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INTRODUCTION

Mental and behavioural disorders account for 12% of the global burden of disease. The global prevalence of mental and behavioural disorders among the adult population is estimated to be 10% and contributed to four of the ten leading causes of disability. Ten percent of the population across the globe suffers from mental and behavioural disorders till to date and we have derived many of the intervention strategies to reduce the burden of these illness. In spite of these projected figures for the year 2020, 15% of them will become chronic in nature and disabling, adding to global burden and economic loss and loss of years of functioning. There are multiple factors contributing for chronicity and some of them though identified but ineffective interventions have maintained the illness.

As per standard diagnostic classification systems ICD/DSM, list of Chronic Mental Illnesses (CMI) are (a) Pervasive Developmental Disorders (b) Attention Deficit and Disruptive Behavior Disorders; (c) Feeding & Eating Disorder of Infancy or Early Childhood; (d) Elimination Disorders; (e) Other Disorders of Infancy, Childhood, or Adolescence; (f) Schizophrenia & Other Psychotic Disorders; (g) Mood Disorder; (h) Personality Disorders; or (i) Medication-Induced Movement Disorders. From the list can make out striking contributing factors are the developmental issues. Other than development factors which appear later in the course of illness is not been studied effectively. Early identification of these modifiable factors can reduce the burden of the CMI in the population. There are meager available intervention strategies for the persons who have already acquired disability due to chronicity. Scope of this book tries to look at research which is focused on new research methodologies for identifying and diagnosing the epidemiological factors contributing for CMI in the community. It’s also focused on research related to psychopharmacological inventions and interventions for the care of chronic mental illness, disability due to CMI and intervention strategies at mental health institutions, effectiveness of national policies/programmes and its outcome across the countries (South-East Asian, Europe, Australia, USA, Canada, Africa etc.,) in care of CMI, mental health acts across the world in protecting the rights of Persons with CMI. All this issues are analyzed by authors who contribute to this book.

OBJECTIVE OF THE BOOK

Around 18 methodological basis of CMI chapters were included. We asked researchers to submit studies of the changing the scope of intervention strategies, diagnosis and treatment persons with CMI. To look at the epidemiology, factors, prevalence of disability, scope of research in diagnosis/management, and
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implementation of policy strategies of CMI. Were integrated the findings from the individual studies. We believed that research articles in the collection will make significant contributions to a currently under-researched aspect of CMI, and the collection as a whole were set an agenda at global level to guide ongoing re conceptualizations of the individual’s experience and innovative research, practice and care giving in the field of mental health.

Target Audience

The target audiences of this book were composed of professionals and researchers working in the field of mental health including psychiatrists, neurologists, neurosurgeons, psychologists, social workers, psychiatric nursing, psychosocial rehabilitation therapists, mental health counselors, and general physicians. This book will be useful for undergraduates, graduates and post graduates students in the field of mental health. This book will be a referral book for academic purposes in libraries. This will also aims at guiding administrative and policy matters for the care of persons with CMI. We believed all of these audiences will find helpful materials that reinforce and enhance their work.

ORGANIZATION OF THE BOOK

There are 18 chapters in this book and the chapters are grouped into six main sections. The six sections assist the reader to be guided to a specific area of interest because each section is based on a particular theme. The sections are divided as follows: Section 1 contains chapters that are focused on providing in-depth information on chronic Mental illness and rehabilitation. In this section, CMI and Homelessness, CMI in old age home, dumping patients - concern towards management and psychosocial intervention strategies for patients with schizophrenia are discussed in detail and explored within the contexts of CMI. Section 2 examines the CMI and comorbidities especially treatment issues and were also focused management of substance abuse disorder. In Section 3 CMI: family and global burden were emphasized on understanding and management of caregiver’s stress and burden of person with obsessive compulsive disorder. Predictive of expressed emotion, caregiver’s burden and quality of life in CMI, it was also highlighted global burden of mental disorders quality of care and unmet needs for treatment of CMI. In Section 4 chapters were depicted mainly CMI: disabilities and legal issues, for example, disabilities in schizophrenia, CMI in prisons global scenario. Another important chapter for this book is majorly Legal Aspects of CMI were elucidated with current legislature amendment. Section 5 explored with CMI: Child and Adolescents were Consisted of Psychosocial intervention strategies Street Children with Substance Abuse, chronic Mental illness and the changing scope of intervention strategies, Diagnosis and treatment in Child and Adolescent Population. In Section 6, were highlighted with CMI: Advanced treatment strategies were explained, suicide in patients with CMI. Cognitive remediation Therapy in Chronic Schizophrenia. Efficacy of art therapy in patients with Paranoid Schizophrenia. Psychotherapeutic interventions in emotional and behavioural problem with adolescent. The description of each chapter is given below:

Although the work is not free from shortcomings, and while many of those were painstakingly amended, some could not because of the practical constraints attached. I am hopeful that they would be taken up by further researchers.
Section 1: Chronic Mental Illness and Rehabilitation

Chapter 1: Chronic Mental Illness and Homelessness

Homeless individuals are the neglected, dispossessed and disenfranchised section of the society and almost one fourth to one third of them have an underlying serious mental illness. Homeless persons with severe mental illnesses are often the most visible but the most difficult to reach and the most difficult to ignore. The prevalence of mental illness amongst homeless is higher than that compared to the general population. Researchers have theorized various stressors related to homelessness as precipitating factors of mental illness. In the chapter entitled “Chronic Mental Illnesses and Homelessness”, conceptual issues in definition of homelessness, relationship with mental illness, reasons behind, magnitude of problem, difficulties faced by homeless, barriers in accessing health care and possible interventions were discussed. Authors suggested that integration of health resources, co morbid treatment of substance use, social security benefits, continuum of care approach, inter agency coordination and better service delivery can be possible solutions for the ongoing problem. Commitment by government, private sector, social welfare sector, strong political will and integrated efforts to address the problem of homeless persons with mental illness.

Chapter 2: Chronic Mental Illness in Old Age Homes – An International Perspective

Old age is characterized with reduced physical ability, declining mental ability, the gradual giving up of role playing in socio-economic activities, and a shift in economic status moving from economic independence to economic dependence upon others for support. In the chapter were discusses various aspects morbidities during old age with special mention of dementia, depression, anxiety and substance abuse. Author/s mentioned the need to generate data about mental morbidities in larger studies with culture free tools. There is a global movement towards ‘successful’ ageing and a model of care for older adults that focus on maximizing health, wellbeing, and social participation in old age. Further they added that there is also a strong need to generate models of care in old age homes so that the old age homes are not just a shelter for care but provide satisfying quality of life in a home like environment.

Chapter 3: Chronic Mental Illness and Dumping Patients – A Concern towards Management

Chronic mental illness brings a lot of suffering, not only the individual who is suffering from chronic mental illness but the families and caretakers also face discrimination, social stigma and pressure from the society. Many families and caretakers face these pressure and stigma with pride and support the person who is suffering from the mental illness. Most families look for the ways and ideas of getting rid from the patient. The best way to get rid from the problem is dumping the patient in the mental institutes. In this chapter “Chronic Mental Illness and Dumping Patients: a Concern towards Management” shares its concern about the conditions of the dumped patients because of their chronic mental illness. The author/s of the chapter discusses about proper vocational training, job perspectives, proper family counselling and other resources can help the patients’ families and caretakers to take their responsibility for the chronically ill patients.
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Chapter 4: Psychosocial Intervention Strategies in Chronic Mental Illness

Schizophrenia is a chronic, severe, and disabling brain disease. Schizophrenia is found all over the world. The severity of the symptoms and the long-lasting, chronic pattern of schizophrenia often results in disability, and many individuals need ongoing assistance to manage the most basic functions of independent living. The chapter entitled “Psychosocial Intervention Strategies in Chronic Mental Illness” discussed about the psychosocial intervention strategies in chronic mental illness, like individual psychotherapy, cognitive behaviour therapy, cognitive therapy with schizophrenia, behaviour therapy with schizophrenia, group therapy and family interventions were highlighted. In addition to this psychiatric rehabilitation were also discussed with vocational training, social skill training, and community rehabilitation approach. With help of these intervention modalities the utility to prevent frequent hospitalizations and reduces the impact on the individual, family and the economy of the nation as well.

Section 2: Chronic Mental Illness and Comorbidities

Chapter 5: Comorbidity Issues and Treatment in Chronic Mental Illness

Comorbidity refers to presence of one or more additional disorders along with a primary disorder. It affects the prognosis and course of treatment. In the chapter entitled “Comorbidity Issues and Treatment in Chronic Mental Illness” the author discusses about chronic mental illness such as schizophrenia, bipolar disorder and obsessive-compulsive disorder. All these three disorder have a major effect on individual’s life. Anxiety, depression, substance abuse and panic symptoms are common in schizophrenia; hence the clinical picture changes frequently. While the literature suggests that presence of two or three disorders make treatment worse, hence multidisciplinary treatment need to be used. This chapter pointed out few important issues which need to handle by the clinicians. The chapter also talks about the changes in treatment approach. A balanced approach need to be adopted by practitioner which would be helpful for patients. A proper assessment to rule out the other disorder is necessary so that required treatment could be started to maintain the follow up. Majority of the comorbid disorders were identified as phobic disorders, posttraumatic stress and major depression.

Chapter 6: Management of Chronic Mental Illnesses and Substance Use Disorders

Substance use disorder is an accepted complication of chronic and severe mental illness and is associated with serious adverse consequences. Recent evidence regarding the general integrated treatment approach is consistent and positive, but much work remains to be done on the organization and financing of integrated programs. This chapter “Management of Chronic Mental Illnesses and Substance Use Disorders” focuses on the development of basic components of integrated treatment case management, close monitoring, substance abuse treatment, family psychoeducation, rehabilitation, housing, and medications. Despite a number of promising treatments, there is still a long way before we know what treatments work for which groups of dual-diagnosis patients. This problem express further need for homogenized diagnostic criteria for dual diagnosis patients in order for clinicians to identify individuals appropriate for integrated treatment to develop an effective modality to treat this complex population with a diverse range of mental disorders.
Section 3: Chronic Mental Illness – Family and Global Burden

Chapter 7: Understanding and Management of Caregivers’ Stress and Burden of Person with Obsessive Compulsive Disorder

OCD is a neurobiological disorder characterized by the presence of symptoms such as obsessions and compulsions. Accommodation and Expressed emotion plays key roles in interpersonal relationships that exist in the families of those afflicted with mental illness and may affect the treatment. The next chapter entitled “Understanding and Management of Caregivers’ Stress and Burden of Person with Obsessive Compulsive Disorder” aims to understand the processes involved in care giving for those with a Chronic Mental Illness and to develop an effective intervention incorporating methods and strategies that aims at reducing caregiver stress and burden. Psycho education found to be helpful in educating the family about all the relevant aspects of OCD and to determine their role as a caregiver in order to deal with the illness in an effective way. Family intervention beyond the scope of psycho-education programme is required to prepare caregivers to take on the role of care giving more effectively.

Chapter 8: Predictors of Expressed Emotion – Caregiver’s Burden and Quality of Life in Chronic Mental Illness

Family caregivers of persons with chronic mental illnesses are a key support system in our country as well as in most of the nonwestern world. Most caregivers feel burdened when caring for relatives with major psychiatric disorders, as these disorders are unpredictable and long-lasting. Not only caregivers but the patients with schizophrenia and bipolar disorder report disturbed quality of life. In the absence of adequate mental health infrastructure, the family caregivers take multiple roles at providing care for persons with mental illnesses. In this chapter entitled “Predictors of Expressed Emotion, Caregiver’s Burden and Quality of Life in Chronic Mental Illness”, is an empirical study which intends to assess if the expressed emotion perceived by the patients with schizophrenia and bipolar disorder has any effect on their quality of life. Is the burden experienced by the caregivers, has any effect up on their quality of life? To explore these issues, regression was employed to estimate the quantitative effect of the causal variables upon the variable that they influence and the “statistical significance” of the estimated relationships.

Chapter 9: Global Burden of Mental Disorders Quality of Care and Unmet Needs for Treatment of Chronic Mental Illness

Mental disorders are an important cause of long-term disability and dependency. Four of the six leading causes of years lived with disability are due to neuropsychiatric disorders (depression, alcohol-use disorders, schizophrenia and bipolar disorder). Mental illness imposes a huge burden on individuals, families and society. The cost of illness incurred by individuals, employers and governments is enormous. The chapter entitled “Global burden of mental disorders quality of care and unmet needs for treatment of chronic mental illness” aims to critically appraise the way that the burden of disability and premature mortality is apportioned, in WHO’s estimates of global burden of disease, between underlying conditions within groups of disorder, and, specifically, to assess whether these estimates account for the full contribution of mental disorder to mortality and disability. The author also reviewed available evidence for interactions between mental disorders and other health conditions. The implications of these links for the future orientation of health policies, health systems, and services were finally discussed.
Section 4: Chronic Mental Illness – Disabilities and Legal Issues

Chapter 10: Disabilities in Schizophrenia – The Psychosocial and Neurocognitive Perspective

This chapter aims to study different aspects of disability in schizophrenia with specific emphasis on neurocognitive and psychosocial functioning. Schizophrenia is characterized by marked disturbances and abnormalities in the domains of thought, perception, speech, emotion and behavior. The varied symptoms across patients and over time, produces disabilities which is quite different from other disabilities. These disabilities associated with chronic mental illness and especially schizophrenia is more difficult to cope up with due to the associated stigma and care burden. The disability in schizophrenia is mostly observed in occupational, social and interpersonal domains and has been closely related with neurocognitive impairment in schizophrenia. The studies have shown similar opinion on predictive value of neurocognitive functions in different psychosocial functions in schizophrenia. Authors have suggested that research is required which focuses in formulating better management plan and reduce the disability.

Chapter 11: Chronic Mental Illness in Prisons – Global Scenario

The psychiatric morbidity among prison inmates is substantially higher than in the general population. Many people with identifiable psychiatric illness do conflict with the law, often by no fault of their own but because of symptoms of their psychiatric illness and end up in jails. The chapter discusses that prisons are detrimental to mental-health, and the standards of psychiatric care are significantly lower than those for the general public. The burden of psychiatric illness in this vulnerable and marginalized population poses a serious challenge. They recommended for remedial measures to be taken identification of magnitude of problem, preventable causes and treatment with proper compliance and follow-up is needed. Certain remedial measures are to be implemented for a better future of prison and community because ultimately these prisoners will be released from prison and become a part of community. Beginning of reforms is the immediate need as a long journey ahead.

Chapter 12: Legal Aspects of Chronic Mental Illness

The mental health is a part of the general health and has a serious concern in the society. A person who suffers mental illness suffers not only for himself but also would bring about suffering for the people who are not only to the family but to the society at large. In the chapter, legal aspects of chronic mental illness, various issues described like disability and mental illness and its differences in terms of legal issues. The author’s main focus of the chapter was highlighting various admissions procedures, civil rights of patients, Code of Civil Procedure, private rights, economic rights, criminal law and people with mental disorder. The authors were concluded that the fundamental aim of this legislation is to protect, promote and fulfill the rights of the persons with disability, and protecting the human rights and fundamental rights of people with mental disorders.
Section 5: Chronic Mental Illness – Children and Adolescents

Chapter 13: Psychosocial Intervention Studies for Street Children with Substance Abuse

In this chapter author made an attempt to review the literature and describes various interventions available for street children. The current chapter enlists all the intervention activities carried out for this group. The chapter encourages the discussion under the subthemes of concept of street children, prevalence of street children, reasons for on the street, street life and ways of coping with stress, substance abuse among street children, intervention carried out with street children and substance abuse, suggestions and conclusion. The author discussed psychosocial intervention that are well proven in the general population and effectively tried with street children. It was further suggested that the governments, nongovernmental organizations and other service providers should utilize the psychosocial intervention in their activities to bring change among street children with substance abuse.

Chapter 14: Chronic Mental Illness and the Changing Scope of Intervention Strategies – Diagnosis and Treatment in Child and Adolescent Population

Childhood forms an important phase in the development period of life during which one develops physically, emotionally, socially, intellectually and morally. Chronic and severe mental health problems in children impact the overall development of the child thereby leading to significant and lifelong disability. In this chapter included two important CMI in children mainly Schizophrenia and Bipolar Mood Disorder and discussed the clinical features, course, outcome and treatment strategies. Authors discussed the importance of early interventions. In the clinical dimension, the discussion on the early intervention directed to the first break, with special attention to the period of untreated psychosis, may represent the construction of care instruments and strategies useful in the assistance to the psychopathology of child and adolescents population.

Section 6: Chronic Mental Illness – Advanced Treatment Strategies

Chapter 15: Advanced Intervention Strategies for Suicide in Patients with Chronic Mental Illness

This chapter focuses on various aspect of suicide including neurobiological factors like neurotransmitters, neural circuits, genetic and epigenetic factors, response on pharmacotherapy and newer generation novel treatment strategies and various psychosocial factors. Chronic mental illnesses are common to find in routine clinical practice and suicide is one of the dreaded outcomes. There is rising trend of research on suicide in patient with psychiatric illness in last decade. With such rising trend, it requires specific attention in all domains among public service providers along with specific targeted population of patients suffering from psychiatric illness. A social and public health response to suicide is crucial and should complement a mental health response. Researches stated that twenty-eight countries have established national suicide prevention programs dedicated to suicide research and prevention. However, there is still a need to expand suicide prevention research and anti-suicidal strategies. But due to limited resources especially in under-develop or developing nation, the accessibility to all is still a concern by service providers.
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Chapter 16: Cognitive Remediation Therapy in Chronic Schizophrenia

Cognitive impairments are recognized as one of the most ubiquitous features of schizophrenia. Cognitive deficits appear to play a large role in how patients with schizophrenia function in their everyday lives. In the chapter, the role of cognitive deficits in schizophrenia was discussed with special reference to extraordinary difficulty with communication, motivation, self-care, and establishing and maintaining relationships with others. Patients with schizophrenia are often additionally treated with supportive psychotherapy, behavioral management, or social skills training as required. However, the efficacy of these adjunct therapies could be limited in presence of marked cognitive deficits. They further added that remediation programs may be drafted targeting the overall neuropsychological functioning in a comprehensive way. Along with neuropsychological functions, more stress may be put on social and vocational functioning and a combined rehabilitation package should be made in future.

Chapter 17: Efficacy of Art Therapy in Treating Patients with Paranoid Schizophrenia

Paranoid Schizophrenia is a chronic mental illness, which is characterized by the presence of delusion of persecution, suspicious, distrusting, guarded, reserved, tensed, and also sometimes hostile or aggressive. The therapeutic relationship between patient and the professional is integral to the recovery process and the outcome. Good communication on the part of health care professionals is an essential element in developing the strong practitioner-patient relationship necessary in the treatment of schizophrenia. The third chapter entitled describes a case of paranoid schizophrenia in which behavioral therapy, supportive therapy and family therapy along with art therapy is used for such patients. Art therapy proves to be an advance intervention strategy to work with patient as an advanced intervention strategies and treatment. As mentioned by the author the art therapy, even without any formal interpretation during the therapy session communicated a lot of material in the therapy sessions which help the flow of therapy process leading to a successful result. This case reassures the efficacy of art therapy and assures its effectiveness as tool for the management of schizophrenia with medication and family therapy for a complete biopsychosocial intervention.

Chapter 18: Psychotherapeutic Interventions in Emotional and Behavioral Problems with Adolescents

In this chapter the authors discussed the importance of integrated psychotherapeutic approaching improving self-confidence, feeling of security and improving self-esteem, self-respect, confidence and emotional well—being of an adopted adolescent with emotional and behavioral problems. The effectiveness of yoga in improving emotional well-being and anger management was also discussed. The main focus of the chapter was on cognitive behavior techniques adjunct with yoga for stress inoculation and anger management in adolescents.

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