Who's in the lions' den?

The community's perception of community care for the mentally ill

Geoffrey Wolff, Soumitra Pathare, Tom Craig and Julian Leff

Most long-stay patients discharged from psychiatric hospitals under community care policy are being accommodated in suburban communities. The communities' attitudes have a major bearing on the success of this policy. A census of perceptions of psychiatric services was conducted in two areas prior to the opening of long-stay supported houses for the mentally ill. Many respondents (37%) had a negative perception of psychiatric treatment in hospital. Most (82%) had heard of community care policy but few (29%) knew about the imminent opening of supported houses for the long-term mentally ill in their own street. Most respondents (66%) were against the closure of psychiatric hospitals and many saw it as a cost cutting exercise. The majority agreed with the idea of long-stay patients being discharged into smaller units in the community although a substantial minority (20%) thought it would have a bad effect on the local community. An overwhelming majority of respondents (91%) thought it was important for local residents to be given information about new mental health facilities in their neighbourhood. Respondents were worried that patients would not get adequate support and that they might be dangerous. If community care policy is to succeed, attention needs to be paid to the community's opinions and desire for information about local services.

Most long-stay patients discharged from psychiatric hospitals under community care policy are being accommodated in houses in suburban communities (Dayson, 1993). Usually, these community homes have been established as unobtrustively as possible and without public consultation, mainly because 'normal' householders do not declare their disabilities in advance but also for fear of provoking hostile attitudes towards the facilities and because of the belief in a 'normalisation' ideology which assumes that if patients are treated normally, they will behave normally.

The attitude of the community may well affect patients' rehabilitation and social integration. Many people get their information about psychiatric services and community care policy from the media and it is likely that their attitudes are, in part, shaped by this. In the Christmas of 1992,

Ben Silcock was severely mauled after climbing into the lions' den at London zoo (The Daily Telegraph, August 5th, 1993). Concern for the lack of care for the mentally ill grew. An editorial in the Evening Standard, 'A lack of real care' (August 12th, 1993) accused the Secretary of State for Health, Virginia Bottomley, as having "contrived to vandalise" London's hospitals. It described care in the community policy as "discredited". It quoted Mrs Bottomley as stating that "the pendulum had swung too far in one direction".

There have been many reports recently of people with psychiatric problems and severe mental illness harming others. These cases, especially that of Christopher Clunis, were widely reported in the media (e.g. Newsnight, BBC2, June 30th, 1993; The Daily Telegraph, August 5th, 1993) and led to new guidelines from the government.

Reports expressed both fear of and sympathy for the mentally ill. The perception of dangerousness of the mentally ill is symbolised by sensational cases such as that of Christopher Clunis (North East Thames & South East Thames Regional Health Authorities, 1994). The perception of the neglect of and sympathy for the mentally ill is symbolised by the case of Ben Silcock in the lions' den. Although the failures and shortcomings of the implementation of community care policy are clearly expressed, the remedy is seen as a slowing down of hospital closure until community care can be delivered effectively (with tighter control and increased funding) rather than a swing of the pendulum back to institutional care. However, the community's attitude has a major bearing on the longterm success of the policy.

The study

West Lambeth Community Care (NHS) Trust has been responsible for implementing the closure of Tooting Bec Hospital. As a part of resettlement of long-stay patients, supported group homes providing a high quality of care and a high level of staffing have been opened. Prior to the opening of two of these houses a census of 305 immediate neighbours living on the same streets as these houses was carried out in both areas. The interviews were conducted by three researchers (two psychiatrists and a research psychologist).

The interview consisted of questions dealing with knowledge of psychiatric hospital care; knowledge of the shift to care in the community; attitude to community care policy; and opinion about the need for education. Subjects were administered the 'Community Attitudes to the Mentally Ill' (CAMI) inventory (Taylor & Dear, 1981).

Findings

Knowledge of psychiatric hospital care

Seventy per cent of respondents knew somebody who had been in a psychiatric hospital and 52% had visited a psychiatric hospital. Many respondents (37%) had a very negative view of psychiatric hospitals and typically described them as 'terrible' and 'horrible'. Several respondents cited the film One Flew Over the Cuckoo's Nest as an influence on their opinions. Others described the system as 'abusive' with people being "drugged up...drugs being pumped into people and being beaten up". The system is often seen as racist by black people: "I feel dubious when black people go into those places. They may get the wrong treatment. Those that I know of and those that I've read about die in those kind of places." Even those with a positive opinion (29%) had many reservations: "I think they do a...good job actually. I have a view that psychiatric medicine is quite primitive and that most of the job is study and experimentation". Thirty four per cent remained neutral.

Knowledge of the shift to care in the community

Most respondents (82%) knew of the policy to close psychiatric hospitals and move patients into the community. The majority of respondents (61%) got most of their information from the media. Less than half (38%) knew of any local community care plans. Only 29% knew about the planned supported houses in the street.

Opinion of the policy to close psychiatric hospitals and move patients into the community

The majority of respondents (66%) disagreed with the policy to close psychiatric hospitals. A further 15% were uncertain about the policy. The policy was seen by many of those who disagreed as a cost cutting exercise. Some viewed the policy as dangerous: "It's just to make the life of the government a lot easier. They don't have to fork out so much money and it's left to the individual community. They won't get the treatment they need, and they may be a danger to themselves and a danger to community. Most probably won't get better. If anything, they'll get worse."

Many respondents believed that the policy resulted in increasing numbers of homeless mentally ill: "There's no net for them, and correspondingly I assume that there's been an increase in vagrancy and crime and people living in unspeakable conditions." Others commented that in London, there is no real sense of community anyway in many places: "I think it's terrible, because you must only rehabilitate people into the community if there's definitely a community there waiting to receive them." Even those who agreed with the principle expressed grave doubts about the idea in practice: "It's good in theory but rather bungled in practice and it's under funded and ill thought out."

The idea of discharging patients into the community

Most respondents (71%) agreed with the idea of discharging patients into smaller units in the community. Respondents who agreed usually qualified their view, saying that it was only a good idea if the patients received appropriate support: "Not without lots of help. I think it sounds a good idea but I think it's got to be properly managed. You've got to have support to fall back on."

Respondents who disagreed (11%) expressed concerns about dangerousness. A few thought it was 'unkind' or unfair on the patients if they had been in hospital a long time and had made it their home.

Respondents who were uncertain about the idea (17%) had reservations about issues such as what support they will receive and about dangerousness: "As long as it's done properly, as long as there is enough support". Another said "As long as they don't kill someone... but it doesn't matter if someone is running around shouting all day, as long as they don't hurt anybody."

Effect on the community

Few respondents (20%) thought that discharging patients into smaller units in the community would have a bad effect. Respondents who thought it would have a bad effect commented on the burden on the community; other people not wanting it; a drop in house prices; worries about safety of children and general fear: "I think it can cause resentment and fear if it's badly handled. I think it's something that has to be handled sensibly, and certainly I think it's something that's best done with the cooperation of

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people rather than just doing it and then picking up the pieces when it goes wrong. There are things that people who have no knowledge of mental illness would find difficult to handle and behaviours that may be unusual, and not necessarily problematic in themselves but because people aren't used to them."

Respondents who thought it would have no effect (35%) commented on the anonymity and transience of the local community. A minority of respondents (22%) thought it would have a good effect. A typical comment is as follows: "It could quite have an impact, it could be positive in terms in general education and bringing youngsters up to realise there are people with special needs and not hide them away like in the Victorian days in isolated areas, and it's probably very good for the people themselves, to become more independent". A further 24% said they didn't know whether it would have a good or a bad effect.

Opinion about the need for education

Fifty four per cent expressed willingness to offer help to local mental health facilities. The vast majority of respondents (91%) thought that it was important for local residents to be given information if respondents with mental illness were to move into the community. Respondents mainly wanted to know whether the patients would be given adequate support and whether or not they would be dangerous.

Comment

A surprisingly high percentage of respondents knew somebody who had been in a psychiatric hospital. Many respondents had visited psychiatric hospitals but a substantial proportion had a negative attitude toward them. Fifty two per cent agreed that: "Our mental hospitals seem more like prisons than like places where the mentally ill can be cared for"; 32% remained neutral and only 16% disagreed. However most saw mental hospitals as necessary: 73% said they would encourage a friend or relative to go into a mental hospital if they experienced a mental illness.

These results reveal pervasive negative attitudes to psychiatric hospital care. Much opinion came from the media. However, even if people had visited a psychiatric hospital, their opinion remained negative. The public image of psychiatry and psychiatric hospitals is clearly tarnished!

The majority of respondents (82%) had heard of community care policy. However, although knowledge of general policy was high, it was interesting that only 38% of respondents knew of

any local community care facilities and that only 29% knew about the imminent opening of supported houses in their own street.

Many respondents (66%) objected to hospital closure. Hospital closure is often seen as a cost cutting exercise on the part of the government. Thus a pervasive negative attitude to psychiatric hospital care was coupled with the widespread belief that they are necessary and with much scepticism about their closure.

There was general agreement (71%) with the principle of care for the mentally ill in supported houses in the community. However, many people were concerned that patients would not have adequate support and there was concern about aggressive behaviour. Many people were in favour of increased funding of services. The majority of respondents (72%) disagreed with the statement "there are sufficient existing services for the mentally ill" and most (86%) agreed with the statement "more tax money should be spent on the care and treatment of the mentally ill".

An overwhelming majority of respondents (91%) believed that local residents should be given information when new mental health facilities opened up in their area. It is difficult to justify ignoring the overwhelming demand by local residents for information about new facilities as the success of the community care program ultimately depends on the mentally ill being accepted into the community.

If lack of knowledge or information fuels these negative attitudes, then the integration of discharged patients may well be facilitated by an educational campaign centred around new facilities. The question of whether such information will actually change attitudes remains unanswered. Indeed, the possibility that giving information to residents will result in more negative attitudes (or the rejection of new facilities) may well be a factor in the secrecy which surrounds the siting of new facilities. Another factor may be the issue of confidentiality and the possibility that drawing attention to patients may further stigmatise them.

So far, attempts to provide education to communities have had mixed results. Some authors have found education ineffective (Cumming & Cumming, 1957; Gatherer & Reid, 1963) yet others have found it effective (Nunnally, 1961). However, there has not, as yet, been a controlled scientific evaluation of an educational campaign centred around a specific facility.

The authors are currently evaluating the effect of an educational campaign in the vicinity of one of these supported houses to determine whether attitudes can be changed in a positive direction and whether patients' social functioning can be improved.

Conclusion

Psychiatric services and community care policy clearly have a tarnished image. If community care policy is to succeed in the long term, attention needs to be paid to the community's opinions and desire for information about local services.

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