

CHAPTER 2

Extent of Mental Health Nursing

Chapter Outline

Introduction

- 2.1 The Characteristics and Extent of Mental Health Nursing,
- 2.2 The Role and Function of the Mental Health Nurse in Diverse Environments,
- 2.3 Elements influencing the degree of nursing practice
- 2.4 The idea of normal and abnormal behaviour.

NATURE OF MENTAL HEALTH NURSING



■ INTRODUCTION

Hildegard Peplau's theory of mental health nursing emphasizes the importance of the therapeutic relationship between nurse and patient as a fundamental instrument for patient care. This relationship evolves through four distinct phases: orientation, identification, exploitation, and resolution. The framework encompasses the utilization of various roles, such as that of a stranger, teacher, counsellor, and leader to guide the patient through problem-solving, promoting independence, and improving their

psychological well-being. Peplau's work revolutionized psychiatric nursing by shifting the focus from custodial care to interpersonal and therapeutic interactions.

■ LEARNING OBJECTIVES

Upon completion of this unit, students are expected to:

1. Articulate the characteristics and extent of mental health nursing,
2. Examine the responsibilities and purposes of mental health nursing,

3. Define the notions of normal and abnormal behavior.

“Nursing has evolved significantly from a mere occupation to a recognized profession in the 20th Century. As we near the 21st Century, additional advancements will be documented and shared in Cyberspace, with the Internet serving as one of the primary channels for this exchange. Connecting nurses along with their information and expertise across international boundaries will undoubtedly accelerate the development of the nursing profession even more swiftly in the coming century”.

– Hildegard Peplau

2.1 THE CHARACTERISTICS AND EXTENT OF MENTAL HEALTH NURSING

The essence of mental health nursing involves delivering tailored care to individuals experiencing mental illnesses, with an emphasis on enhancing overall well-being, preventing disorders, and aiding recovery through therapeutic relationships, holistic assessments (bio-psycho-social), crisis intervention, medication management, and advocacy across diverse settings like hospitals, communities, and schools, requiring deep empathy and knowledge of human behaviour and research. It's an emotionally demanding yet rewarding field that evolves with new research, focusing on resilience, recovery, and empowering individuals.

1. **Holistic Approach:** Mental health nurses take into account the biological, psychological, social, and spiritual aspects of an individual's well-being while delivering care.

2. **Therapeutic Relationship:** Patient is crucial for effective care and recovery.

3. **Advocacy and Education:** Mental health nurses advocate for patients' rights, educate them about their conditions and therapeutic alternatives, enabling them to engage in their healthcare.

4. **Evidence-Based Practice:** Mental health nursing relies on research and evidence to guide practice and ensure quality care.

5. **Adaptability:** The field is constantly evolving, requiring nurses to adapt to new technologies, treatment approaches, and changing societal needs.

Hildegard Peplau's work established mental health nursing as a therapeutic interpersonal process focused on the nurse-patient relationship, not just a series of tasks. She defined the nature of this relationship through four overlapping phases – orientation, identification, exploitation, and resolution – where the roles of the nurse shift from stranger to a teacher, counsellor, and finally, to an active leader, guiding the patient toward independence and improved mental health.

Various dimensions of mental health nursing as articulated by Peplau:

1. **Therapeutic interpersonal process:** Nursing is a process that is both therapeutic and interpersonal, the main objective is to assist the patient in fulfilling their needs and enhancing their overall health and well-being through a collaborative experience.

2. **Nurse-Patient Relationship:** The connection between the nurse and the patient is the central element of practice. It is designed to be a collaborative partnership, where the nurse and patient work together towards common goals.
3. **Mutual maturation:** As the relationship develops, both the nurse and the patient experience growth. The nurse gains experience and therapeutic skills, while the patient learns and matures in response to the care they receive.
4. **Patient-centred and active participant:** The theory emphasizes that the patient is an active contributor to their own care, working to satisfy their own needs. The nurse's role is to facilitate this process, not to be the sole provider of care.

Four phases of the relationship: The dynamic nature of the relationship is described as evolving through four sequential and overlapping phases:

1. **Orientation:** The initial meeting where the nurse and patient are strangers, and the nurse begins to gather data to assess the requirements of the patient and recognize the issue and articulate the problem.
2. **Identification:** The patient begins to identify with those who can help them. The requirements of the patient become more evident, and a strategy is created to help the patient meet those needs.
3. **Exploitation:** The patient uses the services of the nurse and the care plan, drawing on the nurse's

expertise to address their needs. Facilitate the available resources and relationship with the nurse to address the problem.

4. **Resolution:** The relationship ends as the requirements of the patient are fulfilled, and they gain emotional and psychological independence. Thereby the nurse-patient relationship is terminated.

Nurse's roles: Peplau described the nurse's role as a fluid one, shifting across the relationship progression.

Seven distinct nursing roles: The nurse's function shifts throughout the phases, taking on roles such as:

1. **Stranger:** Initially meets the patient as a stranger.
2. **Resource person:** Provides information and guidance.
3. **Teacher:** Educates the patient on their condition and self-care.
4. **Counsellor:** Provides emotional support and guidance.
5. **Surrogate:** Helps the patient understand their situation and feelings, sometimes as a surrogate for another person.
6. **Leader:** Guides the patient toward setting and achieving goals.
7. **Technical expert:** Applies technical skills and knowledge as needed.

Functions & Responsibilities of Nursing Personnel

1. **Assessment & Diagnosis:** Evaluating mental states, behavioural problems, and psychiatric disorders.

2. **Treatment:** Administering medications, providing psychotherapy, and implementing recovery-focused plans.
 3. **Advocacy:** Protecting patients' rights and reducing stigma associated with mental illness.
 4. **Crisis Management:** Stabilizing patients during acute episodes and intervening in emergencies.
 5. **Rehabilitation:** Helping individuals regain skills for daily living and function optimally.
 6. **Focus on therapeutic communication:** Peplau's theory underscores the significance of therapeutic communication in aiding patients to comprehend their health challenges and engage actively in their recovery process.
 7. **Objective of patient autonomy:** A central aim of this methodology is to empower patients to achieve maximum independence by enhancing their problem-solving abilities and fostering self-sufficiency.
 8. **Holistic approach:** It stresses the collaboration between the nurse and the patient, fostering a foundation of trust.
- to the field of contemporary psychiatric-mental health nursing, providing a framework for therapeutic interventions.
2. **Applicability across specialities:** Although the interpersonal relationship theory has its roots in psychiatric nursing, its principles can be applied to a range of nursing specialties, as illustrated by the example of bladder function training provided by the National Institutes of Health.
 3. **Research and practice integration:** The theory connects nursing practice with research, as the information gathered during the goal-setting process contributes to new nursing knowledge.
 4. **Patient-centred care:** It aligns with the modern emphasis on patient-centred care by emphasizing the unique requirements of the patient and engaging them in the decision-making process.

Implications for modern mental health nursing

The Theory of Therapeutic Relationship also impart and build the following aspects:

1. **Foundation for psychiatric nursing:** Peplau's contributions are essential

2.1 SCOPE OF MENTAL HEALTH NURSING

Peplau's theory articulates the principles of mental health nursing as a therapeutic nurse-patient relationship built on communication through four phases (Orientation, Identification, Exploitation, Resolution) to help patients achieve growth, solve problems, and gain independence, with nurses acting as strangers, teachers, resources, leaders, and more, concentrating on the requirements of the patient and enabling self-awareness for improved well-being.

The concept of theory also Focus on:

1. Reducing anxiety,
2. Improving self-awareness, and
3. Promoting patient empowerment through shared goals and communication.

According to the theory of Peplau, Scope in Nursing Practice includes:

1. **Problem Solving:** Using the relationship to address specific health issues, from physical ailments to emotional distress.
2. **Patient Education:** Teaching patients about their conditions and self-care.
3. **Emotional Support:** Providing a safe space for expression and validation.
4. **Facilitating Independence:** Guiding patients to manage their own lives and well-being.

In essence, Peplau expanded mental health nursing to a dynamic process where the nurse guides the patient through structured interactions to achieve personal growth and improved mental health the **other different scope of Nursing is described below:**

1. **Direct Patient Care:** This includes assessing patients' mental health, developing and implementing treatment plans, administering medications, providing therapy, and managing crises.
2. **Case Management:** Coordinating care, linking patients with resources, and advocating for their needs in various settings.

3. **Community Mental Health Nursing:** Delivering care and support within the community, encompassing preventive programs, rehabilitation, and crisis intervention.

Mental Health Nursing represents a distinct area of nursing dedicated to the treatment of individuals experiencing mental illness, emotional distress, and behavioural issues. Mental health nurses operate in diverse environments, such as inpatient psychiatric facilities, community mental health centres, and educational institutions, among others.

The scope of mental health nursing involves promoting mental wellness, preventing disorders, and treating mental illnesses across all ages, using holistic, patient-centred care in diverse settings like hospitals, communities, and schools. Nurses provide direct care (assessment, medication, therapy), manage cases, educate patients/families, lead crisis interventions, and act as advocates, with roles expanding from basic care to advanced practice (like nurse practitioners who can prescribe) for conditions ranging from serious mental health conditions related to substance use disorders.

Main Goal include: Enhance mental well-being, avert mental illnesses, provide treatment for individuals with current disorders, and rehabilitate health while elevating the quality of life.

In these contexts, the scope of mental health nursing can be categorised in three different perspectives as below:

1. **Core Functions**
 - i. **Assessment & Diagnosis:** Evaluating mental, emotional, and physical health to identify needs.

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- ii. **Treatment & Intervention:** Administering medications, providing psychotherapy, crisis management, and rehabilitation.
 - iii. **Patient and Family Education:** Instructing on coping strategies, stress management techniques, and health promotion.
 - iv. **Case Management:** Coordinating services, managing complex care plans, and connecting patients with resources.
 - v. **Advocacy:** Empowering patients, reducing stigma, and ensuring culturally sensitive care.
- 2. Settings & Specializations**
- i. **Hospitals:** Acute care, psychiatric units, ensuring safety and stability during crises.
 - ii. **Community:** Schools, homes, primary care centres, focusing on prevention and long-term support.
 - iii. **Specialized Areas:** Child & adolescent, geriatric, forensic, military, and substance use disorder care.
- 3. Levels of Practice**
- i. **Generalist:** Holistic care in various settings (e.g., staff nurse).
 - ii. **Expanded/Advanced (PMH-APRNs):** Autonomous roles like Nurse Practitioner, Clinical Nurse Specialist, providing psychotherapy, managing complex cases, and prescribing medication.
- In light of the diverse functions of Mental Health Nursing, the Scope of Nursing can be categorized into three primary roles, as outlined below:
- 1. Basic Roles**
 - 2. Extended Roles**
 - 3. Expanded Roles**
- 1. The fundamental responsibility** of mental health nursing is to deliver specialized care to individuals experiencing mental illnesses, focusing on assessment, treatment, support, and recovery, by building therapeutic relationships, administering medication, offering counselling, educating families, and managing crises, aiming to promote overall well-being and help patients manage conditions like depression, anxiety, schizophrenia, and substance abuse.
- Important Functions:**
- 1. Assessment & Diagnosis:** Evaluating patients' mental and physical states, identifying needs, and contributing to diagnoses.
 - 2. Treatment Planning:** Developing personalized care plans that address unique challenges.
 - 3. Medication Management:** Administering psychiatric drugs, monitoring effects, and ensuring correct usage.
 - 4. Therapeutic Support:** Providing counselling, crisis intervention, and leading group/individual therapy.
 - 5. Patient & Family Education:** Teaching about conditions, treatments, and coping strategies.

6. **Safety & Risk Management:** Identifying and overseeing the risks associated with self-injury or potential harm to others.
7. **Advocacy & Stigma Reduction:** Helping patients navigate the system and cope with mental health stigma.
8. **Health Promotion:** Encouraging healthy lifestyles and self-care activities.

Responsibilities:

Major Responsibilities identified as:

- i. Building trust through strong therapeutic relationships.
- ii. Collaborating within a multidisciplinary team.
- iii. Providing care across various settings (hospitals, communities, schools).
- iv. Supporting recovery and helping patients achieve their personal goals.

In essence, mental health nurses are vital for supporting individuals and families through the complexities of mental health, focusing on holistic care – body, mind, and social welfare.

2. The extended role of mental health nursing goes beyond basic care to include advanced practice in diverse settings, focusing on health promotion, prevention, complex case management, therapy (individual/family/group), education, advocacy, and leadership, often as Advanced Practice Nurses (APNs), managing conditions across the lifespan in hospitals, clinics, schools, and

homes, emphasizing holistic recovery, stigma reduction, and community integration.

Different Aspects of the Extended Role:

- i. **Advanced Clinical Practice: Psychiatric Mental Health Nursing.**
- ii. **Mental Health Nurse Practitioner (PMHNP):** Diagnosing, prescribing, providing therapy, and managing complex mental health conditions.
- iii. **Specialization:** Focusing on specific populations (paediatrics, geriatrics, substance use) or modalities (trauma-informed care).

Therapeutic Interventions:

- i. **Psychotherapy:** Delivering individual, family, and group therapies.
- ii. **Skill Building:** Helping patients develop coping mechanisms, social skills, and emotional regulation.

Community & System-Level Roles:

1. **Community Psychiatric Nurse:** Working in schools, primary care, and homes for early intervention and support.
2. **Consultant:** Advising other departments (ER, medical wards) on psychiatric symptoms and behavioural challenges.
3. **Advocacy:** Championing patient rights, fighting stigma, and ensuring patient voices are heard.

Education & Leadership:

Patient & Family Education: Teaching about mental health, conditions, and treatments.

Research: Conducting studies to improve nursing theory and practice.

Leadership: Managing resources, coordinating care, and influencing curriculum.

Holistic & Preventative Care:

Health Promotion: Preventing illness and promoting comprehensive wellness.

Holistic Assessment: Acknowledging the physical, psychological, and social requirements, while recognizing the individual as a whole.

Place of their Work:

Inpatient psychiatric units,

- Outpatient clinics,
- Crisis centres,
- Schools,
- Community mental health centres,
- Emergency departments, and
- Even in patients' homes.

3. The expanded role of mental health nursing moves beyond traditional inpatient care into diverse community settings, focusing on prevention, early intervention, and holistic wellness through roles like Nurse Practitioner (PMHNP), Case Manager, Forensic Nurse, Telehealth Specialist, and Educator/Researcher, integrating mental and physical health, managing chronic conditions, advocating for patients, and leveraging advanced skills in areas like psychopharmacology and consultation to meet evolving health needs.

Key Areas of Expansion:

Primary Care Integration: Psychiatric nurses serve as essential connectors, conducting screenings, collaborating with primary care teams, and enabling referrals to incorporate mental health into overall medical care.

Community-Oriented Care: Providing care in schools, homes, and community centres for early intervention, support, and rehabilitation, reducing reliance on hospitals.

Advanced Practice Positions: Clinical Nurse Specialists (CNS) and Nurse Practitioners (Psychiatric Mental Health Nurse Practitioner) offer autonomous care, including diagnosis, medication management, and psychotherapy.

Specialized Fields:

Forensic Nursing: Working with justice-involved individuals.

Geropsychiatric Nursing: Focusing on mental health needs of the elderly.

Maternal Mental Health: Addressing risks during prenatal and postpartum periods.

Case Management & Advocacy: Coordinating complex care, advocating for patients, and connecting them with resources.

Technology & Research: Utilizing telehealth for remote care and participating in research to advance mental health practices.

Education & Consultation: Training other healthcare workers and providing specialized consultation.

Driving Factors for Expansion

Shift to Community Care: Recognizing the benefits of treating individuals in their familiar environments.

Increased Mental Health Awareness: Growing understanding of mental health's impact on overall well-being.

Technological Advances: Enabling new modes of care delivery like telehealth.

Economic & Policy Changes: Need for cost-effective, efficient, and comprehensive care.

These expanded roles empower nurses to improve autonomy, enhance patient outcomes, and distribute healthcare services more effectively.

Specialized Roles: This includes roles like psychiatric clinical nurse specialists, forensic psychiatric nurses, and telehealth nurses, each with specific areas of expertise.

Education and Prevention: Mental health nurses are essential in informing the public about mental health issues, diminishing stigma, and encouraging early intervention.

Important Activities in Mental Health Nursing:

- i. **Assessment and Diagnosis:** Evaluating patients' mental health status, identifying symptoms, and collaborating with other professionals to identify mental health disorders.
- ii. **Formulating Treatment:** Creating personalized care strategies that may

encompass medication management, therapeutic approaches, and additional interventions.

iii. Therapeutic Interventions:

Providing various forms of therapy, such as Individual or group counseling, cognitive behavioral therapy, and various other methodologies.

iv. Crisis Intervention: Responding to and managing mental health emergencies, including suicidal thoughts or episodes of psychosis.**v. Health Promotion and Education:** Educating patients, families, and the community about Mental well-being, encouraging effective coping strategies, and diminishing stigma.**vi. Rehabilitation and Recovery:** Helping individuals regain their independence, manage their symptoms, and participate fully in their lives.**2.2 THE ROLE AND FUNCTIONS OF MENTAL HEALTH NURSES ACROSS DIFFERENT SETTINGS**

Mental health nurses are essential in fostering well-being, preventing mental disorders, and delivering care to individuals experiencing mental health issues in diverse environments. Their responsibilities encompass evaluation, treatment planning, medication management, therapy, education, and crisis intervention. They work as part of interdisciplinary teams in diverse settings like hospitals, clinics, community centers, and even in patients' homes.

Distinct responsibilities and duties of mental health nurses across various environments:

- i. **Inpatient psychiatric units:** Mental health nurses deliver direct care to patients, administer medications, observe patients' conditions, execute therapeutic interventions, and provide education to patients and their families. Additionally, they are instrumental in crisis management and in maintaining a safe environment.
 - ii. **Community mental health centers:** Here, nurses focus on early intervention, prevention, and rehabilitation. They conduct assessments, provide individual and group therapy, manage medications, offer case management, and connect patients with community resources.
 - iii. **Psychiatric home care:** These nurses visit patients in their homes to provide support, education, and medication management. They also assess the home environment for safety and collaborate with the patient's family to promote recovery and well-being.
 - iv. **Forensic psychiatry settings:** Mental health nurses in this region engage with individuals who have interacted with the legal system as a result of mental health challenges. They assess risk, provide treatment, and work with legal professionals to ensure appropriate care and assistance.
 - v. **Outpatient clinics: Outpatient clinics: Nursing professionals in outpatient clinics** conduct assessments, provide therapy, manage medications, and educate patients on self-care strategies.
 - vi. **Schools and educational settings:** Mental health nurses in schools offer assistance to students facing mental health difficulties, perform assessments, and work together with educators and parents to create a supportive learning environment.
 - vii. **Correctional facilities:** Mental health nurses assess and treat inmates with mental health conditions, manage medications, and work with correctional staff to meet the distinct requirements of this demographic.
 - viii. **Nursing homes and assisted living facilities:** In these settings, Mental health nurses assess and address the psychological well-being requirements of elderly individuals, including those with dementia and other age-related mental health conditions.
 - ix. **General hospital settings:** Mental health nurses may work in general hospitals, providing consultation and support to patients experiencing mental health crises or those with co-occurring physical and mental health conditions.
 - x. **Specialty areas:** Some mental health nurses specialize in areas like addiction treatment, eating disorders, or the mental health of children and adolescents.
- In all situations, nurses focused on mental well-being adhere to a number of fundamental principles:

Comprehensive care: Meeting the physical, emotional, social, and spiritual requirements of the individual.

Therapeutic relationship: Establishing a relationship characterized by trust and support with the patient.

Individual empowerment: Assisting individuals in gaining control over their health and overall well-being.

Collaboration: Collaborating within a multidisciplinary team to deliver holistic care.

Advocacy: Safeguarding the rights and interests of individuals experiencing mental health conditions.

2.3 ELEMENTS INFLUENCING THE DEGREE OF NURSING PRACTICE

Several factors influence the extent of nursing practice, encompassing individual, environmental, and organizational aspects. These include individual skills and knowledge, the work environment, and the availability of resources and support. Effective communication, collaboration, and the capacity to adjust to emerging technologies are equally essential.

Individual Factors:

- **Knowledge and Skills:** Nurses require a robust base of theoretical knowledge and practical skills to deliver proficient care. This encompasses comprehending and utilizing the nursing process, which consists of assessment, diagnosis, planning, implementation, and evaluation.

- **Experience:** Years of experience in a specific area of nursing can significantly impact a nurse's competency and ability to handle various situations.
- **Motivation and Attitude:** A nurse's motivation and attitude towards their work, particularly in specific areas like family nursing care, can influence their performance.
- **Personality & Coping:** Optimistic outlooks and negative coping styles affect resilience; adaptability helps manage stress.
- **Burnout & Well-being:** Fatigue, anxiety, and depression from high-stress environments decrease productivity and care quality.
- **Evidence-Based Practice (EBP):** Nurses need to be able to integrate research findings into their practice to improve patient outcomes. Factors like lack of knowledge, time constraints, and difficulty understanding research can hinder the implementation of EBP.

Environmental Factors

Work Environment: The work environment plays a crucial role. Factors like adequate staffing, supportive leadership, teamwork, and a positive atmosphere can enhance the quality of care.

- **Workload and Stress:** High patient acuity, excessive workload, and lack of resources can result in stress and exhaustion, adversely affecting nursing practice.

- **Technology:** The increasing use of advanced technology in healthcare requires nurses to adapt to new equipment and learn new skills.
- **Social Factors:** Social factors like poverty, disease outbreaks, and community-based care influence the type and level of care required.
- **Patient Acuity:** Higher patient acuity levels require nurses with specialized skills and knowledge

Organizational Factors:

- **Supportive Leadership:** Supportive leadership from nurse managers enhance the work environment and improve standard of care.
- **Resources and Staffing:** Adequate staffing and access to necessary resources are essential for nurses to provide quality care.
- **Communication and Collaboration:** Effective communication and collaboration between nurses, doctors, and other healthcare professionals are crucial for coordinated care.

Interpersonal & Social Factors

- **Stigma:** Societal stigma against mental illness affects nurses and patients.
- **Social Support:** Perceived social support helps manage mental workload.
- **Patient-Nurse Relationship:** Building therapeutic bond is crucial but challenging.

Systemic & Policy Factors:

- **Legislation & Ethics:** Codes of ethics, legal standards, and policies guide practice.
- **Healthcare Delivery:** De-institutionalization, technology, and changing patient needs impact service delivery.

2.4 THE IDEA OF NORMAL AND ABNORMAL BEHAVIOR



Fig. 2.1: Stages of mental health

- The terms “normal” and “abnormal” are employed to characterize specific behaviours, collections of behaviours, or behavioural patterns, in addition to thoughts, feelings, and traits that may be rooted in biological or psychological factors. The concepts of normality and abnormality are shaped by personal perceptions and societal standards, along with variables such as age, gender, circumstances, and context. Furthermore, culture plays a significant role in influencing the interpretation of normalcy and abnormality. Even within a singular culture, the implications of these two terms evolve in response to changing societal norms.
- The concept of “normality” refers to behaviours that are typical or anticipated within a community of individuals. It signifies the state of

being within the bounds of what is considered normal or expected. Exhibiting adaptability, practicality, and social acceptability are traits indicative of typical behaviour. Such behaviour facilitates individuals in effectively engaging with their environment and fulfilling their everyday requirements.

- Conversely, abnormality refers to behaviours that deviate from the norms or expectations of a specific group of individuals. Such behaviours are considered abnormal, dysfunctional, and socially unacceptable. When an individual exhibits abnormal behaviour, it often leads to distress for themselves or others, hampers their ability to function effectively in their environment, and complicates their capacity to manage daily responsibilities. For example, it is not typical for individuals to desire their own demise, weep themselves to sleep nightly, or hear voices that are inaudible to others.
- Abnormal behaviour is characterized as dysfunctional, indicating that it disrupts normal routines or daily activities. Individuals suffering from mental illnesses may experience such agitation, disorientation, or confusion that they find it challenging to care for themselves, participate in typical social interactions, or excel in their professional endeavours. For example, a person may abandon their family, job, and the fulfilling life they previously led. If these individual lacks alternative means of financial support, such behaviour could be classified as abnormal.

Maier & Maier (1985) identified four fundamental types of abnormal behaviour:

1. Engaging in actions that are detrimental to oneself or others, irrespective of one's own best interests.
2. A diminished connection to reality.
3. Emotional reactions that are unsuitable for the individual's circumstances.
4. Erratic behaviour, characterized by sudden changes in conduct.

- **Normal behavior** is generally defined as behavior that conforms to societal expectations, is functional and adaptive, and allows individuals to meet their daily needs and interact effectively with their environment.

- **Abnormal behavior**, on the other hand, deviates from these norms, is often dysfunctional, and can cause distress or harm to the individual or others. These concepts are relative, influenced by cultural and situational factors, and can vary over time.

- **Definition of Abnormal Behavior:** Abnormal behavior is typically defined as behaviors falling outside anticipated social norms. For instance, most would easily classify the act of Cindy dancing in the middle of a class to an imaginary playlist as abnormal. It should be noted, however, that what is deemed normal is subjective and not easily defined. Furthermore, it can be culturally and socially biased, meaning definitions may differ even within societies.

Characteristics of Normal Behavior

- **Conformity to societal norms:** Normal behavior aligns with the accepted standards and expectations of a particular culture or group.
- **Functionality and adaptability:** Normal behavior allows individuals to function effectively in their daily lives, adapt to new situations, and meet their basic needs.
- **Emotional well-being:** Normal behavior is associated with a sense of emotional stability and the state of well-being encompasses the capacity to handle stress and effectively cope with challenges.

Characteristics Abnormal Behavior

- **Deviation from norms:** Abnormal behavior differs significantly from what is considered typical or expected within a given context. Deviation from the societal norm or expectation is directly related to the abnormality label. In this regard, culture and age are essential factors in determining what affects social norms.
- **Dysfunction:** Abnormal behavior may disrupt a person's capacity to operate efficiently in everyday life, affecting their employment, interpersonal relationships, or personal care.
- **Distress and harm:** Abnormal behavior results in considerable anguish for the individual undergoing it or for those in their vicinity. An action is characterized as abnormal if it distresses the person. In other words, someone suffering from

obsessive-compulsive disorder (OCD), for example, has compulsive actions that relieve anxiety.

- **Cultural relativity:** The definitions of what is deemed normal or abnormal can differ significantly between cultures and across different historical eras. Deviance from Norms.
- **Statistical Rarity:** Abnormal behavior can also be equated with those acts that are statistically infrequent. For example, a very low IQ is a case of statistical rarity, often diagnosed as an intellectual disability.
- **Maladaptive Behaviors:** Behaviors that lead to either an injury or a significant loss, such as losing a job or social respect, are known as maladaptive. It could be either physical or social harm to an individual and damage to the well-being of that individual.

Examples of normal and abnormal behavior

- **Normal:** A person who attends work regularly, maintains healthy relationships, and experiences a range of emotions appropriately.
- **Abnormal:** A person who experiences persistent and crippling anxiety that interferes with their capacity to leave their home.

Important Considerations regarding typical and atypical conduct

- **Subjectivity:** Establishing the parameters of normality and abnormality can be subjective and influenced by individual perspectives and biases.

- **Context:** It's crucial to consider the context in which behavior occurs, as some behaviors might be considered normal in one situation but abnormal in another.
 - **Diagnosis:** In clinical settings, The identification of atypical behavior constitutes a multifaceted process that necessitates careful assessment and evaluation.
- (mental, physical, social health), focusing on adaptability, function, and satisfaction, while **abnormal behaviour**, often identified using criteria like the "4 Ds" (Deviance, Distress, Dysfunction, Danger), significantly deviates from norms, causes suffering, impairs daily life, and may indicate a mental disorder, with cultural context always crucial for interpretation.

Causes of Abnormal Behavior

- **Relief from Distress:** Some behaviors develop to cope with anxiety or distress. For instance, an individual who is prone to anxiety regarding germs wash their hands repeatedly to calm their fear.
- **Lack of Thought or Feeling:** Abnormal behaviors may also result from a lack of typical emotional responses or thought processes. A person who has no feeling of embarrassment may make very inappropriate statements without any internal filter to stop him.
- **Seeing the World Differently:** Hallucinations can significantly alter behavior. In this case, there are situations where persons hear voices, which are real to them, because of an ailment like schizophrenia.

Understanding the criteria as well as the causes of abnormal behavior helps to identify and classify it correctly before taking the path of offering suitable interventions to individuals who may need some support.

The World Health Organization broadly defines normal behaviour as encompassing holistic well-being.

Normal Behaviour (WHO Perspective)

- **Comprehensive Well-being:** A condition characterized by total physical, mental, and social well-being, rather than merely the lack of disease.
- **Adaptability & Function:** The capacity to manage everyday life, fulfil requirements, and interact effectively with the environment.
- **Self-Perception:** Positive self-esteem, realistic self-perception, and a healthy capacity for growth.
- **Satisfying Relationships:** Ability to form meaningful connections with others.

Abnormal Behaviour (WHO/Clinical Perspective)

Abnormal behaviour is often characterized by significant deviations, often identified by these criteria:

- **Deviance:** Behaviour that violates societal norms or is statistically rare (e.g., extreme preoccupation with food like in eating disorders).
- **Distress:** Significant personal suffering or unhappiness.

- **Dysfunction/Maladaptation:** Impairment in daily functioning, social roles, or work.
- **Dangerousness:** Behaviour that poses a risk to oneself or others (e.g., self-harm in eating disorders).

Key Considerations according to WHO

- **Context is Key:** What's normal depends heavily on culture, age, gender, and situation (e.g., a toddler undressing vs. an adult).
- **Spectrum:** Normal and abnormal aren't strict categories but exist on a continuum, with mental disorders representing severe forms of abnormality.
- **Role of WHO:** The WHO focuses on defining mental health and identifying disorders (like eating disorders) that cause significant risk or impairment, guiding clinical practice and public health.

QUESTIONS AND ANSWERS

I. Answer the following questions

- (1) Write down the characteristics and extent of Mental Health Nursing.
- (2) What are the various dimensions of Mental Health Nursing as articulated by Hildegard Peplau?
- (3) Briefly describe the Role of Nurses as per Peplau.
- (4) What are the Functions and Responsibilities of Nursing Personnel related to Mental Health?

- (5) Write down the Implications for modern Mental Health Nursing.

II. Write the short notes on following:

- (1) Scope of Mental Health Nursing.
- (2) Role and Functions of Mental Health Nurses' across different settings.
- (3) Elements influencing the degree of Nursing Practice.
- (4) Normal and Abnormal behaviour.

III. Choose the correct answer from the following options against each statement:

1. Orientation, identification, exploitation, and resolution are the steps for:

- i. Therapeutic relationship,
- ii. Bio-logical Relationship,
- iii. Social Relationship,
- iv. Health care Team Relationship.

Answer: i.

2. Theory of mental health nursing is the concept of:

- i. Florence Nightingale,
- ii. Virginia Handerson,
- iii. Dorothea Orem,
- iv. Hildegard Peplau.

Answer: iv.

3. Hildegard Peplau: Known as the

- i. "Mother of Psychiatric Nursing",

- ii. "A pioneer of Transcultural Nursing",
- iii. "Creator of the Self-Care Deficit Theory",
- iv. "Developer of the Theory of Human Caring".

Answer: i.

4. Integration of biological, psychological, social, and spiritual aspects of an individual's well-being is known as:

- i. Holistic Approach,
- ii. Evidence-Based Practice,
- iii. General Care Approach,
- iv. Adaptation.

Answer: i.

5. The Scope of Mental Health Nursing can be categorized into three primary roles as:

- i. Basic Roles, Extended Roles, Expanded Roles,
- ii. Basic Roles, Extended Roles, Leadership Roles,
- iii. Basic Roles, Extended Roles, Extra-ordinary Roles,
- iv. Basic Roles, General Roles, Expanded Roles.

Answer: i.

6. Advocacy & Stigma Reduction are important functions of Nursing Personnel related to:

- i. Mental Health Nursing,
- ii. Physical Health,
- iii. Direct Patient Care,

- iv. Social Service.

Answer: i.

7. Major Responsibilities identified in Mental Health Nursing includes:

- i. Building trust through strong Interpersonal relationships,
- ii. Building trust through Evidence-based practice,
- iii. Building trust through strong Negative relationships.
- iv. Building trust through Biological relationships.

Answer: i.

8. Advanced Clinical Practice related to Psychiatric Mental Health Nursing is one of the aspects of:

- i. Extended Role,
- ii. Expanded Role,
- iii. Basic Role and
- iv. Regular Nursing Services.

Answer: i.

9. The extent of Community Psychiatric Nurses' Role includes:

- i. Working in schools, primary care, and homes for early intervention and support.
- ii. Working in schools, homes for early intervention and support.
- iii. Working in primary health centre, hospital and homes for early identification of cases,
- iv. Working in schools, primary

care, and homes for early intervention and support.

Answer: i .

10. The expanded role of mental health nursing moves beyond traditional inpatient care into diverse community settings, focusing on:

- i. Prevention, early intervention, and holistic wellness through roles like Nurse

Practitioner (PMHNP),

- ii. Promotion of health, early intervention, and holistic wellness through roles like Nurse Practitioner (PMHNP),
- iii. Early intervention, and holistic wellness through roles like Nurse Practitioner (PMHNP),
- iv. Holistic wellness through roles like Nurse Practitioner (PMHNP),

Answer: i.