# Mental Health Consultation

The use of mental health professionals as consultants offers significant potential for eventual reduction in the amount and severity of mental illness in some segments of the population. This belief is based on the recognition that other professional workers, such as teachers, public health nurses, and social workers, are becoming more aware of psychological factors in social, educational, and family adjustment. Consequently, more agency clients are being identified as psychological casualties, and the perceived volume of emotional problems assumes large proportions.

Often the first reaction of professionals in other disciplines is to refer clients to whatever psychiatric treatment facilities are available in the community. These facilities usually lack sufficient staff to cope with the demands. Furthermore, many clients are not really interested in or motivated for formal psychotherapy. Therefore, the teacher, public health nurse, social worker, or other agency professional will be the key person in many therapeutic transactions. The skill and effectiveness of these workers will determine where some of their clients, especially those in crises, will end up on the continuum of mental health. In most instances, a mental health consultant will be the only professional from whom workers in other disciplines will receive assistance with the mental health problems of their clients.

### Public Health Monograph No. 69

An Introduction to Mental Health Consultation. By Vard Kazanjian, Sherry Stein, and William L. Weinberg. Public Health Monograph No. 69 (PHS Pub. No. 922), 13 pages. U.S. Government Printing Office, Washington, D.C., 1962. Not for sale.

The accompanying summary covers the principal contents of Public Health Monograph No. 69. The authors are mental health consultants with the conMental health consultation is evolving into a specialty in its own right, as a growing body of special knowledge and a system of unique skills and techniques are being developed. Although similar in some respects, consultation is distinguished from related practices, such as psychotherapy, supervision, administration, and collaboration. Use is made of current concepts of consultation, particularly those of Dr. Gerald Kaplan, Dr. I. N. Berlin, and Dr. Clarice H. Haylett.

Phases of consultation are conceptualized as: (a) preparatory, which explores a prospective consultee's potential interest in consultation; (b) beginning, in which the consultant and the consultee decide to work together and establish a formal or informal contract; (c) problem solving, in which the work problems and concerns of the consultee are discussed and dealt with dynamically in the consultation process; and (d) termination, which, hopefully, leaves the door open for further work.

One of eleven principles, developed to facilitate communication with the consultee, reduce his resistance to the process, and hasten development of a positive consultation relationship, is that whenever possible, the consultant should let the consultee solve his own problem and then support the consultee's action if it is dynamically sound. For example, a probation officer's description of his interaction with an acting-

sultation service of the mental health services division, San Mateo County Department of Public Health and Welfare, Calif. Mr. Kazanjian and Mr. Weinberg are clinical psychologists, and Mrs. Stein is a psychiatric social worker.

Official agencies and others directly concerned may obtain single copies from the Public Inquiries Branch, Office of Information, Public Health Service, Washington 25, D.C. Copies will be found also in libraries of professional schools and major universities and in selected public libraries. out delinquent indicated that his charge was testing a previously explicit and reasonable limit set by him. After discussing the case with the consultant, the officer decided on an action which indicated appropriate use of his authority. But then he expressed ambivalence about his action, wondering if it might be psychologically damaging to the boy. The consultant might state: "It's sometimes hard to stand firm, but clearly defined boundaries should be very helpful to this boy."

Consultants are cautioned to avoid interference with consultee's presentation, hear consultee out, identify core topic, and adapt the consultation process to the consultee. Among a number of pitfalls which may heighten resistance or disrupt the consultation process is that which occurs when the consultant conveys the notion or assumes the position of expertness in an area of the consultee's professional competence when it is different from his own.

A consultation vignette indicates what a consultation session with a speech therapist consists of when the consultation relationship has reached the problem-solving phase. The vignette illustrates the consultant's working hypotheses and the relatively restricted path he follows.

# **Conditionally Released Mental Patients**

A recent Federal policy change is expected to encourage release of mental hospital patients who are able to live outside of hospitals but have inadequate means of support. The Social Security Administration notified State public assistance agencies in June 1962 that persons on conditional release from mental hospitals are no longer precluded from federally supported public assistance. Formerly, conditionally released patients who otherwise were eligible for such public assistance funds were denied the aid on the grounds that they were still "inmates."

About 135,000 persons may be on conditional release from mental hospitals by the end of 1962, according to SSA estimates. Of these, 20,000–30,000 may be eligible for oldage assistance, medical assistance for the aged, or aid to the permanently and totally disabled. About two-thirds of those eligible will be over age 65.

Kathryn D. Goodwin, director of the Bureau of Family Services, SSA, pointed out that the shortage of outside community facilities and funds keeps some patients in mental hospitals even though they no longer need or respond to institutional treatment. Under prolonged institutional care, these patients become increasingly estranged from relatives, friends, and community life. Having little opportunity to make independent decisions, they become more and more dependent on others. Conditional release would greatly benefit such patients, and it would also free services for the use of others who are more acutely ill, Miss Goodwin said.

To claim Federal matching funds for aiding conditionally released mental patients, State welfare agencies will first establish working agreements with State agencies providing institutional care for the mentally ill. The specific responsibilities of the agencies will be described in these agreements. The Social Security Administration is urging States to include provisions that will safeguard the quality of services that patients on release will receive and assure careful joint planning for each patient considered for release.

## **PUBLICATION ANNOUNCEMENTS**

Address inquiries to the publisher or sponsoring agency.

Community Health Services. The case of the missing mileposts. Public Affairs Pamphlet No. 180–S. By Berwyn F. Mattison, M.D., and T. LeFoy Richman. 1962; 20 pages; 25 cents. Public Affairs Pamphlets, 22 East 38th St., New York 16.

Content and Dynamics of Home Visits of Public Health Nurses. Part 1. By Walter L. Johnson and Clara A. Hardin. 1962; 146 pages; \$3. The American Nurses' Foundation, Inc., 10 Columbus Circle, New York 19.

Schools of Professional Nursing. 1962; 39 pages. Committee on Careers, National League for Nursing, 10 Columbus Circle, New York 19.

Health Education in Practice. By Hugh R. Leavell, M.D., Dr.P.H. Decision-Making by Individuals. By Irwin M. Rosenstock, Ph.D. Health Education Monographs No. 11. 1961; 36 pages; \$1. Order from C. M. Hodge, 21 Center St., Chatham, N.Y. (Make checks payable to Health Education Monographs.)

Epidemiology of the Arthropod-Borne Viral Encephalitides in Kern County, California, 1943–1952. University of California Publications in Public Health, Vol. 4. By W. C. Reeves and W. McD. Hammon in collaboration with W. A. Longshore, Jr., H. E. McClure, and A. F. Geib. 1962; 257 pages; \$6. University of California Press, Berkeley 4.

Diagnosis: Epilepsy. A guide for parents. By Jacqueline T. Leonhard. 1962; 39 pages. Parents Committee on Epilepsy, Family Health Association, Inc., 3300 Chester Ave., Cleveland 14, Ohio.

Quadrennial Report of the Director of the Pan American Sanitary Bureau, Regional Office for the Americas of the World Health Organization, 1958–1961. Official Documents No. 43. July 1962; 89 pages. 1501 New Hampshire Ave. NW., Washington 6, D.C.

#### World Health Organization

WHO publications may be obtained from the Columbia University Press, International Documents Service, 2960 Broadway, New York 27.

Arterial Hypertension and Ischaemic Heart Disease. Preventive aspects. Report of an Expert Committee. WHO Technical Report Series No. 231. 1962; 28 pages; 30 cents; Geneva.

Chemotherapy of Cancer. First report of an Expert Committee. WHO Technical Report Series No. 232. 1962; 52 pages; 60 cents; Geneva.

Expert Committee on Filariasis (Wuchereria and Brugia) Infections. Report. WHO Technical Report Series No. 233. 1962; 49 pages; 60 cents; Geneva.

Expert Committee on Trachoma. Third report. WHO Technical Report Series No. 234. 1962; 48 pages; 60 cents; Geneva.

Age-Grouping Methods in Diptera of Medical Importance. With special reference to some vectors of malaria. WHO Monograph Series No. 47. By T. S. Detinova. 1962; 216 pages; \$5.25; Geneva.

Road Trafic Accidents. Epidemiology, control, and prevention. Public Health Papers No. 12. By L. G. Norman. 1962; 110 pages; \$1.25; Geneva.

Aspects of Water Pollution Control. A selection of papers prepared for the Conference on Water Pollution Problems in Europe, Geneva, 1961. Public Health Papers No. 13. 1962; 115 pages; \$1.25; Geneva.

The Role of Public Health Officers and General Practitioners in Mental Health Care. Eleventh report of the Expert Committee on Mental Health. WHO Technical Report Series No. 235. 1962; 54 pages; 60 cents; Geneva.

Planning Organization and Administration of a National Health Laboratory Service. Third Report of the Expert Committee on Health Laboratory Services. WHO Technical Report Series No. 236. 1962; 46 pages; 60 cents; Geneva.

Requirements for Biological Substances. 7. Requirements for poliomyelitis vaccine (oral). Report of a study group. WHO Technical Report Series No. 237. 1962; 29 pages; 30 cents; Geneva.

The Teaching of Genetics in the Undergraduate Medical Curriculum and Postgraduate Training. First Report of the Expert Committee on Human Genetics. WHO Technical Report Series No. 238. 1962; 19 pages; 30 cents; Geneva.

Internationally Acceptable Minimum Standards of Medical Education. Report of a study group. WHO Technical Report Series No. 239. 1962; 59 pages; 60 cents; Geneva.

Principles Governing Consumer Safety in Relation to Pesticide Residues. Report of a meeting of a WHO Expert Committee on Pesticide Residues held jointly with the FAO Panel of Experts on the Use of Pesticides in Agriculture. 1962; 18 pages; 30 cents; Geneva.

International Digest of Health Legislation. Vol. 13, No. 2. 1962; pages 187-378; \$2.75; Geneva.

WHO and Mental Health, 1949–1961. 1962; 48 pages; 30 cents; Geneva.

Maternal and Child Health in the USSR. Report prepared by the participants in a study tour organized by the World Health Organization. Public Health Papers No. 11. 1962; 71 pages; \$1; Geneva.

#### **SEC Technical Reports**

A limited number of the following reports are available from the Robert A. Taft Sanitary Engineering Center, Public Health Service, Cincinnati, Ohio. Order by number.

Advanced Waste Treatment Research-1. Summary report, June 1960-December 1961. W62-9. May 1962; 65 pages.



Goals for the Sixties in Health Facility Construction. PHS Publication No. 930-F-1; reprint from The Modern Hospital, March 1962; by Jack C. Haldeman, M.D.; 5 pages.

This article recommends a major shift in emphasis in the health facilities construction program and lists goals that will assist in planning to meet health facility needs. The goals stressed are modernization; a well-balanced program of urban health facilities; additional facilities for long-term care and for community-based mental health and general hospital services; increased hospital research; and development of regional medical centers.

**Ticks of Public Health Importance** and Their Control. PHS Publication No. 772, part X; 1962; by Harry D. Pratt and Kent S. Littig; 42 pages; 30 cents.

Information on the public health importance of ticks and their biology, identification, and control is reviewed. Pictorial keys, a checklist of the species of ticks in the United States, a host-parasite table, insecticidal recommendations, and selected references are included.

Fluoride Drinking Waters. A selection of Public Health Service papers on dental fluorosis and dental caries; physiological effects, analysis and chemistry of fluoride. *PHS Publication No.* 825; 1962; edited by *F. J. McClure*; 636 pages; \$3.50.

Reproduced in this volume are 127 reports related to water fluoridation research conducted by Public Health Service personnel and consultants, originally published in various scientific journals.

The collection covers a wide range of epidemiologic, laboratory, and clinical investigations which have established fluoridation as a public health procedure for the control of dental caries.

The compilation of reports is

grouped according to such major investigative areas as the relation of natural fluoride waters to dental health, the control of dental caries by water fluoridation, topical fluoride treatment for dental caries control, and quantitative analysis and chemical reactions of fluoride in teeth.

Public Health Service Grants and Awards by the National Institutes of Health. Summary tables for the total extramural program, fiscal year 1961. *PHS Publication No. 883*, *pt. III; 1962; 384 pages; \$1.* 

Funds of more than \$440 million reflecting NIH support in strengthening research in medical schools, universities, and hospitals; in developing research manpower in the medical and biological sciences; and in stimulating research in previously neglected areas of medical interest are itemized.

Summary tables provide detailed breakdowns by type of award, sponsoring NIH program, State, and recipient institutions. Analysis tables give comparative data on distribution of the awards.

**Public Health Service Film Catalog.** *PHS Publication No.* 776; 1962; 78 *pages*; 45 cents. Annual revision of list of films available from the film library, Communicable Disease Center, Public Health Service.

Hill-Burton Publications: An annotated bibliography. PHS Publication No. 930-G-3; 1962; 20 pages; 25 cents.

This annotated bibliography lists and summarizes approximately 100 publications issued by the Division of Hospital and Medical Facilities in recent years. Only publications still considered up to date are included.

Arrangement of the bibliography conforms to a newly initiated plan to bring about uniformity and standardization of the Division's published material. Hereafter the publications prepared by the Division will carry the imprint "Hospital and Medical Facilities Series Under the Hill-Burton Program." Seven categories comprise the series, and the appropriate category will be noted on the cover. The categories are: A—R egulations; B—Community Planning; C—Organization and Administration; D—Design and Equipment; E—Research and Demonstration; F—Reports and Analyses; G— Bibliography.

A numbering system has also been developed which will identify the sequence in which these publications are issued. In this first annotated bibliography, however, only a few publications carry the new series number. Others will be renumbered as revisions are made.

Chickenpox. PHS Publication No. 173 (Health Information Series No. 38); revised 1962; leaflet; 5 cents, \$2 per 100. Describes the disease and gives symptoms and treatment. Suggests that patients, especially adults, see a physician because of similarity of symptoms of chickenpox and smallpox.

The Civil Defense Emergency Hospital. PHS Publication No. 948; 1962; leaflet. Explains briefly the Civil Defense Emergency Hospital: its components and intended use. Gives storage and operational requirements, describes hospitals purchased and prepositioned to date, and discusses those scheduled for the future.

This section carries announcements of new publications prepared by the Public Health Service and of selected publications prepared with Federal support.

Unless otherwise indicated, publications for which prices are quoted are for sale by the Superintendent of Documents, U.S. Government Printing Office, Washington 25, D.C. Orders should be accompanied by cash, check, or money order and should fully identify the publication. Public Health Service publications which do not carry price quotations, as well as single sample copies of those for which prices are shown, can be obtained without charge from the Public Inquiries Branch, Public Health Service, Washington 25, D.C.

The Public Health Service does not supply publications other than its own.