

# The mental health telenovela - Paulann Grech

We are sending out mixed messages

Comment

Opinion

Health

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We are sending out mixed messages, argues Paulann Grech. Photo: Shutterstock

Monitoring the local news for mental health related stories has become quite an entertaining pastime, even if morbidly so. One can wait with bated breath for the next dramatic revelation, be it mice in cracks or outdated practices. I would not be far off the mark by saying that the saga has taken on a telenovela feel. All that's missing is a dinosaur in the attic and a knight in shining armour.

For those who are more familiar with the local mental health scenario, be it individuals who need care and their significant others, or staff members, this telenovela is pr

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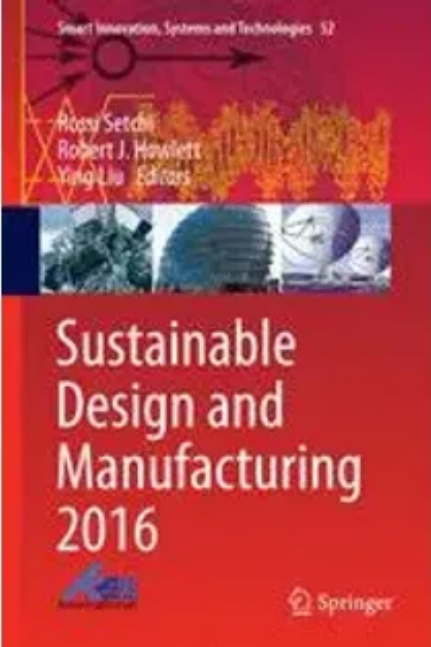
irritating and worrying as it is captivating.

Primarily, because this particular mental health flavoured can of worms is not a fresh one but many years past its shelf life.

Were the ceiling cracks caused by a sudden thunderbolt hurled by a piqued god who decided to take revenge on our poor hospital? Hardly so. Did the Legionella bacteria army suddenly decide to attack our water system out of sheer boredom? Unlikely.

Along similar lines, did the service provision problems materialise in a matter of days, in mushroom cloud fashion? You've got it – another no sir. These issues were likely to be caused by a build-up of societal, environmental, small-p and largish-p political factors. It feels a tad surreal now that everyone is speaking about these problems as if suddenly discovered in eureka fashion.

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The truth is that these issues have always been around, and trying to get to the bottom of them was similar to chasing after a soap bubble – visible but quite difficult to pin down and burst. Soap bubbles are destined for an ultimate burst and this is what seems to have happened in relation to the local mental health scenario – a spectacular monstrosity of a burst.

But let us step off this mental health carousel that has gained so much momentum and engage in some reflection. Within the crowd chanting 'beware of the wolf', an actual wolf (or two) may also be present.

Let us be frank – it is unfair to speak about long-known issues as if they are newly discovered, when over the years some may have been in a better position than most to listen actively to complaints and raise national awareness. Admittedly, due to the aforementioned issues, perhaps hands were tied.

This is not a finger pointing attempt, but a subtle suggestion to steer away from the Mother Theresa act as it may come across as tasteless.

Speaking of suggestions related to genuineness, here comes another one – it is more of a heartfelt plea – please do not consider a career in mental health unless you truly feel that it is your vocation.

Using the mental health setting as a place of retirement, escape or springboard will lead to relational problems and possible personal distress. Kindly select another route and leave this path to the dedicated and hardworking – several examples of whom are already present in the system.

It is indeed a relief that these mental health issues are out in the open and can no longer be shoved under the carpet.

However, it is to be noted that this is not a matter of preferring one brand to another, if only one is currently available. This means our doomed psychiatric hospital is the only one we currently have, with no imminent alternatives. Interestingly, it is common knowledge that whilst the move of psychiatric care is towards community services, some conditions still merit an admission to a psychiatric hospital.

Can you imagine how painful and confusing it would be for someone who has been following this horrific telenovela to find himself in a position where he is in need of an inpatient admission to our psychiatric hospital?

“ It is relief that these issues are out in the open and can no longer be shoved under the carpet

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We are sending out mixed messages. On one hand, national anti-stigma campaigns encourage people to seek a diagnosis and treatment for mental health conditions, and on the other hand berate the current physical and operational structure of the only governmental psychiatric service provider in Malta.

This is not to say we should not speak up about the existing problems but the resulting situation is a dangerous one.

It has to be acknowledged that the Mental Health Strategy cannot be fully implemented successfully overnight and a new acute hospital will also take time to be constructed and finished properly in a manner fit for psychiatric care (no bare, white-walled rooms with blue doors please).

Similarly, the full effectiveness of community care can only be achieved if a range of adequately staffed community services is available – otherwise downsizing the hospital will probably lead to an increase in mental illnesses, neglect, crime and homelessness, as happened in other countries that closed down psychiatric hospitals without having a broad and robust community care system in place. Short cuts can be chaotic so let us hope we will not see any in relation to mental health strategy plans.

Solutions? It would be quite presumptuous of me to fire off specific solutions.

Certainly though, in this dangerous situation that has now been created, one thing is clear – interim (but safe) measures need to be in place as we cannot wait years to revamp the whole system. This is not a time for professional power struggles, well-written policies that do not really infiltrate practice or formal endless meetings in posh boardrooms. There are many talented and highly intelligent figures working in the mental health sector and not necessarily at managerial level only.

A grassroots, pragmatic hands-on, action-based consultation approach in the clinical environment itself may be an effective start, even if just to enhance motivation and ownership of any changes to take place within the system. Staff (at all levels and representative of all professions) as well as service users may be the ones who have that tacit knowledge regarding the latent everyday challenges as well as potential immediate solutions – knowledge that only one immersed in the field can acquire.

A new hospital would be great but if we truly believe that a building will be the magic bullet that targets all the mental health related challenges that we are facing, then dream on.

It has to be remembered that when patients were relocated from Villa Franconi to Mount Carmel Hospital, the 'ta Frankuni' term, and all the stigma and problems were transferred to the new hospital.

Let us be careful not to allow history to repeat itself. Let us be pragmatic and do whatever it takes to help those who need mental health services imminently.

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