

BOOK REVIEW

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Where There is No Psychiatrist : A Mental Health Care Manual, (2018), 2nd Edition, by Vikram Patel (Harvard University) and Charlotte Hanlon (Addis Ababa University), RC Psych Publications, London, 360 pp, ISBN 978-1-909-72683-3

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Patel and Hanlon's *Where There is No Psychiatrist: A Mental Health Care Manual*, serves as a practical manual that paves the path towards addressing the challenges in providing mental health care that plague low to middle income countries and low-resource settings. Their book captures the essence of the World Health Organization's (WHO) definition of health by focusing not only on physical well-being, but also on the mental and social well-being of the patient, which is often relegated to the backburner in healthcare setups.

The authors refrain from armchair theorizing and complicated jargon and refreshingly focus on the ground realities and practicalities of providing adequate mental health care. Ideas are conveyed succinctly, in a methodical, yet simple manner, making the book easily comprehensible to family physicians, community health workers, nurses, social workers and the like - the target audience for this manual.

In Part 1 (Chapters 1 to 4), the authors provide an overview of mental health problems by providing an approach to understanding and classifying mental health problems, core skills and strategies required in assessing mental health problems and general treatment principles.

The author's emphasis on the practical nature of this manual is highlighted via the plethora of short illustrative cases, quick reference boxes to identify key features

of mental health conditions, symptom checklists, and the multitude of examples aimed at honing the core skills of providers. The authors bring in a human element to both being a provider of mental health care (who may experience job-related stress) as well as a recipient. Intrinsic across these chapters is the notion of treating the patient as a person, and not merely as a collection of symptoms. This is evident via the authors' attempts to guide the reader to develop sensitivity towards those with mental health problems and adopt a compassionate and holistic approach to mental health care. The book encourages its readers to consider the context in which the problem occurs, and the patient's perception of their problem, and places priority on involving the patient in treatment decisions.

Unfortunately, at certain junctures, technicality has been compromised for the sake of brevity and simplicity. For example, phobias were defined as "when a person feels scared (and often has panic attacks) only in specific situations" (p.9). This fails to capture the notion that the fear is excessive, unreasonable and out of proportion to the actual danger. Additionally, mental health problems were classified along the lines of looking similar or having similar treatments. Some classifications, such as pairing bipolar disorder with psychosis, rather than with depression (another mood disorder), and pairing epilepsy with suicidal behaviors under "other conditions" category, could benefit from refinement. Though some elements of the Mental Status Examination were covered, this could have been addressed more comprehensively.

Part 2 of the book (Chapter 5) is devoted to shedding light on medication, counselling and social interventions, as the main types of treatment. It captures which medications to prescribe depending on the mental health problem and their side-effects, and also deals with the problem of adherence. Additionally, it covers basic counselling skills and strategies, and social interventions to address specific problems and challenges.

It is commendable that the authors have condensed their vast insights on the area of treatment of mental health problems in a manner that makes the daunting task of treatment seem more feasible. For instance, the book presents short conversational snippets to provide reassurance and explain the condition to the patient, along with a handy list of points to remember when prescribing

certain medications. Additionally, it meticulously provides a step-by-step framework on how to set up a support group and change communication in the family from unhelpful to constructive.

Surprisingly, the book purports that counselling “involves a set of skills and approaches which can be learned by any health worker who has an interest and an open mind” (p.63). It is important to point out that though learning the skills and approaches of counselling would be of benefit to any healthcare practitioner, a caveat must be added that counselling would be best left to a professional. Making such a blanket statement regarding counselling may leave scope for confusion that counselling is the purview of all and sundry and may ultimately do more harm than good. This has special relevance in India, where dubious individuals claim to be counsellors, without the necessary training, skills and qualifications. In addition, the book veers away from the utilization of technical terms. Therapies like cognitive behavioural therapy and behavioural activation appear in the book as helping the patient think healthy and get active respectively. In the long run, this lack of awareness about the technical terms may pose as a hindrance when readers attempt to further their understanding of the topics covered in this book or may stifle communication with specialists in the field. Lastly, a problem noticed in Part 2 as well as other parts of the book is the excessive references made to previous and subsequent sections of the book which are often difficult to locate in the absence of the appropriate page number. This makes the book a literal page-turner.

Part 3 (Chapters 6 to 11) addresses common clinical problems associated with mental health. It focuses on emergency and non-emergency responses, physical symptoms that remain medically unexplained, problems due to habits, loss, violence and problems during childhood and adolescence.

The provision of flow charts to be utilized in emergencies, when a patient is exhibiting disturbed behaviour (viz., intoxication, withdrawal, delirium, acute mental distress etc.) was a noteworthy feature. Furthermore, what stood out was that for each disorder the authors had provided a detailed list of questions to ask the patient and the family, what to do immediately and on follow up, tips on how to explain the disorder to the patient and family, a list of things to observe

and how to make a decision regarding when the situation would warrant a referral. What is commendable is that Part 3 provided guidelines not only to the healthcare provider, but also to the caregivers of patients (parents and other family members), along with those in the patient's immediate microsystem (viz. teachers). These guidelines provided practical tips on caring for patients with dementia, helping children learn daily activities, using behavioural contracts and managing children who are hyperactive at home and in the school setting.

Behaviours causing concern were often introduced, using short phrases like "The person who has odd beliefs or is hearing voices" (p.129). However, such a reductionist approach may result in certain nuances slipping through the cracks (for instance, that hallucinations need not always be auditory, or that odd beliefs namely delusions, are different from obsessions), or may render certain symptoms unaddressed (such as negative symptoms seen in some psychotic disorders). Such clarifications from the get-go would be pertinent as the key demographic targeted by this book are those who may not have a background in Psychiatry or Clinical Psychology.

Part 4 (Chapters 12 and 13) of the book focuses on integrating care of those with mental health problems across two broad settings – those associated with health care and those in the community. This section actively provides insight into how faith and medicine need not be seen as watertight compartments and encourages readers to collaborate with traditional/faith healers in providing effective mental health care. Focusing on mental health prevention and promotion activities in the community and addressing stigma at the community level, were hallmarks of Part 4.

Part 5 (Chapters 14 to 17) encourages readers to localize the manual to their area. Given the applicability of this manual across the globe, this section asks readers to engage with the material presented across these chapters by writing local brand names and costs for medications for various mental health problems, recording information on resources available in one's local community, and noting down mental health problems in one's local language in the Glossary. Although most of the book refrains from using diagnoses as found in ICD-10 and DSM-5, Part 5 recognizes the need to know such terms for effective communication among

professionals in the health care set-up. Adding this information in an introductory chapter of the book would certainly have benefitted the reader.

Where There is No Psychiatrist: A Mental Health Care Manual serves as a beacon of light in a country like India, where specialists are few and burdened with an insurmountable workload, where stigma associated with mental health pervades, where affordability and accessibility to mental health care is a persistent challenge and where physical health is prioritized over mental health. The book serves as a first step in gearing up general health workers to meet these challenges and bridge the gap in mental health care delivery. Additionally, the book provides insights into things that one may take for granted, namely the soft-skills that go behind the medicine, which often play a vital role in improving patient care and getting the patient on the path to recovery. Overall the book is a call for action in working towards embracing and supporting mental health.

