study: Andrew 'Freddie' Flintoff

Andrew opened up about his experience with post-traumatic stress disorder during his cricket career. His openness not only highlighted the mental health challenges athletes face but also played a crucial role in addressing the stigma surrounding men's mental health.

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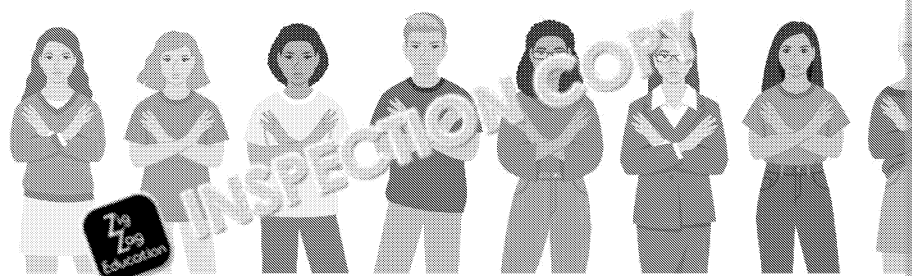
Stigmas, stereotypes and prejudices

Although attitudes towards mental health are improving, we still face harmful perceptions, stereotyping and prejudice. These views can be extremely damaging for individual health, which can not only worsen their symptoms but impact how they are treated when seeking the help they need. It is crucial for us and society to understand and address these issues to keep approaching mental health in a more compassionate and supportive way.

	Definition	Examples linked to
Stigma	A negative or unfair view of a person or circumstance that can often result in them being shamed	A man has recently been diagnosed with a mental health condition. He is ashamed to open up to his friends about it, believing that expressing emotions can make him look weak. These stigmatised views his friends hold about him lead him to isolate himself, which causes him to isolate himself from his symptoms.
Stereotype	A biased, simplified and generalised belief about a person or group of people	A worker has been struggling with their mental health for a few weeks, and on a particularly bad day, they have taken a day off. However, their manager believes that this is just a sign of illness and that poor mental health is not something the worker can come into the office with. This is harmful to the worker, who needs a day off to rest and an unfair view that their challenges are just a sign of illness.
Prejudice	An attitude, opinion or judgement about someone or something that is based without evidence or reason	A high performing university student has been experiencing anxiety, and has opened up to their friends about it. Instead of supporting the individual, the friends make fun of them, making them incapable of handling academic work. As a result, this student has become more isolated and worsened their symptoms.

Did you know? While these terms are separate, it's important to note that one can experience a stigma surrounding mental health can result in stereotyping individuals as unstable or dangerous, which is why it is so important to tackle these issues early on to prevent further harm and promote a better understanding of mental health challenges.

#BreakTheBias



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Discussion question

Read the case study on Tomasz (see A1.1.1). How do Tomasz's parents' beliefs — such as seeing emotions as a sign of weakness — reflect stigma or stereotypes, and how might these beliefs impact Tomasz's isolation and reluctance to open up?

Chapter 1: Questions (1.1–1.2)

Checking my understanding:

- Which of the following organisations defines mental health as: ‘A state of mind that enables an individual to realize their abilities and cope with the normal stresses of life’?
A. MIND B. NHS C. World Health Organization (WHO)
- Which key organisation provided ‘Myths vs Facts’ on their website to challenge common misconceptions?
A. NHS B. UNICEF C. MIND D. World Health Organization
- Identify **two** positives and **two** negatives of media coverage in influencing our understanding of mental health.
- Which of the following terms is defined by forming information based on insufficient evidence?
A. Prejudice B. Stereotype C. Stigma D. Discrimination

Developing my skills:

Answer the following questions to help develop your skills for the assignment.

- Below are three short case studies. Read each one and identify which positive coverage and role models relate to each case study. Some may relate to more than one.

Positives	i) Raising awareness
	ii) Breaking stigmas
	iii) Providing support, resources and education
	iv) Influential campaigns on social media
Negatives	v) Reinforcing stigmas, prejudice and stereotypes
	vi) Spreading misinformation
	vii) Oversimplifying
	viii) Negative framing

- Case study 1:** A popular TV show about mental health has an episode about eating disorders. The episode highlights the struggles people face and encourages viewers to seek help and go on where to go for support. However, the show implies that all eating disorders are caused by stress and that recovery is simply a matter of ‘eating more’ rather than addressing underlying issues and fails to discuss other contributing factors such as genetics and brain chemistry.
- Case study 2:** A celebrity shares their experience of depression on TikTok. They discuss their struggles and the different ways they have sought help, including therapy, medication and support from friends. They challenge common misconceptions, emphasising that mental health issues are not a weakness. In follow-up videos, they interview experts and share links to mental health resources. Many viewers comment that the videos helped them feel understood and encouraged them to seek support.
- Case study 3:** A Facebook channel with a large following posts videos about mental health. The videos spread inaccurate information. In a recent post about anxiety disorders, it suggests that ‘being more positive’ and that medication is unnecessary, encouraging followers to ‘just think positive’. It suggests that serious mental health issues can be ‘cured’ with quick fixes and that people should not seek professional help. The videos use dramatic language and imagery, portraying those with mental health issues as dangerous, discouraging people from seeking professional help.

Justify your choices for each case study.

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2. Below are perspectives on mental health. Match each perspective to the reason it has a negative impact on an individual's mental health. Some perspectives may be matched to more than one reason.

1. A family member tells someone to 'snap out of it' when they express anxiety.
2. A media campaign shares stories of people overcoming depression and promotes mental health awareness.
3. A friend jokes about anxiety and stress.
4. A therapist encourages someone to explore and express their feelings in a supportive space.
5. A culture views mental health as a taboo topic, discouraging open conversation.
6. A workplace provides mental health resources and support for employees.
7. A social media influencer talks openly about mental health struggles and encourages help-seeking.
8. A parent discusses mental health openly and offers emotional support.
9. A TV show portrays people with mental health struggles as weak and unworthy of help.

A. Provides support and resources.
B. Invalidates feelings and discourages help-seeking.
C. Reinforces negative feelings and discourages help-seeking.
D. Encourages exploration and expression of feelings.
E. Normalizes mental health struggles and fosters understanding.
F. Normalizes mental health struggles and provides support.
G. Reinforces the idea that mental health struggles are a sign of weakness.
H. Reduces stigma and encourages help-seeking.
I. Prevents people from seeking help due to isolation.

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Chapter 2: Mental health con

We should now understand the different definitions of mental health, how society views these views can impact how an individual experiences mental health. In this chapter we will explore mental health conditions, which are disorders that impact our emotions, thoughts and feelings. These conditions can come in many different types, have various signs, symptoms and causes, and can have a significant impact on an individual's mind, body and life. We will explore these factors, starting with the types of mental health conditions.

2.1 Types of mental health con

Let's take a closer look at the different types of mental health conditions.

Anxiety disorders

Worrying about different areas of our lives is a normal part of being human. However, this worrying can turn into a disorder when it becomes more chronic and severe, significantly disrupting our normal everyday functioning. Anxiety disorders come in many different types, with different severities and symptoms.

Generalised anxiety disorder

Generalised anxiety disorder (GAD) is one of the most common anxiety disorders, experienced by 6% of people each week.⁶ The experience of this disorder is defined by constant and overwhelming worries about various aspects of life. This constant state of anxiety can greatly impact our psychological and physical health. It is important to note that the broad nature of this disorder means it can be experienced differently by different individuals. Common symptoms include *restlessness*, *concentration issues* and *low mood*.

Panic disorder

This involves experiencing recurrent panic attacks that happen without any apparent cause or trigger. People experiencing this disorder may start to fear having these panic attacks, which can then lead to more episodes that can be unpredictable and lead to avoidance behaviour (which is avoiding anything that may be upsetting or distressing). This shows how this can create a **vicious cycle**, leading to significant distress and anxiety. Individuals often experience a *fast heart rate*, *hot flushes* and *feeling faint*.

Social anxiety disorder

This is overwhelming fear or worry that arises from social settings, such as the fear of public speaking. In turn, this fear can lead to avoiding social environments in order to avoid the distress of these settings. This disorder is most common during adolescence, but can also affect adults. For individuals experiencing this disorder, basic tasks such as leaving the house to go to work or school can be extremely distressing; however, what triggers symptoms can differ from person to person. Individuals with social anxiety may experience *rapid heart rate* and *feeling faint*.

Separation anxiety disorder

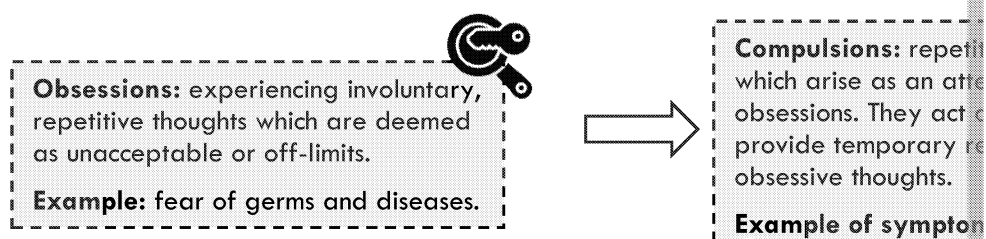
It is common for young children to experience worry or sadness when separating from their parents, but this usually gets better as they grow. However, if this upset and anxiety is much worse than what is expected for their age, lasts a long time and interferes with daily life, it is called separation anxiety disorder. It typically affects children aged around six months to three years, but it can also occur in teenagers. Common symptoms include *tantrums*, *panic attacks* and *intense anxiety* when separated from parents/caregivers, *clinginess* and *refusing to go to places* which involve separation.

Applied activity: Discuss with a partner how separation anxiety disorder might affect a child and the challenges parents may face dealing with it.

⁶ <https://www.mind.org.uk/information-support/types-of-mental-health-problems/mental-health-facts-and-stats>

Obsessive compulsive disorder (OCD)

This is characterised by **obsessions** and **compulsions**, which are defined by their inability to control these feelings and actions can cause high levels of anxiety in this condition.



Did you know? Some researchers suggest that OCD may have an evolutionary explanation! They believe that this condition may be an adaptive strategy to increase survival, where repetitive behaviours such as excessively cleaning may have helped prevent diseases.

Mood disorders

As the name suggests, this mental health condition involves long-lasting disturbances in our mood. Individuals who experience prolonged periods of emotional states such as sadness – and even excessive happiness – may be diagnosed with this mental health condition. (Yes, extreme happiness can be a signal that something may be wrong. This shows how important it is to have a healthy spectrum of emotions.) Let's now look over the main types:

Clinical depression

This is characterised by extreme and chronic low mood, disinterest in things that used to impact on daily functioning. This is a more extreme form of depression, and is seen as more short-term and triggered by life events. Individuals suffering from clinical depression may experience suicidal thoughts, self-harm, and withdrawal from friends and family.

Bipolar

Bipolar disorder is defined by significant mood swings, which can go from depression to **mania**. The experience of this disorder is hugely dependent on what mood state the individual is in, and these mood swings can go on for an extended period of time, even weeks. This disorder can cause changes to normal patterns of behaviour, such as aggression, which can increase the risk to both the individual and others.

Post-natal depression

Post-natal refers to the period after giving birth, and can be an extremely overwhelming and challenging time for any parents. However, some mothers (as well as fathers) can experience what is known as post-natal depression. This is characterised by more prolonged and extreme *low mood* after giving birth. Signs and symptoms include *low energy, irritability, problems concentrating, suicidal thinking, changes in sleeping and eating patterns, and issues bonding with the baby*, as well as *disturbing thoughts* such as harming the baby.

Experiencing these symptoms and thinking this way can be very upsetting for a mother, who may feel she is failing at being a good parent. This is why it is so important to keep spreading awareness about mental health conditions, especially post-natal depression, so that mothers to understand that they are not alone in their challenges.

Case study

Yasmin has been feeling like this for a long time since giving birth. She is overwhelmed and she is doing a good job of it, but she is struggling to bond with her baby.

Applied activity
Discuss the case study above. Discuss how Yasmin is experiencing post-natal depression and the signs and symptoms.

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Seasonal affective disorder (SAD)

While everyone experiences different emotions towards certain seasons, some people can experience depression that arises at a certain time of the year, known as SAD. This is most commonly experienced in winter, but can also occur in summer. Individuals affected by this disorder experience typical symptoms of depression such as *extreme low mood*, *loss of enjoyment* and *major disruptions to daily functioning*, as well as increased *sleepiness* and *social withdrawal*.

Did you know? The lack of sunlight in winter. One theory suggests that this is due to a reduction in the production of melatonin and serotonin, which are happy hormones. This theory suggests that this type of light therapy, where you sit under a special light, can help.

Eating disorders

Eating disorders can be incredibly hard to notice, and more people than you may realise may be dealing with one. This mental health condition is defined by regulating food intake as a way to cope with emotions, although the way in which people control their food intake varies significantly between disorders. We will now look at these different types:

Anorexia

Also known as anorexia **nervosa**, this is an eating disorder which involves starving oneself and over-exercising, driven by the intense fear of gaining weight. Although the goal may be to lose weight, the underlying causes are frequently tied to issues such as poor self-image and emotional distress. Anorexia can be extremely damaging to the body, causing symptoms such as *extreme fatigue*, *feeling cold constantly* and *dizziness*, as well as *hair loss*, *digestive issues* and *fertility problems*.

Bulimia

This is also known as bulimia nervosa, and involves a process of **bingeing** and **purging**. These processes are often triggered by a cycle of starving oneself, and then uncontrollably eating, which then leads to feelings of guilt, causing the process to happen again. This disorder can be incredibly hard to notice, as an individual with this disorder may appear to have a typical body weight. On top of bingeing and purging, individuals may experience symptoms such as *extreme mood changes*, *poor self-image* and *anxiety* surrounding body weight.

Bingeing: rapidly consuming a large quantity of food, far beyond a regular portion size. These binges are usually uncontrollable, and can cause extreme levels of guilt after an episode.



Purging: a repeated episode of self-induced vomiting or the use of laxatives. In addition, an individual may engage in behaviours such as excessive exercise or use of medications to induce purging.

Binge eating disorder

Binge eating disorder is marked by regularly eating excessive amounts of food until feeling uncomfortably full, which is usually triggered by trying to cope with distressing emotions. Despite its name, individuals with this disorder do not engage in purging or compensatory behaviours (such as extreme exercising) after an episode. Individuals dealing with this disorder often experience embarrassment, upset and guilt over their episodes, which can lead them to hide their eating habits. As a result, this disorder can go unnoticed for a long period of time, where individuals may not seek help. Symptoms include *eating food even when they are not hungry*, *eating quickly* and *experiencing deep feelings of guilt or shame* after a binge.

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Other specified feeding and eating disorder (OSFED)

This is a new disorder, which has replaced 'Eating Disorder Not Otherwise Specified' in the Diagnostic and Statistical Manual (DSM-IV),⁷ which categorises mental disorders into classes (a term which defines a collection of things which are related to each other) which it does not meet the criteria for the aforementioned eating disorders. An example of this is OSFED, which shows most of the signs and symptoms of anorexia but doesn't show significant weight loss as a result they fall under the diagnosis of OSFED.

Research activity: Research some examples of OSFED: <https://www.beateatingdisorders.com/information-and-support/about-eating-disorders/types/osfed/>

What are the symptoms of OSFED?

Go to

Phobias

Everyone has fears, and these can often provide us with protection! However, when fears become overwhelming and cause significant distress, interfering with our ability to function, it can lead into a mental health condition known as a phobia. Phobias come in many different forms, including specific phobias, e.g. situational and social phobias.

Agoraphobia

This is an intense fear of situations where escape may be tricky, usually triggered by open and public environments.

This disorder can result from experiencing panic attacks, which causes an individual to start fearing being in public in case they experience another one. Like anxiety, the symptoms of agoraphobia are a *fast heart rate, feeling faint and feeling unwell*.

Did you know? Agoraphobia can lead into panic disorder, a mental health condition where one attacks another, leading to each other's fear.

Situational phobia

This involves extreme fear surrounding a specific trigger. The fear is usually irrational (something that doesn't come from correct thinking or logic), and can range from getting on a plane to going to the dentist. Sometimes situational phobias can develop due to past experiences, such as having a bad experience at the dentist, or from irrational beliefs, such as believing that being on a plane is life-threatening. Again, the symptoms of situational phobias are similar to those of anxiety and may include *sweating, rapid heartbeat, tight chest, trouble breathing and trembling*, to name a few.

Personality disorders

Personality disorders are defined by unusual patterns of thought and behaviour, which can cause significant impairments to multiple aspects of an individual's life, including emotions, relationships, logic and social functioning.

Borderline personality disorder

This is a mood disorder where individuals can experience significant changes to how they see themselves and others. Symptoms include changes from normal patterns of behaviour, such as *impulsivity* (behaviour which is acted out of desire without thinking about the consequences), *troubles coping with emotions, relationship difficulties, feelings of emptiness and disturbing thought patterns*.

⁷ <https://www.sciencedirect.com/topics/medicine-and-dentistry/dsm-iv>

Post-traumatic stress disorder (PTSD)

This disorder is characterised by extreme and distressing thoughts related to a stressful or traumatic event that has occurred. These thoughts are triggered by re-experiencing the traumatic event, e.g. through flashbacks or nightmares, causing symptoms such as *mood swings, aggressive behaviour, irritability* and *insomnia*. Individuals may also display *avoidance behaviours*, hiding away from specific situations which could trigger a flashback. For example, a soldier with PTSD may avoid going to firework displays because the loud bangs could trigger a traumatic flashback of gunshots.

Psychotic disorders

Psychotic disorders are the experience of abnormal thought patterns and views of an individual's life, such as **delusions** and **hallucinations**. These can cause an individual to completely lose their grip on reality, significantly impacting how they interact with their environment and navigate daily life.

Delusions
judgement
For example, some people may have thoughts that are not based on reality.

Hallucinations
relating to the senses
For example, some people may hear voices or see things that are not there.

Schizophrenia

This is a disorder where individuals face severe disruptions to their perception of the world, and changes to their emotions, such as increased aggression and confusion. These changes are down to delusions and hallucinations, which can cause an individual to completely lose sight of reality, not impacting how they interact with others and their environment. This disorder can lead to extreme changes to an individual's behaviour, which can sometimes be dangerous.

Discussion question

Read the case study on Tomasz (see A1.1).
Which mental health condition is Tomasz experiencing?

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2.2 Signs and symptoms of mental health

Signs and symptoms give us important clues about mental health conditions, help us decide if a mental health disorder may be present. There are many different signs and symptoms, and they vary depending on the type of condition and individual factors, such as our biology and psychology.

Difference between signs and symptoms

The main difference between the two is based on **who** notices the impact of a mental health condition.

- Signs are what other people observe, such as a doctor noticing that an individual is showing restlessness.
- Symptoms are what an individual experiencing a mental health condition notices, such as an individual with anxiety noticing a rapid heart rate.

Case study

Youssef has noticed that he has been experiencing signs such as a rapid heart rate and fear about flying on a plane. He decides to go to his local GP to get some help.



Applied activity:

Discuss with a partner the difference between signs and symptoms, and how they can help identify a mental health condition. You could use the case study as an example.

Examples of signs and symptoms

Mental health conditions can lead to many different signs and symptoms that can be observed in individuals with these conditions. It is important to recognise these early to help diagnose individuals and provide the treatment they need. Some signs and symptoms are identified earlier in certain conditions. The following table provides a summary.

	Description	Signs and symptoms
Anger or aggressive behaviour	Feeling emotions such as frustration or hostility, displaying behaviours to intentionally harm something or others.	Irritated body language, clenched fists
Changes in normal behaviour patterns	A shift in usual behaviours, which can show underlying issues to someone's mental health.	Change in appearance, lack of hygiene
Confusion	Difficulty understanding, such as understanding what is going on or how you should act.	Repeating questions
Extreme mood swings from low to high	Intense shifts in mood, from extreme low mood to exceedingly high happiness.	Observable changes in energy levels, short periods of happiness
Fear or panic	Unpleasant emotions surrounding a certain stimulus, such as a phobia.	Restlessness, being unable to sit still.
Hallucinations	Unpleasant perceptions relating to our sensory experiences.	Changes in perception, such as talking to oneself.
Risk to self or others	The potential for behaviours or actions to result in harm to others; this can be psychological and physical.	Displaying aggression
Self-harm	Harming oneself deliberately, usually as a response to cope with emotional distress.	Unexplained injuries
Signs of stress	Physical, emotional and behavioural changes which may arise during stress.	Social withdrawal

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	Description	Signs and symptoms
Substance misuse	Repetitive use of substances (such as tobacco, alcohol and drugs) which can be detrimental to one's health.	Reckless behaviour.
Suicidal thoughts	Thought patterns about ending one's life.	Reckless and dangerous behaviour.
Withdrawing from those around you	Isolating oneself from those closest to you, such as family and friends.	Reduced communication with friends.

Discussion question

Read the case study on Tomasz (see Appendix 1).
What signs and symptoms is Tomasz displaying?

How signs and symptoms may vary in severity in individuals and conditions

The experience of mental health, including its signs and symptoms, can vary significantly from one individual to another. Furthermore, the severity of these signs and symptoms can change from one condition to another. This is down to many aspects, such as:

- **Individual differences** – we are all extremely unique, and this means that our experience of mental health can differ significantly. Factors such as our biology can impact how we experience a disorder; individuals who have a certain mental health disorder in their family history may be more likely to develop it. Furthermore, a traumatic event can make signs and symptoms more severe for individuals.
- **Stage of disorder** – just like our mental health, mental disorders exist on a continuum. These disorders can range from mild to severe and may change over time. An example is depression, which, if it gets worse, can progress to clinical depression. While mild depression has similar signs and symptoms, clinical depression involves more severe signs and symptoms.
- **Overlapping disorders** – while some people experience just one mental health condition, it is common to have more than one. Experiencing multiple conditions can increase the severity of symptoms, as one condition may worsen the other. As mentioned earlier, many individuals with agoraphobia also have panic disorder. Both disorders share a root of fear or anxiety, which can make each other worse. For example, the fear of experiencing panic attacks can increase anxiety about being in public, leading to more severe symptoms.

Did you know?
Research has found that individuals with a family history of a mental health condition are more likely to develop a mental health condition themselves.

Research has found that individuals with a family history of a mental health condition are more likely to develop a mental health condition themselves.

How signs and symptoms might develop if the condition worsens

As mentioned briefly above, the stage of a disorder can lead to worsening signs and symptoms. These signs and symptoms can then manifest in a number of ways, such as:

- **Number** – an increase in the variety of symptoms someone experiences. For example, an individual who started off with symptoms of a racing heart rate has started experiencing dizziness as their condition has worsened.
- **Frequency** – an increase in the occurrence of signs and symptoms. For example, an individual who experiences one panic attack a week has started having two panic attacks each week.
- **Severity** – as an individual's condition worsens, their signs and symptoms may become more severe. For example, an individual with OCD may start to experience and display more obsessive thoughts and compulsions as a result of their condition worsening. This could lead to the individual cleaning more frequently, which they never used to experience.

Discussion question

Read the case study on Tomasz (see Appendix 1).
How have Tomasz's signs and symptoms changed as his mental health condition has worsened?

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Chapter 2: Questions (2.1–2.2)

Checking my understanding:

- Which of the following terms is characterised by experiencing involuntary, repetitive thoughts or actions which are considered as unacceptable or off-limits?
A. Compulsions B. Hallucinations C. Obsessions D. Delusions
- Is it true or false that SAD can only be experienced during the winter months?
A. True B. False
- Describe the difference between signs and symptoms and give an example of each.
- Match the following terms to the correct descriptions.

A. Nervosa	i) Believing in things which aren't a reality
B. Purging	ii) Intense worry and emotional distress often linked with panic attacks
C. Delusion	iii) Repetitive actions or thoughts which arise as a result of anxiety
D. Compulsion	iv) Response to binge eating, which may involve vomiting or fasting to prevent weight gain

Developing my skills:

Answer the following question to help develop your skills for the assignment.

- Read the three brief case studies below. Based on the signs and symptoms described, identify the health condition(s) each person may be experiencing. Give a brief reason for your answer. You may identify more than one condition per person.

Tom	Yen	Zoe
Tom feels intense worry in social situations and avoids crowded places and public speaking. He's recently started having panic attacks, leaving him breathless and dizzy, and now avoids situations where he fears they might happen.	Yen has been feeling low and unmotivated for months. She avoids social activities, struggles with sleep and appetite, and finds it hard to concentrate. Her symptoms are worse at certain times of the year.	Zoe has been experiencing obsessive thoughts about germs and contamination. She constantly washes her hands and sanitises everything she touches. She also has compulsive behaviours, such as checking and re-checking doors and windows to make sure they are locked.

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		Tom
Anxiety disorders	Generalised anxiety disorder (GAD)	
	Panic disorder	
	Social anxiety	
	Separation anxiety disorder	
	Obsessive compulsive disorder (OCD)	
Mood disorders	Clinical depression	
	Bipolar	
	Post-natal depression	
	Seasonal affective disorder (SAD)	
Phobias	Agoraphobia	
	Situational phobia	
Eating disorders	Anorexia	
	Bulimia	
	Binge eating disorders	
	OSFED	
Personality disorders	Borderline personality disorder	
Psychotic disorders	Schizophrenia	

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2.3 Individual factors which can increase the risk of suffering from mental health conditions

The experiences we face in life can completely shape our mental health and have a significant impact on the risk of suffering from mental illness. It is important we recognise how these factors can influence our experience of mental health and provide better support for those experiencing a mental health condition, and to ensure we receive accurate treatment.

Bereavement

This occurs when an individual loses a person close to them, such as a family member, friend, or colleague. It is often an extremely distressing and upsetting time, commonly experienced as **grief**. For some, however, this intense sadness and distress can persist for a long time and may increase the risk of developing a mental illness. This is because the signs and symptoms, such as low mood, anger, and self-harm or suicidal thoughts, are similar to those of mental health conditions. Additionally, bereavement can worsen symptoms for individuals already living with a mental health condition.

Grief: deep and intense sadness experienced after someone dying, such as a loved one.



Childhood abuse, trauma or neglect

Childhood abuse, trauma and neglect can significantly impact a person's life and may lead to lasting consequences, especially on their emotional well-being. Individuals who experience these can have an increased risk of developing mental health conditions such as anxiety, depression or PTSD.

Listed below are a few of the reasons why childhood abuse, trauma and neglect can increase the risk of developing mental health disorders:

- **Disrupted brain development** – these experiences can affect how the brain develops, which can impact an individual's emotional functioning.
- **Chronic stress** – ongoing exposure to this abuse or trauma can lead to long-term stress.
- **Poor coping mechanisms** – individuals may resort to coping mechanisms which are harmful, such as substance abuse, further worsening mental health outcomes.
- **Negative self-esteem** – victims may develop a poor relationship with their self-worth.

Childhood abuse or neglect can have a lasting impact on a person's life. This can include sexual abuse.

Trauma is a scary experience that can be unusual and distressing.

Neglect is when a person is not given the care and shelter they need.

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Experiencing discrimination and stigma

Discrimination and **stigma** are very harmful to any individual experiencing them, having the potential to increase the likelihood of developing a mental health condition.

Discrimination is treating someone wrongly because of their age, race, religion, etc.

Stigma is a mark or label that is often used to identify someone who is different from the rest of the group.

This is due to many factors, such as:

- **Social isolation** – discrimination and stigma may cause an individual to feel rejected from their society, leading them to withdraw from those around them. These feelings may increase loneliness and isolation.
- **Internalising views** – individuals may start to believe the negative views that others have of them, which could cause feelings such as shame and low self-esteem.
- **Discouragement from seeking help** – as we saw in Chapter 1, experiencing discrimination and stigma can discourage someone from seeking help but can lead to worsening their symptoms.

Family circumstances

Our family circumstances can impact how we experience mental health both positively and negatively. Family circumstances can heighten the risk of developing a mental health condition, such as:

- **Family member's mental health** – experiencing a family member with mental health problems can impact the entire family, and impact how a child is brought up. Factors such as genetics could be a feature, increasing the risk of developing a mental illness.
- **Family stress** – exposure to family circumstances such as domestic abuse, financial problems, or divorce can create an unstable environment for someone's mental health due to the stress and conflict.
- **Family views on mental health** – growing up in a household where mental health problems are stigmatised can discourage an individual from seeking support. Furthermore, experiencing mental health problems can cause shame, guilt and self-isolation.

Physical health

Physical health refers to the overall condition of our body, including factors such as diet, exercise, and the ability to fight off illness. Our physical health is extremely important to how we experience mental health, and can significantly impact our mental well-being.

Here are some factors which may increase the risk of mental illness:

- **Chronic illness** – experiencing illnesses such as cancer and diabetes can be extremely stressful and damaging, increasing the risk of developing conditions such as depression and anxiety.
- **Decreased mobility** – individuals who have lost their mobility due to physical health problems can experience a loss of independence, leading to isolation and helplessness, increasing the risk of mental illness.
- **Sleep problems** – sleep is incredibly important for our emotional health, and chronic physical health conditions can experience extremely disrupted sleep. Poor sleep can lead to poor emotional functioning and may be more at risk of mental illness.

Case study

Connie has recently been in a car accident, and broke her leg during the crash. As a result she is now on crutches until her leg heals. This has been really distressing for Connie, as she cannot leave the house without help or go running anymore. She has been feeling incredibly lonely during this time, and has started to experience low mood and hopelessness.



Applied activity
Discuss with a partner how the physical health of the impacted Connie might impact her mental health. Consider how this might develop over time.

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Relationships

Our relationships are very important to our mental well-being, and experiencing break-ups, fall-outs and conflicts can be extremely distressing. Our social connections provide support during mental health difficulties. However, relationship problems can lead to increased stress, worsened symptoms, leading to an increased risk of developing a mental health condition.

Severe or long-term stress

Stress is defined as an inability to cope with the demands we are faced with, which can cause significant strain on our emotional and physical health. Experiencing stress is a normal part of being human and at times can be beneficial. However, chronic stress can be incredibly damaging, increasing the danger of us developing a mental health condition such as anxiety or depression, as well as worsening ongoing mental illnesses.

Social disadvantage

Social disadvantage comes in many forms but can be defined as the factors that hinder social acceptance or usefulness, leading to an increased need for support. Experiencing social disadvantage can increase the risk of developing a mental health condition, as we will outline below.

Education and employment

Individuals with lower levels of education, or those in unstable employment, may have a higher likelihood of developing a mental health condition due to a number of factors, such as:

- **Lack of coping skills** – people with lower levels of education may find it harder to deal with everyday stress as they may lack the emotional resilience or coping mechanisms, which could make them more likely to experience anxiety or depression.
- **Limited future opportunities** – lower education levels can lead to restricted employment opportunities, which can cause significant financial stress, feelings of shame, poor self-esteem and depression.

Did you know? Individuals with lower levels of education are more likely to experience poor mental health. Lower education levels are linked to symptoms of anxiety, depression and self-harm.

Homelessness and poverty

Having nowhere to live, or lacking the resources to maintain a basic standard of living, is a challenging experience for anyone. Consequently, it is not surprising that these circumstances can lead to developing mental health conditions due to factors such as:

- **Lack of safety and security** – having nowhere to live, or having poor living conditions, can expose individuals to dangerous environments, which can cause significant distress and anxiety. As a result, these experiences could increase the likelihood of depression, anxiety and other mental health conditions.
- **Stigma** – individuals on the streets, as well as those experiencing poverty, may face discrimination from others. As a result, this could increase feelings of self-hatred, low mood, and a lack of motivation to seek help.
- **Limited access to services** – those facing this challenge may lack access to important resources and support. This could worsen their symptoms and lead to the development of a mental health condition.

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⁸ <https://pmc.ncbi.nlm.nih.gov/articles/PMC9796491/>

Social isolation and loneliness

Sadly, **social isolation** and **loneliness** are experienced by many people around the world, and are said to have one of the biggest impacts on our mental health. This is due to their impact on:

- How we cope with stress
- Physical health, including weakening the immune system, which can increase the risk of mental illness
- Sleep quality
- The likelihood of developing mental health conditions such as depression and anxiety
- Self-perception, causing negative thoughts about oneself, such as low self-esteem

Social isolation is a lack of contact with others.

Loneliness is a feeling of disconnection. It can be experienced even when surrounded by people.

Did you know? WHO has highlighted the extremely harmful global impact of loneliness, which studies have found to be as harmful as smoking 15 cigarettes a day.

Substance misuse

Substance misuse is the use of substances such as alcohol and illegal drugs in a way that is harmful to health. This can cause negative impacts for physical, social and especially emotional health. It can also increase the risk of mental illness in a number of ways. For example:

- **Withdrawal symptoms** – use of substances can lead to physical dependence. When someone tries to stop using, they may experience withdrawal symptoms, such as anxiety, depression and irritability. In turn, these symptoms can trigger the development of a mental health condition.
- **Overlapping disorders** – individuals who engage in substance misuse can often have other mental health conditions alongside, such as depression, schizophrenia and PTSD.
- **Treatment outcomes** – regular use of substances may negatively impact treatment. It can reduce an individual's ability to engage effectively in the treatment process. As a result, the chances of getting better are reduced.

Discussion question

Read the case study on Tomasz (see Appendix 1).

Which individual factor(s) may be increasing the risk for Tomasz developing a mental health condition, and why might this be the case?

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⁹ <https://www.who.int/teams/social-determinants-of-health/demographic-change-and-healthy-ageing/social-isolation-and-loneliness>

2.4: Effects of mental health conditions

Mental health conditions can have widespread impacts on our physical, intellectual, and financial health. These impacts not only affect how an individual experiences daily life but also affect their family and friends. This is why it's so important to continue understanding mental health conditions and those around us, to ensure we're helping everyone impacted, not just on an individual scale. We will now consider these impacts and provide some examples.

Examples of the effects of mental health conditions

Physical

- Sleeping more or less than usual
- Feeling tired and lacking energy
- Losing weight
- Digestive issues
- Muscle tension
- Chest pain



Impact on individual – these factors can cause significant discomfort, potentially worsening their mental health symptoms by introducing physical issues.

Impact on family and friends – these effects could create worry and stress for those close to the individual, who may feel concerned about the physical consequences of their mental illness.

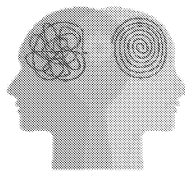
- Being easily distracted
- Difficulty making decisions
- Increased worrying
- Poor concentration

Impact on individual – these factors may impact how an individual functions in their environment, making it difficult to complete everyday tasks and affecting their performance at work.

Impact on family and friends – these factors can cause strain on relationships, leading to distress over the individual's condition, such as difficulties communicating and increased worry, which can affect the family's health condition.

Emotional

- Aggression
- Feeling overwhelmed
- Tearfulness
- Irritability and short temper
- Low mood



Impact on individual – these emotional factors may cause an individual to experience relationship troubles, impaired daily functioning, challenges dealing with stress, and a lack of control over their emotions.

Impact on family and friends – these changes in emotions could be very upsetting for the individual's loved ones, who may feel as though they are unable to connect with or help them.

- Loneliness
- Withdrawal
- Talking less and avoiding social activities
- Feeling less interested in day-to-day activities

Impact on individual – these factors may lead to isolation, and society could cause difficulties maintaining relationships, leading to difficulties seeking help and professional help.

Impact on family and friends – these factors can lead to worry and feel helpless, leading to them withdrawing. This can lead to anxiety as they may feel

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Financial

- **Benefits** – individuals may require additional help from the government, known as benefits, as a result of having a mental health condition.
- **Income** – individuals struggling with a mental illness may have to stop work in turn could reduce the amount of income an individual receives.
- **Job security** – individuals who have a mental health condition may experience to increased absences or decreased performance, increasing the risk of unemployment.
- **Cost of treatment** – some mental health conditions may be more expensive to treat, leading to the need for more professional help.

Impact on individual – these factors could cause significant financial stress, leading to increased expenses and difficulties affording treatment.

Impact on family and friends – conflict over money-related issues may arise, and family and friends may have to rely on loved ones for financial support, which could cause further stress.

Discussion question

Read the case study on Tomasz (see Appendix A)

What are four examples from Tomasz's case study that illustrate the impact of his mental health condition, and how might these examples be addressed?

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Chapter 2: Questions (2.3–2.4)

Checking my understanding:

- Which of the following terms is defined as not fulfilling a child's essential need for shelter and care?
A. Trauma B. Neglect C. Discrimination D. Childhood
- Outline the difference between social isolation and loneliness.
- Which type of effect of mental health conditions is most likely to cause digestive problems?
A. Social B. Emotional C. Physical D. Intellectual
- Explain how bereavement may increase the risk of suffering from a mental health condition.
- Match the following individual factors to how they increase the risk of poor mental health.

A. Homelessness
B. Discrimination and stigma
C. Relationships

i) Conflicts
ii) Exclusion
iii) Lack of stability

Developing my skills:

Answer the following questions to help develop your skills for the assignment.

- Read the case studies below and identify the individual risk factor and the impact. Then, explain how each factor may influence an individual's mental health.

Factors:	Impacts:
A. Homelessness	i) Lack of security
B. Experiencing stigma	ii) Social exclusion
C. Childhood neglect	iii) Disrupted brain development

Case study	Factor	Impact	How it may influence mental health
1. Lillian, 27, was raised in a home where her parents failed to provide proper care. As a child, Lillian often went days without food and wasn't supported emotionally, which led to her feeling abandoned and insecure. As an adult, Lillian has trouble trusting others and struggles to cope with her emotions.			
2. Nadia, 24, recently came out as bisexual to her family and friends. Unfortunately, she was met with rejection and discriminatory comments, particularly from her parents. Nadia began to feel ashamed, believing there was something wrong with her. She decided to withdraw from her friends and family and stopped contacting them.			

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Case study	Factor	Impact	Homelessness
3. Amira, 40, was forced into homelessness after losing her job and being evicted from her apartment. She spent months living on the streets, facing constant danger and instability. Amira struggled to maintain basic hygiene and nutrition, leading to poor physical and mental health. The stress of living in unsafe conditions, combined with isolation, led to anxiety and depression. Amira also began experiencing flashbacks to traumatic events, leading to symptoms of PTSD.			

2. Read the following descriptions of different impacts on individuals' lives. For each impact, indicate which of PIESF (Physical, Intellectual, Emotional, Social, Financial) is being affected. This might be due to the development or worsening of a mental health condition.

Impacts	P	I	E	S	F	Homelessness
1. Constant fatigue, headaches, and low energy levels.	✓					
2. Easily distracted and difficulty concentrating at school.		✓				
3. Withdrawing from friends, family, or social activities.				✓		
4. Difficulties making decisions at work.		✓				
5. Persistent feelings of stress, anxiety, or low mood.			✓			
6. Physical symptoms such as muscle tension or chest pain.						
7. Poor sleep patterns and disrupted daily routines.						
8. Worrying about money and struggling to afford basic needs.					✓	
9. Feeling overwhelmed or unable to cope with responsibilities.						

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Chapter 3: Provision of mental health services

Provision simply means providing what is needed. As we have already covered, so of making mental health services available to help people manage their mental health. These services have been introduced in the UK. These services are introduced in a non-statutory, which will be explained further on in this chapter. The way in which varies, often through different types of referral. Furthermore, the people who work have many different titles and roles, and support mental health through many different ways. We will discuss all of these factors further within this chapter, as well as consider the legal framework.

3.1 Types of provision of mental health services, both locally and nationally

Let's start by looking at the different types of provision (statutory and non-statutory) and the local and national services that each provides.

Types of provision – local and national

Statutory and **non-statutory** have a key difference, and that lies in **who** they are introduced by. Both types of provision provide services locally – within your community, for example – as well as nationally, such as a nationwide support service.

Statutory

Statutory provision is a service provided by the government, as a legal obligation. The main aim of statutory provision is to ensure that everyone can get free access to these services, such as mental health support in this case. A positive of this approach is that statutory provision removes barriers typically associated with accessing a service, such as the cost of treatment.

The following are examples of local and national mental health services provided by statutory provision:

Local	National
Local authority services – these are services which provide support for certain needs of a given community. For example, social/community care, residential care and prisons.	National Health Service – the national healthcare system provides services through general practitioners and community mental health teams, including Children and Young People's Mental Health Services (CYPMHS).

Research activity: What services does your local authority provide in your community? Visit <https://bristolmind.org.uk/services/>

Go to zzedu.com

Discussion question

Read the case study on Tomasz (see Appendix A)
What is one statutory mental health service provided by Tomasz, and how might he access this service?

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Non-statutory

Non-statutory services are not enforced by law, and are provided by external organisations, charities or voluntary groups. This approach provides other ways to support mental health, which can be helpful for individuals who may want access to different types of services.

There are three types of non-statutory provision, which are available locally and nationally:

	Description	Local
Private	A service people pay for , such as hospitals or clinics. For some people this may be the preferred option, as private healthcare tends to have shorter waiting times (compared to the NHS) and can offer alternative treatments and quicker access to specialists. Individuals with more complicated mental health needs, or those who are suffering to a greater extent, may seek out these services to benefit from quicker access to treatment and more specialised approaches.	<ul style="list-style-type: none"> • Paid appointments with therapists or psychiatrists in the local area • Private hospitals or clinics
Charitable	A service which provides support to individuals from a non-profit standpoint, which means that their goal is to help individuals without aiming to make a financial gain. These organisations are registered, which means that they have told the government what they do and what their goals are, so they can follow appropriate rules and work within the bounds of the law. These charities can be a lifeline for some people who need extra support, providing another low-cost or free alternative to using statutory services to support mental health, as well as a sense of community.	<ul style="list-style-type: none"> • Charities such as MIND, Samaritans and Young Minds offer local support services to many communities
Voluntary	A service where people offer some of their own time to help others, usually without getting paid. Sometimes these services can be linked to charities and can range from small local peer support groups to large national organisations. Again, these voluntary services can be extremely useful for individuals going through mental health difficulties, providing another way for people to feel part of a community and benefit from accessible, low-cost or free support.	<ul style="list-style-type: none"> • Community groups (e.g. Alcoholics Anonymous) • Local peer support groups

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Research activity: Research **one** of the charities mentioned above (MIND, Samaritans, Young Minds). Find out how the charity supports individuals both locally and nationally.

3.2 Referral to different services

People can receive support for their mental health in many ways, either by referring themselves or being passed on to specialists. The reason we have these different ways of referral is due to factors such as barriers to seeking help and the complexity of a mental health condition. Sometimes someone has to be referred for more specialised treatment. In this section, we will look at different types of referral.

Self-referral

This is when someone seeks help or accesses services themselves, such as visiting their local GP or talking to someone on a crisis helpline. This can be a very scary and brave step for anyone struggling with their mental health, which is often the first step towards their recovery.

Third-party referral

Third-party referral is when someone who knows the individual suffering, such as a family member or friend or colleague, reaches out to a mental health service on that person's behalf. This usually occurs out of concern for the individual's mental health challenges, perhaps when others notice a decline in their symptoms, for example. Furthermore, this referral can be a result of the individual being reluctant or fearful to seek help on their own.

Professional referral

This is when one service refers an individual to another service with the goal to provide more specialised care or support. This type of referral is most common when an individual's mental health struggles are more complex, such as schizophrenia, where extra help is needed. Examples include:

- A GP referring someone with symptoms of OSFED to a clinical psychologist for further support.
- A community mental health team (CMHT) referring someone with suicidal thoughts to a crisis resolution and home treatment team (CRHT) to provide urgent mental health support.
- A social worker referring someone with mild anxiety to a psychological well-being team to provide more specialised care.

Case study

Zara has been dealing with depressive symptoms for a few weeks but feels scared to seek help because she is worried she will waste their time. Her parents have noticed that her symptoms have been getting worse, and start to really worry as they know she won't seek help. They decide to call their local GP to organise an appointment for Zara to see a mental health professional, as they want her to get better.



Applied

Read the case study on Zara, and identify the type of referral.

Discussion
Questions



Read the case study on Tomasz (see page 62). What type of referral might Tomasz have received?

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Chapter 3: Questions (3.1–3.2)

Checking my understanding:

1. Outline the difference between statutory provision and non-statutory provision.
2. Explain the **three** types of non-statutory provision.
3. Which of the following is an example of a professional referral?
 - A. A person decides to call a helpline to speak to someone professional
 - B. A person has a complex disorder and their local CSE decides to pass them
 - C. A person gets help from a professional because their mum called them
 - D. A person gets help from a psychiatrist because they booked an appointment

Developing my skills

Answer the question below to help develop your skills for the assignment

1. Read through the brief case studies below and identify:
 - a) The type of provision (statutory or non-statutory)
 - b) The service that could support them (locally or nationally)
 - c) The type of referral they might have had

Case study	a) Provision	
1. Sophie has severe depression with worsening symptoms. She visits her GP, who refers her to a community mental health team (CMHT).		
2. Naomi is struggling with an eating disorder. A close friend notices and contacts a specialist eating disorder clinic on her behalf.		
3. Leo experiences severe anxiety affecting work and social life. He contacts Anxiety UK and is directed to an online therapy service run by a national charity.		

Explain how the provision and services provided can support each individual.

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3.3: Practitioners who work in mental health

A practitioner is someone who has a specific, skilled job. People who specialise in mental health care because their skills and goals are focused on helping people manage and improve their mental health. As all share this goal, there are many different types of mental health practitioners, each with their own skills and approaches based on an individual's needs.

The roles of different practitioners who work in mental health

Let's have a look at the different types of mental health practitioners, and understand their roles.

Psychiatrists

These are the doctors for our mental health and the only mental health practitioners who require medical training. Other mental health practitioners require training, just not medical. The role of these practitioners is to diagnose, treat and help manage mental health disorders. Psychiatrists are most commonly used for more complex disorders such as schizophrenia, and are licensed to provide treatments such as medications. For most people, getting treatment from a psychiatrist requires referral from a GP (an example of when professional referral is used). Psychiatrists don't often work alone; they work as part of a multidisciplinary team alongside psychologists, therapists and social workers to provide comprehensive care for individuals.

Case study

A GP refers a patient to a psychiatrist after noticing signs of PTSD. The psychiatrist diagnoses the condition, prescribes medication and works with other professionals, including psychologists and social workers, to ensure the patient receives care that is right for them.

Psychologists

Psychologists are like detectives for our brains. Their role is to study the mind and behaviour **scientifically**, which in turn can help them understand how our mental processes impact our behaviour and emotions. By using this approach to learn about the mind, psychologists can then use this information to help people through their mental health struggles by using evidence-based interventions. Becoming a psychologist requires a lot of training, and something called a doctoral degree. There are different types of psychologists: clinical psychologists treat more severe and complex cases of mental illness, while others may specialise in areas such as educational psychology, forensic psychology and occupational psychology. Psychologists working in mental health will use the same approach as cognitive behavioural therapy (CBT) to support individuals.

Scientific approach to understanding the mind and behaviour

Research evidence in psychology

Social workers

These are professionals who work closely with people who are going through a mental health difficulty to help them overcome their issues and improve their life. Social workers work alongside professionals, as they cannot provide treatments in the same way that doctors do. Instead, they provide support and important resources to an individual to help them on their journey to recovery. Social workers can be a valuable source of support not only for individuals with mental health challenges but also for their families. (Remember the PIESF effects of mental health challenges on friends and family? This is why this support is so important.)

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Psychiatric nurses

These are nurses who are trained to provide care to individuals suffering with their mental health, with the goal to promote their mental and physical well-being. They provide this support by considering the needs of the individual, and then putting in place a care plan. They usually see how this plan works, and may make changes if needed.

A few examples include:

- Helping with self-care tasks, such as hygiene
- Helping to educate close family or friends about how to support the individual
- Providing guidance and emotional support to the individual and their family
- Encouraging healthy habits

Support workers

Living with a mental health condition can significantly impact how we function in our daily lives. Individuals may require extra support, and this is where a support worker comes in. Support workers help look after and provide emotional and physical support to individuals, helping them live more independently. Again, these practitioners can also provide support to the individual.

Support workers can help with daily tasks such as:

- Assisting individuals in taking their medication
- Helping individuals maintain personal hygiene
- Helping with meal preparation and eating well
- Ensuring the individual's safety and assessing for any risks
- Providing guidance and emotional support to the individual and their family

Occupational therapists

Occupational therapists share similarities with social and support workers. However, their difference lies in their goal to promote **rehabilitation** and enabling individuals to perform daily tasks more efficiently. Occupational therapists do this by trying to understand what an individual is finding tricky, and finding solutions to these challenges. For example, an individual who has agoraphobia may struggle to leave the house. An occupational therapist may work with them to help them gradually take steps to going outside by making a plan, with the goal to help them go outside more often.

Psychological therapists

These therapists use psychological treatments which are designed to improve mental health by changing aspects which are harmful to an individual's mental health, such as their beliefs and attitudes. The many different types of psychological therapist work with certain groups of people.

- **Child psychotherapists** – these practitioners work with children, as well as young people. They measure and treat a wide range of mental health problems, where they use play therapy.
- **Family therapists** – these practitioners use a talking therapy that involves the whole family to improve their relationships with one another. For mental health, they look at anything within the family that could be impacting the individual's mental health.
- **Play therapists** – play therapists usually work with children, using play to help them deal with struggles such as traumatic life events or mental illnesses. It can be incredibly helpful for children who may not fully understand what they are experiencing. This approach allows them to express their feelings through play, rather than having to talk about emotions they may be experiencing.

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- **Creative art therapists** – these therapists use artistic media, such as drawing and music, to address emotional issues during a therapy session. Like play, this form of therapy can allow an individual to express themselves through creativity, while allowing them to process traumatic experiences, emotional challenges or mental health conditions. Again, this therapy can be used as a way for people to express emotions they can't easily describe, or to view the experiences in a new, more positive way.

Primary mental health workers

These are mental health practitioners who provide support to young people and help support them through emotional or mental health challenges. Primary mental health workers build strong relationships with their patients, creating a safe environment where young people can share their struggles. As they get to know the individual better, they can help to identify a place to improve their mental health. For example, a primary mental health worker who knows a patient is struggling to deal with their anxiety, so will start to introduce creative art therapy to help them manage their struggles.

Education mental health practitioners

These are practitioners who work in an education setting, who work with children and young people to help them through common mental health challenges. Education mental health practitioners use interventions which have been evidenced to improve mental health, such as cognitive behavioural therapy (CBT). They also support schools to encourage good mental health by sharing advice and guidance on well-being.

Children's well-being practitioners

Children's well-being practitioners work closely with young people to keep a close eye on their mental health, and to make sure they are getting access to the support they need. Their main role is to provide interventions proven to be effective in promoting well-being, as well as to refer these children on to the appropriate treatment or service to ensure they receive the right help. (This is another example of professional referral.)

Specialist substance misuse workers

These are practitioners that serve as a support network for individuals dealing with substance misuse. They are known as outreach workers, where they connect individuals to the appropriate services. These specialists focus on teaching their patients about the dangers of substance misuse, helping them to begin their journey to recovery, and to ensure they can get access to the necessary support. For example, a specialist substance misuse worker may work with someone who is struggling with alcohol addiction, providing them with advice and support about the harmful consequences of drinking too much alcohol.

Discuss
question



- Read the case study on Tomasz (see A1.1.1).**
1. How might a psychologist help Tomasz manage his eating difficulties?
 2. How might an occupational therapist help Tomasz rebuild a daily routine and engage in activities he used to enjoy, like basketball?
 3. If Tomasz was referred to a psychiatrist for further evaluation, what kinds of assessments might they carry out and how could they help?

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Chapter 3: Questions (3.3)

Checking my understanding:

- Which of the following practitioners focuses on rehabilitation to help individuals develop the skills required for daily activities?
 - Psychologist
 - Support worker
 - Occupational therapist
 - Specialist substance misuse worker
- Explain the difference between a psychiatrist and a psychologist.
- Give **two** examples of what a psychiatric nurse does.

Developing skills

Answer the following question to help develop your skills for the assignment.

- Read the case studies below and identify which practitioners can help each of them.
 - Case study 1:** John, 35, has been diagnosed with severe depression. He struggles with his daily life and often feels hopeless and helpless. His symptoms have affected his work and relationships. He has been prescribed medication, but he still feels emotionally distressed and has thoughts of self-harm.
 - Case study 2:** Sophia, 14, has been experiencing severe social anxiety since starting school. She struggles with attending school and participating in group activities. This has greatly affected her relationships with peers and schoolwork. Her school environment is overwhelming, and she feels isolated, leading to increasing isolation. She has been referred for help by her family and is struggling with her from accessing the support she needs in daily life.
 - Case study 3:** Chang, 28, has a long history of alcohol misuse. He has struggled with staying sober and is feeling overwhelmed with guilt and shame. His relationships with family and friends have been strained, and he has expressed difficulty in managing his cravings and emotions.

Professional	CS1 (John)	CS2 (Sophia)	CS3 (Chang)
Psychiatrist			
Psychologist			
Social worker			
Psychiatric nurse			
Support worker			
Occupational therapist			
Psychiatric social worker			
Primary care mental health worker			
Education mental health practitioner			
Children's well-being practitioner			
Specialist substance misuse worker			

Provide reasons for your choices.

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3.4: Legislation and individual rights in mental health

Now let's look at the legal side of mental health! While you may not be familiar with each Act is crucial because the law impacts everyone involved in mental health – from people with mental health conditions, to the mental health practitioners treating them. An Act of Parliament (which changes an existing law) to address a specific problem or to control the way we approach mental health, with the overall goal to improve how we approach these topics. There have been put forward to improve how we treat and approach mental health: the Mental Capacity Act (2005). We will now delve into the key features of these. This legislation has helped to support individuals experiencing a mental health condition.

Mental Health Act (2003)

This Act outlines the rights of someone suffering from a mental health disorder who is being treated. It allows mental health professionals to have the ability to treat, even without their will in circumstances where they may be at risk to themselves or others due to their condition, known as sectioning, which involves detaining individuals for assessment and treatment without their consent due to their condition. Although this may sound unfair and cruel, it is essentially a protective measure, not punitive, and it allows for treatment when individuals cannot make informed decisions. The measures put in place are intended to serve the individual's best interests and access to the necessary help.

The overall goal of the Mental Health Act is to support those with a mental health condition (the ability to make informed decisions). This means the Act applies not only to individuals who lack capacity to make decisions due to their mental disorder but also to those who, despite having capacity, refuse treatment. The focus of the Act is on ensuring treatment is provided when an individual cannot make informed decisions, rather than simply the ability to make decisions.

Here is a breakdown of the Act's main features, and how it supports individuals with mental health conditions:

- **Legal rights** – allows individuals with a mental illness to understand their rights and how they can be treated. This ensures that even when individuals are held against their will they are aware of their **choice of care** and treatment options. This helps to prevent them from being treated wrongly and makes sure they are more in control of their care and recovery.
- **Mental health professional authority** – this ensures mental health professionals can section individuals they believe are a risk to themselves or others. This authority allows them to carry out further tests and provide the relevant treatment, as well as support and safety. As a result, these individuals have a better chance of recovery.
- **Supports those with a mental health disorder and capacity** – by providing treatment to individuals who can make decisions but refuse treatment. This ensures they reduce the risk to themselves and receive the necessary support they may not realise they need. The Act's goal is not only to detain individuals but also to provide care and treatment that supports their recovery. As a result, this can enhance an individual's journey to recovery by ensuring they receive the help needed to improve their mental health.

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Mental Capacity Act (2005)

The Mental Capacity Act (2005) provides guidelines for supporting individuals who have difficulty making decisions due to a lack of mental capacity, which can result from conditions affecting memory, understanding or communication. Individuals with a lack of mental capacity may display issues remembering information, understanding or communicating a decision. The aim of the Mental Capacity Act is to protect and empower individuals who may lack the capacity to make decisions for themselves while ensuring that any decisions made on their behalf are in their best interests. The most important thing is that all of these decisions must be in the best interest of the individual with reduced mental capacity.

Here are the key rules for this Act:

- **Mental capacity until proven otherwise** – unless there is evidence that an individual should be treated as though they do not have the ability to make decisions, they should have the opportunity to make their own decisions about their care, until they are proven otherwise.
- **Supporting decision making** – all efforts to support decision-making should be made, whether or not an individual lacks mental capacity. This aligns with the principle of supporting people to make their own decisions and have control over their lives. When a mental health professional evaluates someone's mental capacity, they should not rely on someone's diagnosis. Instead, they should focus on the person's ability to make a decision. For example, an individual with schizophrenia may struggle to communicate their decision, but can still understand the choice. A mental health professional may need to help them communicate their decision differently, such as by writing it down. This approach allows individuals to maintain an active role in their treatment, allowing them to choose the care they want.
- **Freedom to make decisions** – an individual *with* mental capacity has the right to make their own decisions, even if others don't necessarily agree with them, as long as they are able to understand the information relevant to the decision. For example, an individual with mental health problems may decide to stop taking their antidepressants. Their friends and family may strongly disagree, but under the Mental Capacity Act, this individual is within their rights to do this. This respects the individual's autonomy.
- **Best interest** – all decisions made for an individual who doesn't have mental capacity must be in their best interest, and the least restrictive to their freedom. This means making decisions that give the individual as much freedom as possible while still meeting their care needs. When making a decision, professionals should consider the person's past wishes and preferences (if known) and involve them in the process. This decision is usually made by someone close to the individual, such as a friend or family member. This ensures that individuals who can't make their own decisions receive the support they need, without limiting them too much.

Research activity: Watch this useful YouTube video that explains the Mental Capacity Act: <https://www.youtube.com/watch?v=tsstHYJV0yig>. Write down a few key points that enhance your understanding.

 Go to Zigg Education

Case study

Patrick has recently been diagnosed with depression, and has been experiencing overwhelming thoughts about ending his own life. He shares this concern with his mother, who becomes increasingly worried about Patrick's risk to himself. Patrick is taken to hospital, without him wanting to, to make sure he is kept safe and can get the necessary support and treatment during this challenging time.



Discussion question

Read the case study on Tomasz (see AQA GCSE Health and Social Care textbook page 102). Which Act (Mental Health Act or Mental Capacity Act) was used to hospitalise Tomasz, and why, based on his condition?

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Chapter 3: Questions (3.4)

Checking my understanding:

1. Outline one difference between the Mental Health Act and the Mental Capacity Act.
2. Explain what mental capacity means, and provide an example.
3. Describe **three** main features of the Mental Health Act.
4. Which term is defined by holding someone against their will in the interest of the individual?
 - A. Sectioning
 - B. Choice of care
 - C. Legal rights
 - D. Best interest

Developing my skills:

Answer the following question to help develop your skills for the assignment.

1. Read the case studies below and use your knowledge of the Mental Health Act (1983) and the Mental Capacity Act (2005) to complete the table.
 - **Case study 1:** Ethan has been diagnosed with schizophrenia. He has stopped eating and drinking, and is now experiencing severe delusions, believing that his friends and family are trying to harm him. His behaviour has become erratic, and he has locked himself in his apartment. Concerned for his welfare, his family calls their local Crisis Mental Health Team. After an assessment, professionals decide to section him.
 - **Case study 2:** Aaliyah is a university student who has been struggling with mental health issues. She experiences extreme mood swings, from severe depression, when she is unable to get out of bed, to manic episodes during which she makes impulsive spending decisions, leaving her with no money. During one episode Aaliyah refuses to take her medication, insisting she doesn't need it. Her friends, teachers and family are concerned about her ability to make informed decisions.

a) Which Act applies to the scenario? (Tick one)
i) Mental Health Act (1983)
ii) Mental Capacity Act (2005)
b) What rights does the individual have under the chosen Act? (Tick as many as apply; some may apply to both)
i) Right to be informed about decisions affecting them
ii) Right to make own decisions (unless proven to lack capacity)
iii) If lacking capacity, decisions must be made in best interest
iv) Right to appeal detention
v) Interventions should respect rights while ensuring safety
vi) Treated with dignity and respect when receiving care
vii) Right to appoint an independent mental health advocate (IMHA)
viii) Right to be involved in discussions about care
c) What responsibilities do professionals have? (Tick as many as apply)
i) Provide appropriate care and treatment
ii) Assess whether the individual has capacity to make decisions
iii) Must assess if sectioning is necessary for safety
iv) Must work with family and/or support teams to ensure individual gets necessary help
v) Must review capacity over time, as conditions may fluctuate

Justify the choices you make.

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Chapter 4: Treatment and support for mental health conditions

We should now understand that the nature of mental health is complex. As a result, recovery can be even more complicated. Thankfully, there are now many different ways people can be supported for their mental health conditions. This means that there are now more options to recover, even if one treatment doesn't work. There are many factors which can influence recovery, and support, which can either be beneficial or create barriers to recovery. It is crucial to identify these factors to make sure we can either keep them or address them, to ensure more people can achieve recovery. In this chapter, we will delve into all of this further, as well as understanding how different approaches can support people with mental health conditions.

4.1 Types of treatment and support and how they work

We will now look at the many different types of treatment. It is important to note that different treatments can have different approaches and goals. Treatments have a medical nature, with the aim of managing symptoms, using methods such as medication and medical procedures. For example, medication is a type of treatment which is used to help manage or alleviate symptoms of depression. Therapy is a type of treatment which is used to help someone go through rehabilitation (remember what this is? It is a process of helping someone get back to their daily functioning). Therapy does this by providing support and helping to change thought patterns or behaviours.

Treatments

As previously stated, treatments use medical methods to help manage or alleviate mental health conditions. Let's take a look at the different types:

Medication

This involves using drugs to help alleviate symptoms or treat a mental health condition. This treatment method can help individuals function more effectively in daily life, helping them to manage their mental health condition more effectively. (Do you remember which mental health practitioners can prescribe medication? Answer: psychiatrists.) General practitioners (GPs) can also prescribe medication. There are many different medications which are used for specific mental health conditions, each of which work in unique ways to help treat these disorders.

Here are some examples:

- **Antidepressants** – these are medications which are mainly used for individuals suffering with severe depression, known as clinical depression. However, they can also be used for other mental health conditions such as anxiety, OCD and PTSD. These drugs work by helping to increase the levels of neurotransmitters associated with our mood and happiness, known as serotonin and noradrenaline.
- **Antipsychotics** – these drugs are used to help treat psychosis, which is the experience of losing touch with the world around you. This medication is primarily used for individuals with schizophrenia and bipolar disorder, helping to alleviate symptoms such as hallucinations and delusions, which can cause a disconnection from reality. Antipsychotics achieve this by reducing dopamine levels, which has been linked to psychotic symptoms.

Did you know? Some people can experience side effects from medication, such as weight gain or drowsiness. It's important to talk to your doctor if you experience any of these.

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- **Minor tranquilisers** – these are used to help calm someone's physical and mental symptoms of a mental health condition, most commonly used for anxiety. They work by helping to slow down bodily processes, such as a racing heart, or the mind, such as racing thoughts. These drugs are typically used as a more short-term solution to help someone feel more relaxed, especially when experiencing severe symptoms of their mental health condition. They work on the central nervous system, which is responsible for controlling how the body functions.
- **Mood stabilisers** – these are used to help extreme mood swings, most commonly used for bipolar disorder. They work by helping to balance chemicals in the brain, which can help keep this can help individuals suffering with bipolar disorder to experience less severe depression. It's important to note that mood stabilising medication is not a cure. There are three main groups of mood stabiliser, and there are several types of individual drug within each of these groups. Different types of mood stabilisers are used for particular symptoms and for different people.

Talking treatments

As the name suggests, this treatment is where an individual talks to a trained mental health practitioner to help manage or alleviate their mental health condition.

There are several types of talking treatments, and some may work better for certain people. What works best can depend on factors such as the type of mental health condition, the severity of symptoms, and the person's unique needs. Let's look at some examples:

Counselling	This treatment involves talking to a trained therapist about things that are affecting an individual, such as distressing feelings or emotions. Through this helps the individual to find a solution to cope with these emotions and improve how an individual manages their mental health condition. Counselling can be delivered one-to-one or in group settings.
Cognitive behavioural therapy (CBT)	This therapy involves helping an individual to reflect on their thoughts and feelings. CBT then helps to identify which thinking patterns and behaviours are affecting an individual's mental health. New skills or ways of thinking are then developed, healthier coping strategies or healthier habits, to help an individual in a more positive way. This treatment is often used in conjunction with other treatments. It has been suggested that using them together can be more helpful. CBT treatments can work together to make each other more effective.
Couples therapy	This is where a therapist helps a couple to identify factors within their relationship that may be harmful or damaging. The therapist then introduces new skills and strategies to overcome these negative patterns. This can help to improve the relationship which could be damaging to mental health. For example, they struggle to understand each other's mental health needs. They start talking about their needs to increase understanding and support.
Interpersonal therapy	This therapy focuses on identifying issues in a person's relationships, such as with family. It is most commonly used for individuals with depression. Poor relationships can worsen this condition. By addressing any problems in their relationships, this can help address depressive symptoms associated with poor relationships.
Guided self-help	This therapy follows the same principles of CBT but involves an individual using self-help resources on their own. The individual is still supported by a therapist. They go through these exercises or workbooks. The goal is to help them identify what thoughts or behaviours could be damaging to their mental health and for them to cope more positively.

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Research activity: Watch this useful YouTube video that explains CBT in more detail: <https://www.youtube.com/watch?v=q6aAQgXauQw>. Write down a few key points to enhance your understanding!

Social prescribing

Social prescribing is when someone known as a 'link worker' helps a person to receive services in their local area which they need. It's important to note that social prescribing provides access to services outside of healthcare settings, meaning that it focuses on providing a way for people to access mental health support within their community. For example, a link worker may pass someone on to a community group to help them with their anxiety.

Social prescribing: a person is referred to receive services in the community.



Applied activity: Read the description of social prescribing above, and consider what the benefits to this treatment might be for an individual's mental health condition.

Electroconvulsive therapy (ECT)

This is a type of therapy which involves passing an electrical current through the brain to cause a seizure. A seizure is a sudden burst of electrical activity in the brain that causes a temporary loss of consciousness. It is this change in chemistry which can help to alleviate symptoms experienced in bipolar disorder. This therapy is more of an extreme treatment, used only when other treatments have not worked. It is usually a last resort, applied only when other treatments have failed.

Case study

Sonia has recently been diagnosed with bipolar disorder. She is unsure about her condition and doesn't fully understand how medication, talking therapies, or other treatments can help. Her doctor explains that a combination of medication, talking therapies, and lifestyle changes can help manage her condition. Mood stabilisers can help control mood swings, and antidepressants can help with her symptoms. Talking therapies, such as cognitive behavioural therapy (CBT), can help her understand her thought patterns and develop coping strategies.

Discussion question

Read the case study on Tomasz (see page 41). What are three treatments you would recommend for Tomasz?

Therapies

Therapy aims to help individuals rehabilitate by providing support and coping strategies to help them manage their mental health condition more effectively. Some are known as complementary therapies and can be used together with other treatments. For example, an individual with depression may be prescribed antidepressants to help support their condition. Complementary therapies are known as alternative therapies and can be used alone and as a replacement for other treatments. For example, an individual may be prescribed traditional medicine prescribed by a doctor to help their condition. Each of these methods and aims, some of which may be more suitable for a certain condition.

Complementary therapies

Complementary therapies are used alongside conventional medical treatments, not as replacements, to support a person's overall well-being. These therapies are not part of regular medical practices, meaning they aren't typically offered by statutory provision such as the NHS. This means that they have less evidence supporting their effectiveness, so they should be used with caution.

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Let's have a look at some common examples:

- **Acupuncture:** First introduced by Chinese medicine, this therapy involves putting needles in certain areas of the body to stimulate nerves and muscles. This is carried out by a trained professional. The belief is that this practice can help individuals with conditions such as depression and anxiety by providing pain relief. Since chronic pain can worsen these conditions, this therapy can help with their symptoms.
- **Aromatherapy:** This is a therapy which uses the senses, particularly the sense of smell. It does this by using oils which are made from plants, known as essential oils. These oils have properties and are believed to affect our mood, such as helping us to relax and sleep better. You may find this therapy helpful because they can access essential oils at home, which can help with symptoms independently without the need for a trained professional.
- **Hypnotherapy:** This therapy involves a trained hypnotherapist guiding an individual into a relaxed state. During this phase, the therapist starts giving advice to encourage an individual to change the way they see things. The goal of this is to help an individual to change their thought patterns or behaviours which may be harmful to them and their mental health. Hypnotherapy is especially helpful for mental health conditions such as OCD, anxiety and PTSD. It can help to alleviate the overwhelming thoughts which are associated with these conditions.
- **Light therapy:** Think back to the condition seasonal affective disorder (SAD), where the treatment for this is light therapy! This is where a special type of light is used to help with the condition. This is suggested to help the brain reduce the production of the sleep hormone, melatonin, and increase the production of our happy hormone, serotonin. This therapy is often used indoors during the winter months, allowing them to manage their depressive symptoms during the winter months.
- **Massage:** This involves applying movement and pressure to the body, such as a massage, to help an individual to feel relaxed and provide pain relief. Massage can be especially helpful for conditions such as anxiety, that often cause muscle tension.
- **Meditation:** Focusing the mind and body through various techniques, such as focusing on a **mantra**, sound or visual image (e.g. the ocean), concentrating on breathing or practising **mindfulness**. It is a great tool for improving mood, reducing stress and anxiety and increasing self-awareness, so you become more aware of your thoughts and your feelings.
- **Pet therapy:** Also known as animal therapy, it refers to using animals (e.g. dogs or horses) to support mental health conditions such as depression and anxiety. Stroking a pet releases endorphins which can reduce stress, improve mood and increase feelings of happiness, helping to lower feelings of depression. Pets can also help build social skills and boost self-confidence.
- **Yoga:** A spiritual practice that uses meditation alongside breathing exercises and holding postures. Its overall aim is to control the body and mind. While it improves physical health, such as increased strength and flexibility, which can help manage pain, it also has benefits for mental health by reducing stress and anxiety by promoting relaxation, improving **mindfulness** and boosting mood.

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Applied at 2.1.1 Describe how meditation, yoga or pet therapy can support one of the mental health conditions mentioned in Chapter 2.1.

Did you know? Pets can help by providing an opportunity for them to remember and reflect on their feelings.

**Discussion
question**

Read the case study on Tomasz (see page 42). Would Tomasz benefit from light therapy? Explain your answer.

Creative therapies

We covered these therapies briefly in Chapter 3.3, when looking at the different practitioners who work in mental health. To recap, this therapy involves engaging in artistic tasks during a therapy session. This creative process allows individuals to express their emotions, which is believed to help in processing emotional distress or traumatic experiences.

Additionally, this therapy can help people express feelings they may struggle to describe, or provide a new perspective on their situation.

- **Art therapy:** This is using artistic tasks, such as drawing and painting, to help communicate how they are feeling. This can help to alleviate distress and improve self-esteem.
- **Music therapy:** This therapy involves using music, such as listening to music or playing instruments, to help individuals express their emotions in a safe environment.
- **Dance therapy:** As the name suggests, this is using the movement of dancing to express emotions. This can help to process emotions that might be difficult to feel or talk about.
- **Drama therapy:** This is a form of therapy that uses drama techniques, such as role-play, to help individuals understand their emotions and gain new perspectives. This can help people to challenge negative thoughts and increase their well-being.
- **Play therapy:** This is using play to help individuals, usually children, to process emotional struggles such as traumatic life events or mental illness. It can be incredibly effective, especially for children who may not fully understand what they are experiencing. This approach allows them to express their feelings through play, rather than having to talk about emotions they may not understand.

Case study

Alfie has been going through a tough patch recently. He has been struggling to talk about how he is feeling, because he can't explain his emotions. He feels like he needs to move and let off some steam to do this.



Applied activity

Discuss what you think would be a good recommendation for Alfie.

Alternative therapies

Alternative therapies are used as substitutes for conventional medical treatments, rather than alongside them. These therapies lack the rigorous scientific testing that traditional treatments undergo, so they should be approached with caution. Here are some examples:

Homeopathy	Herbal medicine
This is a therapy which holds the belief that something which causes symptoms in a healthy person can be used in minute amounts to help alleviate the same symptoms in someone who is sick. This process involves diluting the substance with water and shaking it (known as succussion). This therapy can be used on many conditions, such as asthma, as well as depression and anxiety. However, the effectiveness of homeopathy is highly debated, and it is considered controversial in the medical community.	Herbal medicines are those which come from natural sources, such as plants and flowers. They contain active ingredients, which are believed to have properties which can help mental health conditions. For example, chamomile is a flower that is believed to help people feel calm and relaxed. Those with anxiety may drink it as tea.

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Chapter 4: Questions (4.1)

Checking my understanding:

1. Outline the difference between treatments and therapies.
2. Which of the following medications are used to help balance extreme mood?
A. Antipsychotics **B.** Mood stabilisers **C.** Minor tranquilisers
3. Explain **three** key features of CBT and provide **one** example of what mental conditions CBT is most effective for.
4. Which of the following is an example of a complementary therapy?
A. Homeopathy **B.** Guided imagery **C.** Hypnotherapy
5. Explain what herbal medicine is and provide **one** example of what mental health condition it is most effective for.

Developing my skills:

Answer the following questions to help develop your skills for the assignment.

1. Treatments can involve medication to help manage or alleviate symptoms. Match the medication to the symptom or condition it is designed to help.

1. Antidepressants
2. Antipsychotics
3. Minor tranquilisers
4. Mood stabilisers
5. Electroconvulsive therapy (ECT)

A. Hallucinations and delusions in schizophrenia
B. Severe anxiety with physical symptoms like a racing heart
C. Treatment-resistant depression
D. Extreme mood swings between mania and depression
E. Low mood and anxiety linked to hormonal imbalances

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2. Therapies and some talking treatments focus on rehabilitation, providing support. Match each therapy to its benefit or the symptom it is designed to help.

1. Cognitive behavioural therapy (CBT)
2. Counselling
3. Interpersonal therapy
4. Social prescribing
5. Acupuncture
6. Aromatherapy
7. Herbal therapy
8. Meditation
9. Pet therapy

A. Helps manage stress and anxiety using relaxation techniques
B. Focuses on improving social skills to reduce social isolation that may come with depression
C. Uses scents, such as lavender, to help reduce anxiety.
D. Encourages positive thought changes for depression and anxiety
E. Involves interacting with animals to improve mood, and build confidence
F. Uses community-based activities to help improve wellbeing.
G. Involves inserting fine needles into the skin to reduce anxiety
H. Treats seasonal affective disorder using light exposure therapy
I. Provides emotional support and helps manage emotions with a therapist

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4.2: Factors affecting access to treatment

Despite there being more focus on making sure more people have equal access to services, factors still affect how individuals get these services. These factors can either be barriers to accessing this treatment and support. As a result, this can mean some individuals have better outcomes than others. It is important we understand these factors, to ensure everyone has a chance of recovery. In this section, we will explore these factors in more detail.

Access to and availability of mental health services

As mentioned, not everyone can get the same access and availability to mental health services due to factors such as the financial side of treatment, the complicated nature of working in a certain geographical area we live in, and factors such as difficulties getting appointments.

Cost

While many mental health services, including those provided by the NHS, are free, some treatments require a lot of money. This typically occurs through private provision, where individuals pay for mental health treatment. People may choose this option due to factors such as the severity or complexity of their condition, which may require more specialised and faster access to help. Furthermore, individuals using complementary or alternative therapies may need to pay for these services. This can lead to financial stress for many individuals and create barriers for those in more challenging financial situations, making it harder for them to seek help. This is why it is so important for mental health services to offer free, or affordable, treatment and support, to ensure everyone can get access to the care they need regardless of their financial situation.

Case study

Individuals experiencing issues such as poverty, may face significant barriers to accessing private treatment or alternative therapies that they cannot afford to. This can lead to their condition to worsen, and increase their financial worries.

Complexity of working with different services

We should now understand the different types of service an individual can access, and you may remember that these services can be used together. Involving multiple services in someone's treatment can be beneficial, as it allows for a more **holistic** approach in determining the best way to support them.

Holistic
picture
For example
components

However, sometimes this can introduce complexity, such as:

- **Coordination and communication issues:** when different services work together in how they collaborate and share information. We covered in section 3.2 the importance of professional referral. While it has many benefits, such as making sure someone gets the care they need, it can come with challenges:
 - **Longer waiting times** – referring an individual from one service to another means the individual doesn't get the right treatment at the right time, which can worsen their condition.
 - **Miscommunication** – mental health services may fail to communicate effectively, which could lead to misdiagnosis (being diagnosed with the wrong condition). While the wrong diagnosis can be distressing, but it can result in individuals receiving inappropriate treatment, potentially worsening their condition.
 - **Lack of availability** – some individuals may be referred to a service that is not available or is understaffed. This can cause more delays in receiving support or treatment.

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- **Varied eligibility and requirements:** getting access to public mental health services often has strict rules or eligibility criteria. This means there can be long waiting times, and that individuals who don't meet the criteria may not receive the support they urgently need. For example, antidepressants are recommended to be prescribed to individuals with moderate to severe depression. This means that individuals who struggle with less severe depression may not qualify for this medication. This could worsen their condition further as they can't access the treatment they need.
- **Different treatment approaches:** not all services have the same methods and challenges. For example, not all services offer specialist therapies such as CBT, instead may offer the individual counselling. This could mean that treatment worsens symptoms. Furthermore, some conditions need a combination of treatment and medication. Some services may not agree with this approach, or may focus on one or the other. This can result in individuals not receiving the most appropriate support for their condition, which could worsen their symptoms.

Mental health service provision in the area

Where we live can be a huge factor in explaining differences in access and availability of mental health services. Cities, for example, usually support a larger number of services. As a result, there is a wider variety of services available, offering support which meets everyone's mental health needs. This means that individuals in these areas could access this provision both locally and nationally.

However, people living in more rural regions may not have as much choice in the services their local area provides. This could mean that individuals who have more specific or complex mental health needs may not have access to the treatment and support they need. As a result, individuals in these areas may have to travel further to receive the support they require, as their local provision may not offer it. This can lead to delays in receiving treatment, worsening of mental health conditions and individuals not receiving the support they need.

Case study: An individual suffering from agoraphobia may struggle to access the appropriate treatment if they live in a rural area. This is because the services available locally may not meet their disorder. Furthermore, due to the nature of this condition, it could create additional barriers for the individual to seek support, as they may find it difficult to travel long distances to access services. As a result, this may discourage this individual from seeking help, worsening their condition.

Difficulty getting appointments

There can be many barriers to getting appointments, which can mean individuals do not receive the support they need quickly. For example, difficulties getting an appointment can delay access to support. Without a diagnosis, individuals can't take steps towards their recovery, or receive treatment. This can make individuals' mental health worse and delay their recovery.

Here are some examples of factors that can cause delays in getting appointments:

- Limited availability of appointments
- Staff sickness
- Appointment cancellations
- Strict eligibility criteria for certain services
- Living too far away from mental health service
- Inconvenient appointment times that don't fit with personal schedules

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The individual needing support

The first step to recovery is often seeking help, which can be a very scary yet brave step. Some individuals may need more support than others in this process, due to factors related to lifestyle and mental health. It is important to understand how these factors can create barriers to treatment or support, so that we can better meet each individual's needs. Let's dive into these factors in more detail!

Acceptance to get help

As mentioned, accepting that you need help can be a daunting but brave step for many individuals. It involves recognising you need support and being open to receive it. However, some individuals may not accept the need for help, or may not seek encouragement from mental health practitioners or friends and family.

Applied activity: Can you identify what individuals may need extra support for this? Consider individual factors or mental health conditions.

Case study: An individual with an eating disorder for a long time realised that it is time to seek help to recover, so they decide to contact their local GP to start their journey. Their family supports them through the process.

Lifestyle

Lifestyle factors can have a big impact on someone's ability to attend therapy or access health services. Examples include:

- **Life commitments** – an individual's schedule can greatly impact how they access and support. If an individual has a flexible schedule, they may be more able to attend sessions, as well as make appointments. However, individuals with busy schedules, work, school or family commitments, could struggle to have time to fit in the appointments. These commitments can create barriers for people getting appointments as they may have to fit around certain times such as outside of working hours. This means that these individuals may need more support to fit their treatment into their lives.
- **Health-related behaviours** – lifestyle factors such as diet, fitness, and sleep can significantly contribute to mental health conditions. Individuals with poor lifestyle experience more severe mental health symptoms, which can impact the effectiveness of treatment. In some cases, this may prevent them from attending therapy or accessing necessary services. For individuals to get the most out of their treatment, they need support in improving these lifestyle factors.

Discussion question

Read the case study on Tomasz (see A1.1.1)
Do Tomasz's life commitments appear to create a barrier to accessing support? Explain why or why not, based on his situation.

Underlying physical health

Think back to the individual factors which can increase the severity of a mental health condition. Physical health plays a huge role in our mental health. However, if we have an underlying physical condition, such as chronic pain, this can worsen mental health conditions as well as access to support and treatment. Let's look at how:

- **Chronic pain** – experiencing pain on a long-term basis can worsen mental health conditions and create barriers for people to access the treatment they need. For example, an individual with depression may be struggling with chronic pain. This has worsened their symptoms, and has stopped them from being able to collect their prescription from the pharmacy.
- **Mobility issues** – physical disabilities may create barriers for people to attend appointments or access various services. For example, an individual who has an amputated leg may struggle to access therapy for their anxiety as they cannot get there without a wheelchair.
- **Barriers to using medication** – individuals with certain health conditions may have barriers to using medications. For example, people who have heart or liver problems may not be able to take antidepressants.

This is why it's so important to support individuals with underlying physical health conditions to help address factors that may worsen their mental health and remove obstacles to recovery.

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Sustaining treatment

A person's journey to recovery can depend on many things, one of them being with treatment. Numerous factors can lead someone to stop engaging in their treatment often they have appointments, and their motivation to continue. Understanding it is crucial to address them or find ways to support individuals. By doing so, more road to recovery, especially in the long run.

Duration of treatment

How long someone has treatment for can depend on the type and severity of a mental health condition, as well as how much progress is being made (if progress is slow, treatment may need to be extended). The length of treatment can significantly impact whether someone sustains their treatment. If treatment is too long, the individual may feel discouraged if they don't see an immediate benefit. Treatment can take time, and this is why it is important for mental health practitioners to educate their patients about this and help set realistic expectations. Results at different stages. By doing so, more individuals are likely to stay in their treatment and experience a successful recovery.

Research
treatment
how long
think about
treatment
sustains

Frequency of appointments

How often someone has appointments for their mental health condition can significantly impact how they sustain their treatment. Individuals with a more complex or severe mental health condition, for example, may have more appointments with their mental health practitioner. This is usually so their progress can be tracked. Having more appointments may keep a patient engaged with their treatment, as well as give opportunities to address anything which may need amending in the person's treatment plan. This not only helps ensure that an individual continues with their treatment, but also addresses any obstacles that could be slowing down their recovery.

On the other hand, some mental health conditions may require fewer appointments, which can make it harder to track progress and address emerging issues. As a result, individuals may become discouraged if they feel they aren't seeing progress or if they are unhappy with their medication, leading them to potentially discontinue treatment.

Case study: Individuals with mental disorders often have frequent appointments to track their progress and make changes, such as adjusting medication, to ensure that anything needed for treatment can be addressed. Regular appointments help individuals stay engaged with their treatment and maintain motivation.

Motivation to continue

This is a significant factor which can contribute to unsuccessful treatment or therapy. If support is given to individuals, it still requires the individual to take an active role in their treatment, such as taking medication every day or engaging in therapy. Treatment can sometimes take a long time, and individuals may feel discouraged by this and lose motivation to continue. Furthermore, certain mental health conditions, such as depression, can significantly impact motivation, which can explain why some individuals struggle to stay motivated. This is why it is so important to provide support and encouragement throughout treatment. Such as educating individuals about the benefits of this care and how it can help them. This leads nicely on to the next section!

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Support from family/friends

Considering all the factors that can affect access to treatment and support, one thing is clear: support from family and friends can make all the difference. Facing a mental health condition can be incredibly challenging, and getting the right care may require extra help. Friends and family who provide support at each step can really improve someone's chances of recovery. Let's look at these factors and explore some examples of how friends and family can make a real difference in offering that support:



- **Access to and availability of mental health services** – can you remember the Friends and family could provide support such as financial assistance to help with costs of treatment. This way, an individual can access the appropriate treatment to relieve the financial stress associated with this barrier. Furthermore, family could provide transportation to appointments, especially if they aren't local. This support is related to difficulties getting to appointments and a lack of services in a certain area.
- **The individual's decision making support** – friends and family can provide support to help the individual make a decision, assuring them this is the right decision. They could also help an individual get to appointments if they have a busy schedule, by taking on other responsibilities. Furthermore, friends and family could offer support if the individual has underlying conditions such as mobility challenges, by helping them get to their appointments.
- **Sustaining treatment** – family or friends could keep their loved one accountable for their treatment. For example, they could make sure they take their antidepressants every morning. This accountability can help them continue with their treatment and could even help them keep going.

It's also important to note that the type of mental health condition someone has can affect the type of support they need. Let's expand on the case study we provided for agoraphobia:

Applied activity: Can you come up with another example? Consider another mental health condition where the individual may need extra support from friends or family to access their treatment, and explain why.



Case study: An individual with agoraphobia struggles to leave their home as they fear the social setting. As a result, they may need support from family or friends, such as driving them to their appointments and providing encouragement. This support can help overcome additional barriers to treatment as a result of their condition.



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4.3: Person-centred approaches to support people with mental health conditions

A person-centred approach means putting the individual at the heart of their own care. It focuses on their unique needs, goals and preferences to ensure they can receive the best possible care and can have an active role in their treatment. This approach is incredibly important for mental health practitioners to use, as it ensures individuals are supported throughout their healing process. In this section we will look at the key pillars which make up this approach.

Promote privacy

This refers to ensuring someone's privacy is respected. What this means is information, disclosed to a mental health professional for example, should be kept individual confidential. This involves the concept of informed consent, where individuals agree how their information will be used, especially when sharing is necessary (e.g. with other professionals). This makes sure that an individual can feel safe, respected, and in control of their information.

Dignity

In person-centred values, dignity looks at the worth of each individual regardless of their condition. It can be promoted by treating individuals with respect, honouring their rights to privacy. In other words, it involves recognising what someone can and cannot do without undermining them as a person.

Respect

Mental health practitioners should treat all individuals with kindness and understanding. They should have cultural competence, which means valuing and respecting cultural, religious and ethnic differences, and honouring their unique choices, feelings and rights. This is essential for providing person-centred care.

Empathy

This involves recognising emotions expressed by individuals and demonstrating compassion and sensitivity towards their situations. Empathy also includes the ability to listen actively and without judgement, which can help build **rappor** and trust in the therapeutic relationship. Empathy builds trust, strengthens relationships, and ensures that service users feel valued and understood.

Rappor
trusting

Individualised care

This approach acknowledges that everyone is different, so they must have unique care. It involves supporting each person's specific needs to ensure they receive the most appropriate and effective care for their mental health, this may involve creating treatment plans that are customised to address a person's specific mental health condition.

Applied action
and create a plan for someone who has a mental health condition about germs and how they could help a person.

Compassion

Compassion is based around empathy, respect and dignity. It is about understanding others' experiences regardless of their background. Mental health practitioners should recognise an individual's challenges, and provide reassurance.

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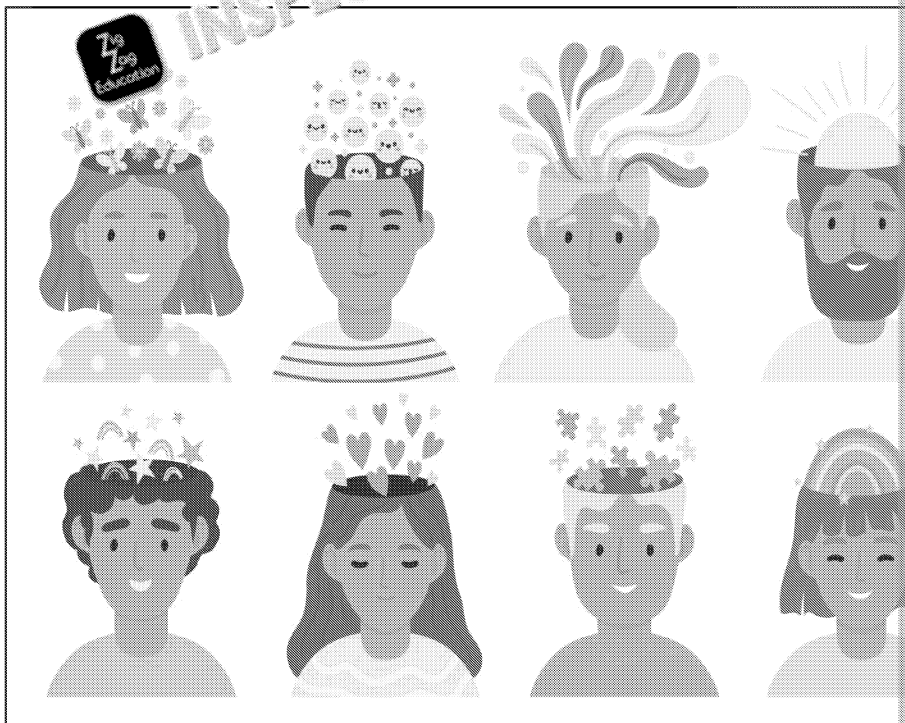


Consistency

This refers to providing stable, reliable and predictable treatments. This can relate to treatment, such as CBT, regular check-ups, having the same mental health practitioner to help individuals to feel safe and secure about their care. Furthermore, this is particularly important for individuals suffering with a mental health condition, as unpredictable treatment could cause further distress.

Advocacy

This is providing active support to individuals facing mental health struggles. Examples include: explaining rights, helping them to make decisions by educating them, referring them on to other services, and so forth. The key to this is that everything is done in the best interests of the individual. For example, this could involve helping educate someone who has been sectioned about their rights and what this means for them.



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Chapter 4: Questions (4.2–4.3)

Checking my understanding:

- Is it true or false that all treatment is free?
A. True B. False
- Explain how underlying physical health can impact how someone accesses treatment.
- Outline the **three** factors which can impact sustaining treatment.
- Which of the following person-centred approaches involves defending someone's rights?
A. Dignity B. Mental Health C. Advocacy D. Recovery
- Explain what is meant by 'protecting privacy'.

Developing my skills:

Answer the following question to help develop your skills for the assignment.

- For each scenario below, identify the main factors that may affect the individual's access to treatment. Then, suggest ways in which family and friends can support them to access treatment.

Scenario	Factors	How to support
1. Mohammad has been referred to a specialist for treatment for his anxiety disorder. He has been informed that there is an 18-month wait for NHS treatment, but he has been given the contact details of a private clinic where he can access treatment sooner if he is able to pay for it.		
2. Judith lives in a rural village where the nearest clinic offering cognitive behavioural therapy (CBT) is a 45-minute drive away, and public transport is not easily accessible. This makes it difficult for her to regularly attend appointments for her depression treatment.		
3. Chris struggles with depression, chronic back pain, and high blood pressure. His physical health issues make it hard to stay active, follow a healthy diet, or maintain regular sleep. He's hesitant to start antidepressants due to concerns about their impact on his physical health and has avoided therapy due to low motivation and fatigue.		

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Indicative Content

Chapter 1 (1.1–1.2)

Checking my understanding:

No.	Answer
1.	1 mark for correct answer: C. World Health Organization (WHO)
2.	1 mark for correct answer: C. MIND
3.	1 mark for each correct answer, up to 4 marks: Any two positives (sub-max. 2 marks): <ul style="list-style-type: none"> • Raising awareness • Breaking stigmas • Promoting research and education • Influential campaigns in social media Any two negatives (sub-max. 2 marks): <ul style="list-style-type: none"> • Reinforcing stigmas • Spreading misinformation • Oversimplifying • Negative framing Accept other suitable answers.
4.	1 mark for correct answer: A. Prejudice

Developing my skills:

No.	Answer										
1.	<p>Students to identify which positive and negative impacts of media coverage of the case study and then give reasons for their answers.</p> <table border="1" style="margin-left: auto; margin-right: auto;"> <tr> <td rowspan="4">Positives</td><td>i) Raising awareness</td></tr> <tr> <td>ii) Breaking stigmas</td></tr> <tr> <td>iii) Providing support, resources and education</td></tr> <tr> <td>iv) Influential campaigns on social media</td></tr> <tr> <td rowspan="4">Negatives</td><td>v) Reinforcing stigmas, prejudice and stereotypes</td></tr> <tr> <td>vi) Spreading misinformation</td></tr> <tr> <td>vii) Oversimplifying</td></tr> <tr> <td>viii) Negative framing</td></tr> </table> <p>Accept different answers with justification.</p>	Positives	i) Raising awareness	ii) Breaking stigmas	iii) Providing support, resources and education	iv) Influential campaigns on social media	Negatives	v) Reinforcing stigmas, prejudice and stereotypes	vi) Spreading misinformation	vii) Oversimplifying	viii) Negative framing
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	vii) Oversimplifying										
	viii) Negative framing										
2.	<p>Answers (one or more):</p> <ol style="list-style-type: none"> 1. B, C 2. H, F 3. I 4. J 5. K 6. F, D 7. D, H 8. E, F 9. C, B, G 										

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Chapter 2 (2.1–2.2)

Checking my understanding:

No.	Answer
1.	1 mark for correct answer: C. Obsessions
2.	1 mark for correct answer: B. False
3.	2 marks for describing the difference between signs and symptoms: <ul style="list-style-type: none">• Signs are physical indicators other people observe (1)• Symptoms are what an individual feels or experiences (1) 2 marks for identifying a mental health example: Possible answers: <ul style="list-style-type: none">• An example of a sign is someone who is panicked showing restlessness (1)• An example of a symptom is someone who is panicked experiencing shortness of breath (1) <i>Accept other suitable answers.</i>
4.	3 marks for all correct, 2 marks for two correct, 1 mark for one correct: A = i) B = ii) C = i) D = iii)

Developing my skills:

No.	Answer
1.	Students to identify which mental health disorder(s) each individual may be experiencing based on the symptoms. Possible answers: <ul style="list-style-type: none">• Tom: panic disorder, social anxiety, situational phobia• Yen: social anxiety, clinical depression, seasonal affective disorder (SAD)• Zara: anorexia, borderline personality disorder, schizophrenia Students should also give reasons for their choices.

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Preview of Answers Ends Here

This is a limited inspection copy. Sample of answers ends here to stop students looking up answers to their assessments. See contents page for details of the rest of the resource.