



Opinion piece for "OpenMind" magazine February 2009

Service User Consultation in the Mental Health services - Does it require the skills of love ?

Too much of user consultation is dangerously unskilled

I've been an independent "user facilitator" for nearly 15 years now and although my small collection of achievements over that time is precarious and requires constant energy to hold on the map, I'm proud of them. Several are described in more detail on this website. Some have been featured in "OpenMind," a bi-monthly magazine run by MIND.

I would claim that each of these initiatives entails either creative action leading to real innovation in professional practice, or creative interchange leading to real discovery in people's minds.

Nevertheless I continue to find user consultation and involvement difficult. It is a long-established national policy requirement, centrally and closely monitored. Some of its principles are fundamental to the way I have always operated. That is why I am still here, helping to make it happen in my particular patch of London, in my speciality of mental health. So what's the problem ?

I see three reasons for my difficulty.

Firstly, of all the world's frontiers, that between mental illness and wellness is perhaps the most fraught. None of us want to lose mental hold. We all fear becoming 'loony'. One form of frontier behaviour is plain denial of any difference in experience or the need to bridge it. *I totally accept you so long as I can treat your experience as just the same as mine. So attend my tense meetings, follow my frantic agenda, pretend this is 'involvement' and we'll get along fine.*

Secondly, fundamentalism does not just apply to faiths. The urge to define reality in simple terms is in us all, especially those who patrol fraught frontiers. *If I stay too open, these tumultuous times and this uncertain place will overwhelm me with anxiety. So let me take cover and regain my orientation behind a barricade of simplistic slogans and solutions.*

Thirdly, there is always a battle between the spirit and the letter, that constant pull towards the fixed, quantifiable form, the heartless posture. The Scribes and Pharisees dealt in the letter and made sure the letter killed. The struggle to remain true to the essential spirit of a thing never ends.

Too much of user consultation is slogan and posture, a measurable carelessness, a tendency to denial. Real action too often does not follow; real connection does not take place. The banner words that govern policy – 'modernisation', 'involvement', 'inclusion', 'equality', 'rights', 'choice', 'recovery', 'indicators', 'directives' – have a way of making managers glaze over as human beings. As principles, some are fundamental to a sustainable democracy, and elements of good have undeniably followed the thinking,

acting and spending pursued in their names. Too often, though, one meets them as a smooth cliff-face of dogma operating at the cost of human responsiveness and accurate listening, leading to conduct that is crude, mechanical and lacking in the skills of love.

That last phrase comes from a Buddhist tract called the Metta Sutra. Buddhist monks have recently been chanting it on the streets of Rangoon.

But what have the 'skills of love' got to do with mental health consultation ? And what are they, anyway? Turning the other cheek by management directive? *By the left in threes, turn...Cheek ! OK. Now turn cheek nine times a week or lose your Funding ! And don't forget to Tick Your Boxes ! Dismiss !*

How about the skilled deployment of warmth, genuineness and accurate empathy, just for starters ? *Oh come on ! That's Therapy, stupid ! Don't patronise ! We want Equality ! We want Rights ! Equality in Committee ! Inclusion in the Boardroom !*

And let's include the setting of clear boundaries within which to work together; firm and effective ground rules; a detailed set of expectations for honest listening and effective responsiveness; and a contract or reciprocal code of conduct specific to mental health, measurable by assessment and based on quality not quantity. *Oh come on ! Don't Discriminate ! Why treat mental health as different ? The same Rights apply to all our customers, whoever they are ! What's the difference between mental health problems and a broken leg, after all ? Both just scratches on the same flat shop counter...*

A report *On Our Own Terms* has been available since 2003 (see Sainsbury Centre website <http://www.scmh.org.uk/publications/> See "Other Publications" section)¹

Based on findings from over 300 user groups, its main author is Dr Jan Wallcraft, herself a prominent member of the mental health user movement. Her report includes principles of good practice for user involvement and recommends that: 'A task force should be set up to develop a set of national guidelines for user involvement, based on the Draft Principles on User Involvement in this report (p. 63). The Department of Health (DoH) should then issue guidelines to StHAs, PCTs and NHS Trusts.' ("On Our Own Terms" p. vii)

That recommendation, straight from the user movement, has not been taken up. The report concludes: 'Where involvement is done well, it can be empowering for service users/survivors and even help their recovery, but when done badly it can damage people's mental health.' (Ibid. p.77)

Yes. I too have witnessed the unacceptable human cost of careless, unskilled and irresponsible consultation in mental health and have sought to alert people in senior positions to the dangers. Success? None. We have to put this right. The skills of love might help.

*Rogan Wolf
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¹Wallcraft, J. with Read, J. and Sweeney, A. (2003) 'On Our Own Terms: Users and survivors of mental health services working together for support and change', The Sainsbury Centre for Mental Health.