4
Mental Well-being – Healthy Mind

## Health Management and Social Care (Secondary 4-6)

Health Management and Social Care Booklets

The design of the HMSC curriculum rests on the notion of the interconnectedness of the various levels at which phenomena related to health and sickness, well-being and ill-being, and personal and community care are to be understood. The curriculum aims to enable students to explore all of these levels as well as the relationships between them. The different levels can be interpreted as the individual, the family, the peer group, the community, the institutional setting, society, the nation and the world (Figure 1).

Figure 1	The Various Levels and Essential Questions of HMSC
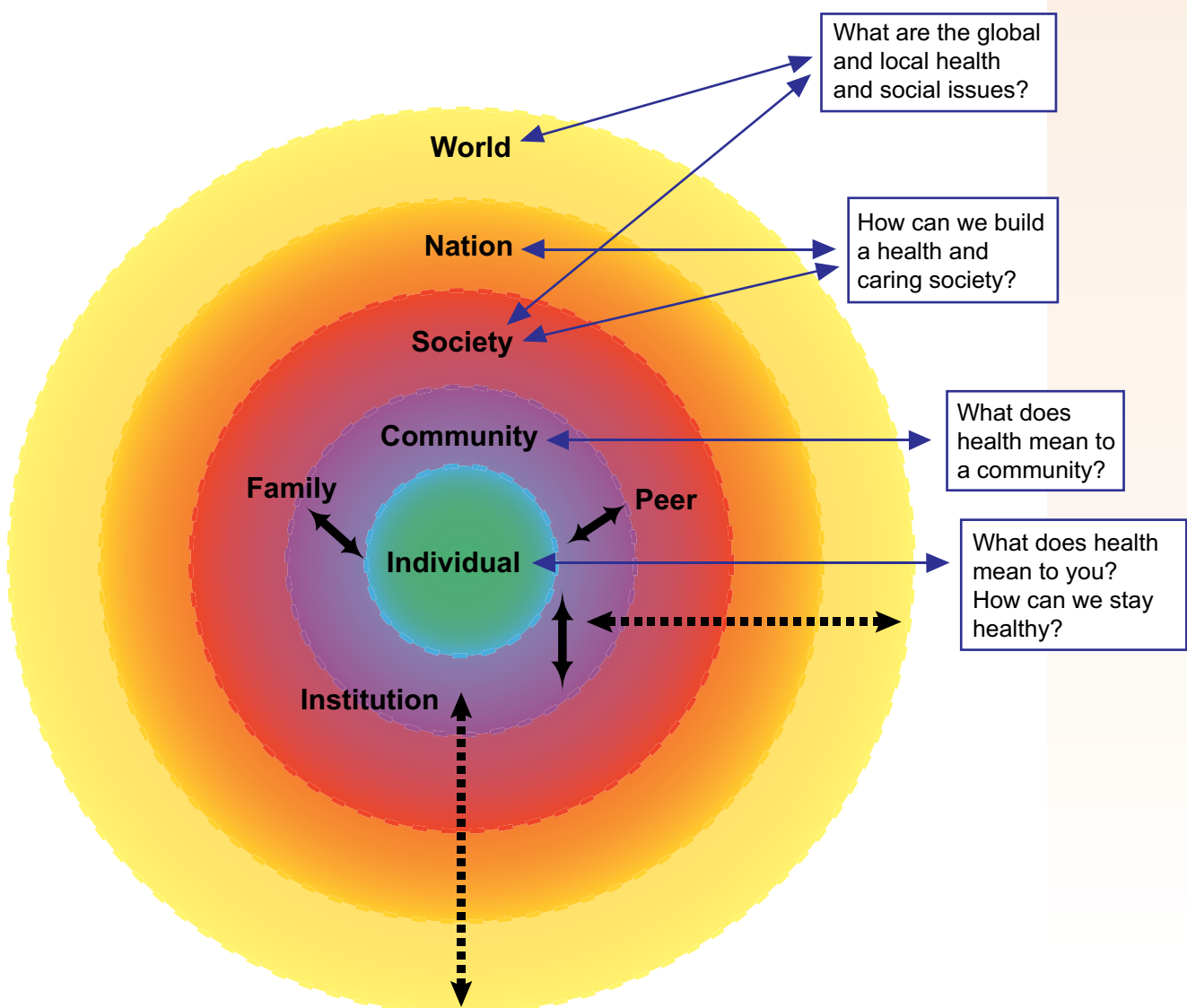
This part includes 19 booklets of learning and teaching reference materials for teachers. The topics and information in these booklets are selected and organized based on the five essential questions from various levels mentioned in the curriculum design in Chapter 2 of the Health Management and Social Care Curriculum and Assessment Guide (Secondary 4-6)(2007). The booklets facilitate teachers to develop an overall framework of HMSC and identify the key concepts of the curriculum so that their students will be more able to critically assess the relevant issues. Details of these booklets are as follows:

Levels	Essential Questions	Booklets	
Individual, Family and Peer	What does health mean to you?	1	Personal Needs and Development across Lifespan
		2	Health and Well-being
	How can we stay healthy?	3	Physical Well-being - Healthy Body
		4	Mental Well-being - Healthy Mind
		5	Social Well-being - Inter-personal Relationship
Community	What does health mean to a community?	6	Healthy Community
		7	Caring Community
		8	Ecology and Health
		9	Building a Healthy City
Society	How can we build a healthy and caring society?	10	Health Care System
		11	Social Welfare System
		12	Medical and Social Care Professions
		13	Health and Social Care policies
		14	Social Care in Action
Local and Global Societies	What are the local and global health and social issues?	15A	Health and Social Care Issue - Ageing Population
		15B	Health and Social Care Issue - Discrimination
		15C	Health and Social Care Issue - Domestic Violence
		15D	Health and Social Care Issue - Addiction
		15E	Health and Social Care Issue - Poverty

Each booklet will start with some essential questions. The expected learning outcomes in terms of knowledge, skills, value and attitude as well as the content outline will be listed as an overview. Teachers are advised to adapt and flexibly use the materials based on the school or community situation, background of students, interest, learning skills and the prior concepts and knowledge that students have acquired before, to add or delete contents. Teachers can also use social issues as examples and graphic organizers illustrated in Booklet 3.1.5 to help student organize and analyze complex and abstract concepts, helping them to construct their knowledge effectively and build a good foundation with thorough understanding.

How can we stay healthy ?

Health begins with individuals. To learn how to promote community, social and global health, one should begin with himself/herself by establishing a healthy life style. According to the World Health Organization (WHO), the definition of health introduced in 1947 is that health is a state of complete physical, mental and social well-being, and more than simply being free from diseases or physically fit. That is, one should maintain their physical, mental and social well-being in order to stay healthy. How can an individual maintain health along these three dimensions?

This section is divided into three booklets. Booklet (3) - Physical Well-being - Healthy Body starts with an overview of different body systems and is followed by sections on how we measure physical health and ways to maintain our physical fitness such as weight management, balanced diet and physical exercises etc. Booklet (4): Mental Well-being – Healthy Mind explores the factors that influence the mental health of individuals and the ways to maintain mental health. Booklet (5): Social Well-being – Interpersonal Relationship: explores how interpersonal relationships influence personal growth and how to develop and maintain good interpersonal relationship.

The topics of Health Management and Social Care to be included in Booklet 3, 4 and 5 are listed in the following table:

Booklet		Health Management and Social Care Curriculum and assessment topics
3	Physical Well-being - Healthy Body	Compulsory part 3A The notion and practice of health promotion, health maintenance, ill-health prevention, social care, welfare and community services 4C Aspects of risk assessment and health management
4	Mental Well-being - Healthy Mind	Compulsory part 5C Mental health as a personal predicament and as linked to the social context
5	Social Well-being - interpersonal Relationship	Compulsory part 1C Transitions and changes in the course of lifespan 4D Social care, healthy relationships, social responsibility and commitment in the family, community and groups

4 The Healthy Mind

Contents

Learning Targets

Through the study of the topic on mental well-being - healthy mind, students are expected to:

Values and attitudes

❖ Demonstrate a commitment to the promotion of personal health and a healthy lifestyle; and

❖ Encourage and support others in making decisions for healthier lifestyles.

Knowledge

❖ Understand the importance of mental health and describe the characteristics of an emotionally healthy person; and

❖ Analyze the factors that influence the mental health of individuals.

Skills

❖ Acquire skills for stress management; and

❖ Explore how to enhance personal mental health.

Key Questions

To achieve the above learning targets, teachers may use the following questions to enhance understanding:

❖ What does it mean to be mentally healthy?

❖ How can we maintain our mental health?

4.1 Stress

Apart from physical health, mental health is also important. In fact, physical health and mental health are inseparable. Stress is a good example to illustrate this connection. This booklet will start with using stress as an example to show the interaction between physical and mental health as well as analysing how different factors influence our reaction to stress. These factors are related to physical, mental and social health. Mental disorders may result from maladjustment in these aspects. Mental patients have to deal with many difficulties and problems, which eventually affect their rehabilitation and holistic health. At the end of this booklet, different mental health services will be discussed.

(A) Understanding Stress

There are two types of stress. Eustress is a positive form of stress, usually related to desirable events in a person's life. For example, it makes us feel excited or challenged so that we can reach and accomplish goals. Distress is a negative form of stress, which has negative impact on health. It keeps us from doing the things we need to do or cause discomfort. It is commonly referred to as stress.

Stress can be understood as the interaction of the following three elements:

Figure 4.1   Elements of stress
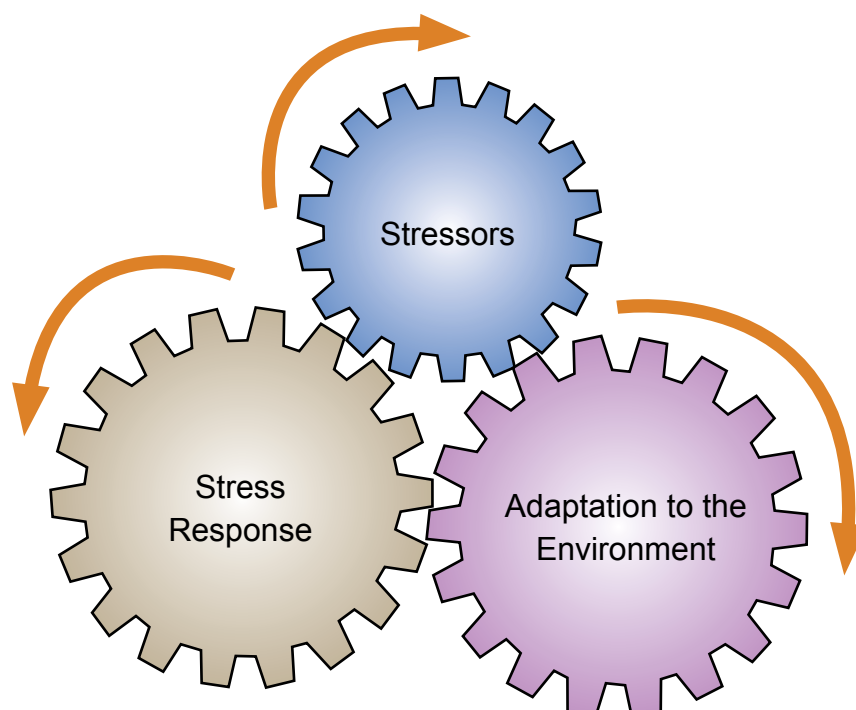
1. Stressors

Stressors are the stimuli from our environment. They are external factors and events, such as taking public examinations, release of exam results, unemployment, or a loss in investments, which we perceive as threats, hurt, worries and stress.

There are three types of stressors:

✎ First type: Disastrous Events

Some examples of disastrous events as major stressors are: plane attack in the United States on September 11 2001; the great tsunami in Indian Ocean in December 26 2004; Sichuan Earthquake in May 12 2008. These events had a huge impact on the injured and their loved ones.

✎ Second type: Life events

Life events can be stressful to individuals. The following are examples of stressful life events:

➢ Death of a partner
➢ Divorce
➢ Marital separation
➢ Going to prison
➢ Death of a close family member
➢ Personal injury or illness
➢ Marriage
➢ Being laid off
➢ Retirement

✎ Third type: Physical environment

Noise is undoubtedly a stressor. Similarly, crowded living conditions can be a stressor when our private space is intruded upon and therefore the friction between oneself and others is intensified. Work can be another major chronic stressor. Work pressure is mainly due to long working hours and work load. Heavy workload creates pressure. Another source of stress is the nature of our work. For example, the work of health care workers may involve life and death decisions in which any errors may result in serious consequences. This type of work eventually leads to burn-outs among workers.

2. Stress Reaction

Stress can also be understood from the reaction to stressors. When someone says he/she is stressed, it may refer to a tense condition. There are three types of stress reaction: (1) Psychological reaction: personal thoughts and emotion: how an individual perceives favourable or unfavourable turns, i.e. the feeling of tension. (2) Behavioural reaction: behaviours associated with stress-related responses such as nail biting, eye blinking, and body movements such as pacing. (3) Physiological reaction: the most frequently affected body systems are the cardiovascular, dermal and muscular systems, and some examples of physiological reactions are heavy breathing, trembling, perspiration and muscle tension.

The above-mentioned stressors that are related to psychological, behavioural and physiological responses are called strain. Strain eventually influences one's holistic health.

3. How does an individual adapt to the environment?

Different people have different reactions to stress. So, why do some people manage better whereas others take more time and more effort to cope with stress? It is related to the amount of resources one has and the ways an individual uses to cope with stressors. Stress is not only a stimulus and reaction to stressors but also a process. In this process, a tense person will tackle the stressors using personal resources such as behavioural, cognitive and emotional strategies and other social resources. Whether an individual is able to deal with stress depends on his personal and social resources.

For example, after the Sichuan earthquake 2008, the victims lost their homes and their families. Different resources are called for to deal with the harsh and difficult moments and re-establish their personal and family life. An optimistic victim who has more social support will be more able to cope with the situation than a pessimistic victim who has fewer resources. Stress arises when the resources are not able to cope with the external demand.

Stress can also be brought on by daily hassles. Personal resources may not be able to deal with the problems and threats that we face in our daily lives, and these will eventually lead to chronic stress. Chronic stress includes role overload, for example, a person may have different roles in an organization, the dual roles of parents, or stress due to career prospects. Chronic stress also includes female dual roles of working and parenting and may eventually lead to conflict between husband and wife.

A person may also perceive stress if his/her resources are not fully utilized, for example, a lack of challenges in their current work.

(B) Impacts on Health

1. Physical Aspect

Any sudden events or accidents create physiological reactions, such as faster heartbeat and increased breathing rates, as well as sweating. These physiological reactions to stress begin with the sympathetic nervous system. The release of cortisol stimulates the anterior pituitary and secretes adrenocorticotropic hormone. The secretion mobilizes the body to defend itself or escape from a threatening situation. It activates the adrenal medulla to secrete epinephrine and norepinephrine. The secretion of these hormones mobilizes faster heartbeat and breathing rates, raising the level of blood pressure, increasing muscle contraction and muscle endurance, accelerating the metabolic rate and giving the body a defence against the environment.

Threatening situations do not usually last for a long time. The body will return to a state of physical and psychological balance when the situation is over. However, when the stress is persistent, uncontrollable or inevitable, the prolonged activation of the response of the sympathetic nervous systems will cause health problems. The endocrine system stimulates the adrenal cortex to secrete glucocorticoids. The secretions of these hormones help dissolve fat and protein in the body so as to maintain the level of blood sugar to provide energy for the body. However, the prolonged activation of the epinephrine will raise blood pressure; increase the heartbeat, ause irregular heartbeat and affect the immune system. Similarly, persisting cortisol will affect the immune system, resulting in the destruction of the neurons.

Strain may weaken the immune system. Strain also reduces the hormones which help resist cancers and repair the cells. It especially reduces the quantity of T-cells and can accelerate the growth of tumors. (Please see Booklet (6) - Healthy Community for further information.)

Some may categorize the physiological reaction to stress in the following ways:

- ✐ Digestive reaction: for example, Indigestion, Peptic Ulcer and Psychological Induced Diarrhea

- ✐ Respiratory reaction: for example, Shortness of Breath, Asthma, Hyperventilation syndrome

- ✐ Skeletal and muscular reaction: for example, Back Pain, Cramps

- ✐ Skin reaction: for example, Perspiration, Rubeola, Pruritus

- ✐ Cardiovascular reaction: for example, Migraine, High Blood Pressure, Tachycardia

- ✐ Immune reaction: for example, Rheumatoid Arthritis, Lupus Erythematosus

2. Psychological Aspect

Stress induces:

✐ Behavioural reaction

Stress may cause a number of health risk behaviors such as smoking, drug abuse, or overeating. Smoking and drug abuse among teenagers are not only caused by peer pressure, but also stress. They believe that smoking and drug abuse reduce anxiety and help to relieve the stress of daily life. Some teenagers may indulge in overeating to relieve stress. If a person is continuously under strain, these risk behaviors are not only ineffective in relieving stress, but may also cause health problems such as a decline in attention span, impatience, lung cancer, mental disorders, obesity, etc.

✐ Thinking and memory reaction

Excessive stress causes deterioration in memory and concentration. Public examinations are one of the major stressors to students. Students may neglect or misunderstand some information or forget what they have studied during the examination but eventually remember afterwards. This can be due to a high degree of pressure, which eventually affects the memory and concentration.

✐ Emotional reaction

Stress brings:
➢ Fear

This s a common reaction in threatening situations, including psychological distress and abnormal physiological states. Fear can be further divided into phobia and anxiety. A phobia is an intense and persistent fear of certain events and situations. For example, claustrophobia is the fear of being in enclosed or narrow spaces. Anxiety is an unpleasant feeling that is typically associated with uneasiness and worry that occurs without an identifiable triggering stimulus.

- ➢ Grief and depression
  These are common major stressors when one experiences the death of a relative or close friend. Serious or persistent depression may develop into mental disorders.

- ➢ Burn out
  This is the effect of emotional exhaustion. For example, some teachers experience long-term tension and exhaustion, losing interest in teaching and eventually leaving the profession.

- ➢ Anger
  This happens especially in hurtful or frustrating situations.

3. Social Aspect

Stress changes the ways in which people interact. For example, in a disaster, people tend to cooperate and help each other to survive. This may be due to the fact that cooperation is essential when striving for a common goal. Therefore, cooperation is the only way to share resources to deal with stress.

On the other hand, anger and rage that are caused by stress may trigger attacks or different forms of violent behaviour. Using child abuse as an example, parents in this case are usually experiencing stressful events such as unemployment or illness. Under severe stress, the parents are on the edge of collapse. When the child's behaviour seems to be out of the parents' control (such as when they play nosily in an indoor area), it may trigger off burning anger and eventually cause child abuse. In most of the domestic violence cases, the majority of the abusers have a lower socio-economic status and receive fewer social resources. During economic downturns, with unstable income, they are not able to deal with the stressors due to lack of coping strategies and resources, and their anger will be projected onto their family members, resulting in domestic violence.

(C) Stress Management

Coping strategies can be classified into two main categories: dealing with the problems, and dealing with the emotions.

1. Dealing with Problems

These coping strategies mainly focus on adaptation to strain. They aim to reduce the demands of stressful situations and increase resources that help overcome the stress. Strategies for dealing with problems are as follows:

✎ Directly dealing with stressors: for example, directly addressing the interpersonal conflicts, problems of noise pollution or changes in working environment or the nature of work.

✎ Searching for information: for example, acquiring knowledge about the situation that helps solve the problems and deal with emotions. Thus, the child abuser may need to learn how to deal with stress and emotions, as well as practise relaxation techniques.

✎ Perceiving where the stress comes from: for example, one should observe the responses of his/her body and be aware of the source of the stress. Thus, the earlier one can recognize stress signals, the easier to change the behaviour and prevent persisting influences on one's health.

✎ Applying decision-making skills: for example, making a responsible decision based on the assumption that one has considered and is ready to accept the consequences.

✎ Social support: for example, solving problems induced by stress through personal social networks such as family, friends and social services.

2. Dealing with Emotions

These strategies focus on stress induced emotional reactions, especially those unintentional and unpredictable stressful situations such as disastrous events or bereavement (first and second type of stressors). These strategies aim at using cognitive and behavioural skills to adjust one's emotional reaction.

✐ Learning to accept: responding to the problem and accepting unchangeable facts, such as bereavement or disability due to accidents.

✐ Relieving emotions: when one perceives stress, some behaviours can help express emotions and relieve stress. For example, one may cry when he/she is sad. One may also yell when he/she is angry or use positive humour to reduce intense feelings that are induced by stress.

✐ Psychological strategies: using cognitive strategies and positive thinking to face stressful situations. One may use writing as a way to express feelings. This is a healthy way to release one's stress. An individual may share his/her diary with parents, teachers or friends or he/she may choose not to share.

3. Coping with Stress

It is believed that prevention is always better than cure. Hence, we may reduce the influences of stress on people by reducing the influence of stressors and enhancing stress management:

✐ Reducing the influences of stressors
The ability to deal with stressors depends on one's social support and personality.

➢ Social support
A sense of belonging and feelings of being accepted are needed to contribute to health and well-being and reduce tension. Support from family and the community reduces adverse influences on health. Social support also helps an individual to deal with stress. These kinds of support help to:

  ✳ Develop self-esteem: enhancing self-esteem from interpersonal support. Using appropriate expressions of love help to develop intimate feelings and thus reduce stress.

  ✳ Provide information: giving suggestions and important information. Helping others allows us to interpret the situation from different perspectives. Helping those who are underprivileged allows us to take our own stressful situations less seriously.

＊ Develop friendships: friendship is important to each individual. One may share his/her experiences and feelings with friends. Listening, encouragement and suggestions from friends enable one to release stress.

＊ Provide physical support: satisfying one's basic needs such as establishing a food bank to help those families with financial difficulties.

Social support provides a buffer to an individual from stressors. We may adopt different strategies to deal with stressors and make an informed decision based on others' experience. For example, divorce can be a stressor to an individual. If he/she has friends who have divorced, their experiences may help him/her develop strategies to cope with the situation.

➢ Personality
Perceived control of the environment and resilience affect how one deals with stressors. An individual whose perceived control is low may feel helpless and regard himself or herself as having a limited ability to cope with the stressors. He/she may perceive that he/she can do nothing to change the situation. When he/she is pessimistic towards the future, his/her stress increases. Eventually it affects his/her physical and mental health.

How can we increase our sense of self-control so that we are more resilient to stress?

＊ Set reasonable goals to achieve through perceiving stress as a challenge rather than a threat.
＊ Participate in the process of decision-making if possible so that the stress can be relieved through active participation.
＊ Examine how an individual summarizes and analyzes the source of stress, such as: does a person over emphasise the uncontrollable factors, neglecting the controllable factors?
＊ Psychologically prepare for stressful events, such as understanding anxiety and stress responses before public examinations. Preparation strategies such as relaxation techniques can reduce the influence of stress.

✎ Learn to deal with stress responses
Getting enough rest and sleep is important in stress management. When a person is in a state of rest, the blood pressure and heart rate will be lowered and the muscles can relax. A person will have more energy after sleep and be more able to cope with challenges. Inadequate rest and sleep will make it difficult for an individual to cope with stress.

The following are some techniques to relieve the physiological responses of stress:

➢ Breathing exercises: creating even and controlled breathing relaxes the body
➢ Different forms of muscle relaxation exercises such as tightening the muscles and then allowing muscle relaxation and extension
➢ Lying on a comfortable bed with soft lighting and listening to soft music
➢ Using different lights and imagery to create a peaceful and relaxing atmosphere
➢ Meditation
➢ Learning and practising different sports: the function of sports is to release the energy that creates stress; thus eliminating muscle tension
➢ Enjoying different leisure activities

Reference

✧ Mental Health Association of Hong Kong
   http://www.mhahk.org.hk/
✧ Health Zone – Health Information – Mental Health
   http://www.cheu.gov.hk/b5/info/mental.htm

4.2 Mental Health

We may apply the above-mentioned stress related issues to mental health, and summarize that a good state of mental health include the following aspects:

Physical Aspect: An individual who has good mental health, has normal physical functioning, especially being free from diseases related to the central nervous system, and other diseases that affect one's emotions or thinking. A healthy mind is built on a healthy body.

Mental Aspect: An individual, who has good mental health, is able to understand himself/herself. He/she is able to meet the needs of daily life and achieve personal ideals, preventing stress and torment, which can be brought on by irrational thoughts. Hence, he/she is able to develop a healthy self-concept.

Social Aspect: An individual who has good mental health is able to adapt to the social environment, understanding the society and social culture. He/she is able to recognize the social expectations on him/her, strive to fulfil his/her roles and responsibilities, as well as contribute to society.

The WHO outlines a good condition of mental health as a state that allows an individual to recognize his/her potential, being able to cope with stress in normal life and work effectively and contribute to society.

(A) Factors that influence mental health

1. The Biological Perspective

It is believed that the mind and body are connected as a holistic system. Hence, physical health affects mental health. Hippocrates was an ancient Greek physician in 400 BC. He proposed the theory of Humorism and suggested that the human body comprises of four humours, namely, Blood, Black Bile, Yellow Bile and Phlegm. Each humour represents different things. A person would have mental disorder if there was an imbalance of humours. For example, a person who is lacking black bile will eventually become depressed.

Chinese medicine claims that the five yin-organs control human body functioning, linking to the meridians as a whole body system. According to Huangdi Neijing Su Wen (Plain Questions: Yellow Emperor's Internal Canon of Medicine): the five yin-organs of the human body produce five kinds of essential qi, which bring forth joy, anger, grief, worry, and fear. Chinese medicine believes that there are seven emotions, namely, anger, joy, thought, grief, worry, fear and panic, which

are produced by the five-yin organs. Hence, the condition of these organs can be reflected by the emotions. Conversely, changes in emotions influence the organs; thus influencing health.

From the perspective of neuroscience, the sources of emotion are two important areas, namely, the hippocampus and amygdala. The hippocampus mainly manages memory whereas the amygdala processes emotions, managing and saving different emotional reactions. The prefrontal cortex is responsible for coordinating and controlling emotions. The amygdala is designed as an alarm. When faced with danger or distress, messages will be sent to the major areas of the brain from the amygdala, promoting secretions of hormones for facing the challenge or escaping. All the emotions (including anxiety) are from the amygdala. Professor Daniel Goleman suggests that the balance of rationality and emotion requires coordination of the amygdala and prefrontal cortex. Both sides of the prefrontal cortex reflect two opposing emotions. The left side adjusts optimistic emotions such as feelings of happiness whereas the right side is responsible for negative emotions such as fear or discouragement. Therefore, emotions influence one's thinking ability.

2. The Psychological Perspective

Psychologist Sigmund Freud suggests that mental health is influenced by the personality and personal development. Freud's model of personality consists of three major structures: the id, the ego and the superego. The id is the desires and impulses, operating according to the pleasure principle. An example of this would be a student who is preparing for their upcoming examination, and wants to play computer games. The goal of the id is to reduce the tension of desire to play and encourage him/her not to study. The superego represents the morality of society. It is the ideal self presented by society, parents, teachers and the culture. In the above example, the superego reminds the student to work harder to achieve good results, instead of playing. The ego represents rationality. It considers the objective world, operating according to the reality principle to carry out logical thinking. It provides a buffer between the id and the superego, satisfying one's needs. From the above-mentioned example, the ego will consider the pros and cons of playing computer games, and make a rational decision. Mental health relies on the balance of the id, ego and superego. For example, when anxiety and stress arise, this will eventually lead to neurasthenia if the superego is too strong, whereas when the id is out of control, psychosis will be resulted.

Freud suggests that our experiences during personal development influence mental health. For example, the first period of development from birth to 18 months is called the oral stage. The baby's mouth is the focal point of pleasure, such as eating. If these needs are not satisfied, the baby will not trust others or will not have a sense of security when he/she grows up. At this stage, if the id fails to be established and the person does not know how to deal with reality, distortion and denial will be used to deal with the stress and failure

when the person grows up Hence, this stage is critical and is regarded as the origin in developing schizophrenia. Similarly, if toilet training is too demanding during the anal stage and the morality of the superego is too high, eventually an individual will be prone to anxiety, having difficulties dealing with stress and developing neurosis. (Please see Booklet (1)for a further explanation on Freud's psychosexual development)

The balance between the id, ego and superego can help one develop a healthier self-concept. Self-concept is the impression one holds of oneself. It is the image of how we see ourselves. Our previous experiences, (successes or failures,) and the perceptions of others construct the image of who we are.

Self-concept eventually affects what we do, how well we do and how much effort we make. For example, those who believe they are talented in mathematics will work harder and eventually get better grades in mathematics. Therefore, how one sees oneself will eventually make him/her become that kind of person. The feeling towards oneself is called self-esteem. Compared to those people who value themselves negatively, people who are happy with themselves will eventually become more confident, more satisfied, more successful, get better grades at school and be more welcomed by others.

3. The Social Perspective

From the social point of view, there are many factors that influence one's mental health, namely, family, community, society and culture. Some sociologists claim that mental disorders are the result of social isolation. Mental health and social health are also inseparable.

As mentioned above, the family has an important role in early human development by giving psychological and physical support, shaping one's personality (for example, how to adjust the id, ego and superego) and ways of coping. The family deeply influences how one sees oneself and how to cope with stress. When families emphasize that boys should be strong and not cry when in distress or difficulties, the boys will find it more difficult to disclose and express their own feelings. When an individual is under stress or frustrated, family support affects his/her coping ability. Moreover, family expectations on gender roles impose stress on an individual. For example, when they expect men to be the breadwinners and women to be the caregivers at home, the man will be more stressed when he is unemployed.

Nevertheless, all families are affected by other external factors from the community or even the society. Family culture is shaped by community or society cultures. Support from the community and the society also influences the resilience and mental health of an individual as well as his/her family. For example, in the early 60s and 70s, the "open-door" practice in public housing estates allowed for the establishment of community bonds in the neighborhood. Personal or domestic

problems were easily detected by neighbors. It encouraged mutual help in the society. However, we place much more emphasis on privacy nowadays, and the neighbourhood relationship has been weakened because of this. As a result, some individuals or families fall short of community support when they are under stress. Family tragedies are the consequences of the break-down of these individuals and families. From the above analysis, positive social ethos, such as mutual help and community support, is important to mental health.

Furthermore, the above-mentioned mental health at personal and social levels is also subject to the influence of different societal and economic factors from a macro perspective.

A report on mental health published by the WHO in 2003 suggested that poverty is one of the important factors affecting mental health. The poor are a disadvantaged group in both environmental and mental experiences, increasing their risk of mental disorders. There are also barriers for them in accessing mental health services, such as, they are not able to pay the fees and may find lack of services that meet their needs. Mental patients, especially those who are chronically ill, are prone to unemployment, homelessness and discrimination. These factors will eventually have adverse effects.

Urbanisation also has its impact on mental health. Urbanisation increases the threat of homelessness, poverty and undesirable environmental factors (such as pollution). Urbanisation also destroys the well-established family life style, which reduces social support. In developing countries, urbanisation accompanied by economic development, the emerging of marketing and rapid industrialisation change the life style and interpersonal relationships among citizens, resulting in a reduction in social support which in turn influences individual and social mental health.

Changes in the economic situation, such as the financial crisis in 1997 and financial tsunami in 2008, brought on the problem of unemployment, which greatly influenced the mental health of those who lost their jobs. Risks of depression, suicidal ideation and self-destructive behavior are higher among those who are unemployed. Unemployment among people who are in their middle adulthood is disastrous to their mental health, because the chances of re-entering the labor force are relatively low. In this decade, many developing countries have carried out different economic reforms and re-constructions of their economies, which lead to rapid increases in the unpredictable unemployment rate, eventually affecting the mental health of their citizens.

Social security and social welfare systems are able to reduce the adverse effects that are brought on by economic downturns. They include the policies that reduce the financial burden among the disadvantaged and the services that provide help to the families of the chronically ill in order to reduce their pressure. These enable families and caregivers of mental patients to live in the community.

(B) How do we maintain good mental health?

What is the importance of mental health?

At the **personal level**, mental health enables people to practise life skills, make responsible decisions, develop positive self-esteem and communicate with others and express themselves in a healthy way. A mentally healthy person is able to deal with stressful, worrying and depressed feelings in a healthy way as well.

At the **interpersonal level**, mental health enables people to establish intimate relationships. People who have good mental health are able to express their emotions in a healthy way; thus maintaining healthy social relationships. These relationships become their social support, which eventually promotes mental and physical health. Personal safety, affirmation, sense of belonging, social contact and emotional needs can be satisfied through social support; thus, reducing and alleviating the adverse effects which are brought on by stress.

At the **societal level**, good mental health reduces the burden of illness on society. According to the research carried out by the Department of Health, mental patients may be more than 200,000. In recent years, the number of mental patients has increased rapidly. Statistics from the Hospital Authority show that, people who consult psychiatric services in public hospitals exceed 600,000. Compared to the number of people who consulted the services in 2001 (504,118), it has increased by 20%. According to the data provided by the WHO in 2003, it suggested that mental disorders accounted for 12% of the number of total illnesses. The burden brought on by mental disorders is highest among adolescents and adults, which are the most productive group of people. In the next few decades, this burden will increase disproportionately among the population in the developing countries. Mental patients all over the world face the problem of discrimination. In most of the countries, the financial burden falls heavily on the family due to lack of a public funding support network of mental health in the community. Moreover, family burdens lead to social burdens, such as the negative emotions which arise when taking care of disabled family members. It adversely affects the quality of life of the caregiver, resulting in social isolation, shame and loss of opportunities for self-development.

Hence, good mental health is important. Mental health can be promoted through physical, mental and social aspects.

1. The Physical Aspect

✎ Sleep

Having enough rest and sleep is essential for a healthy mental state. Stress cannot be reduced if one has lack of rest and sleep. The human body continuously receives and releases energy. People's brains are active during the daytime whereas the brain receives and adjusts its energy at night when people sleep. During sleep, body temperature, pulse rate and blood pressure are lower, breathing and secretions of hormones reduced, slowing the metabolic system; thus, allowing the adjustment of different physiological systems. It greatly reduces energy consumption and is essential for the recovery of the body. Moreover, people will be more relaxed as the secretion of adrenal cortisol is reduced at night. Hence, sleep is necessary for human functioning. Sleep is a time of quiet tranquillity for the brain and a time of energy accumulation for body functioning. Good quality and quantity of sleep is vital for physical and mental health.

People become impatient, irritable, apathetic and unable to concentrate, and their memory deteriorates when they do not have enough sleep. Conversely, they become energetic, quick-witted and have higher efficiency once they have adequate sleep. It is due to the clearing of daytime activities of the brain such as memory, feelings and emotions during sleep. Sleep, therefore, can protect the brain and enhance thinking in order to maintain mental health.

✎ Exercise

There is a secretion of endorphins if one exercises anaerobically for more than 30 minutes. This is because glycogen and oxygen in the muscles are used up during the process, resulting in the accumulation of lactic acid in the muscles. Secretion of endorphins occurs when the accumulation of lactic acid reach a certain level. Endorphins are referred to as the opioid hormones secreted from the pituitary gland and hypothalamus. They are a kind of natural analgesic, which relieve pain, help one to relax and produce a sense of well-being.

Hence, we usually have a sense of well-being after strenuous exercise. Research states that aerobic exercises have positive effects towards mental health and they are effective in dealing with depressive moods. Aerobic exercises can help improve the emotional status of patients with depression in a short period of time.

✎ Diet

A balanced and healthy diet is essential for mental health as well.

First of all, the limbic system, that is in charge of emotions, depends on fat to work properly. The fatty acids found in fish and the unsaturated fat presented

in vegetable oils and nuts help thinking as well. Many major elements in the human body (e.g. cells, the anti-bodies in the immune system, hormones in the brain and neuro-transmitters) are proteins. However, when an individual is under stress, synthesis of high-quality proteins will be inhibited, and the consumption of proteins will increase. Absorption of protein and fat are essential to mental health.

Moreover, vitamin B complex is essential for the nervous system to work properly. Anxiety, irritability, agitation, tiredness and emotional fluctuations will occur when one is lack of vitamin B1, B2, B6 and B12. Besides, strain will deplete the stores of vitamin B complex and vitamin C greatly.

Caffeine and nicotine stimulate our body and nerves, producing epinephrine that increases the workload of the heart and eventually reduces the blood flow in the brain. This leads to a reduction in the working capacity of the brain. Not only does this increase stress to our body, it also leads to anxiety and deterioration of our sleeping quality.

Refined sugar foods such as candy, ice-cream, desserts, soft drinks and syrups, and refined carbohydrate foods such as cereal products, potato chips and white bread are quickly converted to sugar, and absorbed by our body, leading to over-consumption of sugar. Some people may experience anxiety, shivering, dizziness, palpitations and irritable feelings due to low blood sugar level. Meanwhile, because of the low level of blood sugar and the release of epinephrine and cortisol, the level of anxiety further increases.

2. The Mental Apsect

✎ Maintaining emotional health

Daniel Goleman – a psychology professor of the Harvard University explains the emotional intelligence quotient as a kind of feeling scale, as well as the mental and physiological status and related behavioural tendencies of an individual, in his book 'EQ'. One has to recognize his/her own emotions in order to stay mentally healthy. In the real world, we are often only able to identify our emotions after an event. Such emotions or feelings are a part of our inner thought processes during the event. We have to continuously examine our inner thought processes in order to identify and take control of our emotions.

What is the emotional intelligence quotient? Psychologist Peter Salovey of Yale University suggests the index of emotion intelligence quotient represents the ability to control oneself. He suggests that the emotional intelligence quotient should include the following domains:

1. Understanding your own emotions: Only when you understand your own emotions, you can break free from being a slave to your emotions and take control.
2. Managing your emotions through building upon self-regulation: Managing emotions well can help to block out painful and overwhelming emotions, and help to achieve self-comfort.
3. Self-encouragement: This includes setting goals and keeping the passion and drive toward those goals. It helps to delay satisfaction and keep our impulses in check.
4. Recognise others' feelings and emotions: Empathy helps to perceive subtle messages and recognise other's needs, facilitating building better relationships with others.
5. Managing interpersonal relationships: Being able to manage other people's emotions can develop you into an outstanding leader, and improve your impression on others.

People with higher levels of EQ are able to maintain emotional health, as they are able to express their feelings and control their emotions properly. They have better social skills as well as empathy, and they are able to establish better relationships with others. Their outgoing character allows them to deal with fears and worries and be more involved in everything.

✐ Living here and now
Psychologist Friedrick Perls considers that living in the here and now is vital to human beings. People need to handle their problems 'here and now' without avoidance. He proposes that people should assume their own responsibility and see the factors affecting themselves and tackle their problems as a whole. They cannot separate themselves from their surroundings, which include their family, friends and working environment. When they detach from their social groups, they will be lonely and upset. Therefore, a mentally healthy person will not avoid problems and difficulties. Instead, they will develop their ability to adapt and are aware of their relationship with the environment so that they are able to achieve a harmonious relationship with it.

✐ To establish healthy, optimistic and rational thinking
The mentally healthy persons will be optimistic towards reality. Their imagination will be their asset.

Some psychologists like Ellis propose that emotions come from personal belief. Emotional problems are rooted in irrational beliefs. They believe that psychological distress does not come from objective facts. Instead, it comes from the perception of the objects or events. A-B-C Model is one of the theories. 'A' stands for Activating Events. 'B' stands for Beliefs. 'C' stands for Consequent Emotions. The emotional problems are not caused by activating events. They come from our beliefs about the events.

The following are the examples that suggested in Booklet (1):

A - Activating Events	B - Belief	C - Consequent Emotions
Birth of younger sisters or brothers	Loss of attention from parents due to presence of younger sisters or brothers	Jealous, upset, self-pity
	Younger sisters or brothers are my new companions. I have grown up, have to take care of them	Happy, treasure the family relationship, willing to take care
Retirement	Become useless, loss of job equals loss of self-worth	Frustration, low self-esteem, sense of inferiority
	Emerging of new leisure activities and style of life after retirement	Positive, happy, enjoy life

Healthy thinking does not necessarily mean being closer to reality. It is a way of thinking that makes us healthier. Reading positive, and self-help articles and stories may help to teach us how to be more resilient and develop a positive and healthy way of thinking.

Direction Association for the Handicapped – Life fighters

Direction Association for the Handicapped is the first non-government organisation that provides services for the handicapped. The webpage of Life Fighters introduces different stories of how people overcome difficulties.

Direction Association for the Handicapped: http://www.4limb.org/view/lifefighter

✐ Appropriate humour

A sense of humour enables us to relax with our emotions, reducing negative feelings, promoting a positive effect on our social life, and reducing our anxiety, tension, frustration, anger and hostility, eventually lowering our stress levels.

A sense of humour relates to emotion by influencing the secretion of epinephrine cortisol. Research states that people whose index of humour is higher have lower secretions of cortisol, representing lower levels of stress; thus, a better psychological condition. However, Rod A. Martin - a psychology professor of the University of Western Ontario suggests that there are two types of humour: positive and negative humour. Only positive humour is able to enhance and promote health.

What is a positive humour? Professor Rod divides humour into four types: affiliative, self-enchancing, aggressive and self- defeating.

	External	**Internal**
Positive	Affiliative	Self-enhancing
Negative	Aggressive	Self-defeating

Positive humours include:

➢ Affiliative humour - This is humour aimed at others with the tendency to amuse and engage them in humour. It promotes social cohesiveness. This type of humour helps develop healthy social and interpersonal relationships.

Example:
Once upon a time, when the musician George Bernard Shaw walked down the street, he was knocked over by a bicycle. He was not hurt. The trouble maker immediately helped him get to his feet and apologized. Shaw smiled and said, 'You're in bad luck, sir. If you knocked me down and I died, you could have been famous later.'

➢ Self-enhancing humour - This is humour aimed at oneself and is a kind of perspective-taking humour. Humour is used to cope with unpleasant experiences. This type of humour helps relieve personal stress and promote mental health.

Example:

Before Roosevelt became the President of USA, a thief broke into his home and stole things. A friend wrote and comforted him. He thanked his friend and told him he was glad that:

1.   the thief only stole his property, not his life;
2.   the thief only stole part of it, not the whole;
3.   and most luckily, he was not the thief.

Negative humour includes:

➢ Aggressive humour - This is destructive humour aimed at others. Teasing, playing tricks, ridicule and sarcasm are used to express and assure oneself at the expense of their interpersonal relationships. This makes the person become more isolated and unapproachable.

Example:

The story writer Hans Christian Andersen always dressed soberly with a worn-out hat when he walked in the street. One day, a passerby teased him about his hat and said, 'what is on your head? Can it be called a hat?' Andersen replied the man, 'what is under your hat? Can it be called a brain?'

➢ Self-defeating humour - This is excessively self-disparaging humour, or using humour as avoidance or denial of personal feelings. In the long term, it depletes self-esteem.

Example:
A handsome boy invited a plain Jane to a dance. After the dance, the girl told the boy, 'I know why you invited me.' 'Why?' the boy asked. 'Because it is a charity ball.'

✎ To develop positive self-esteem and self-concept

There are different ways to help develop positive self-esteem and self-concept. The following are some of the examples:

➢ Developing skills or talents
We can explore and search for skills or talents that we like to practise and develop them. Practising a skill such as playing guitar or cooking facilitates personal development.

➢ Making a list of things that an individual does well
When an individual lists the things he/she is good at and concentrates on practising them, his/her mental health will be improved. Mastering different skills helps boost self-confidence. The recognition of one's own strengths helps us maintain patience in times of difficulties and prevents us from giving up.

➢ Being involved in school, school clubs or community activities
A sense of belonging to school enhances one's self-esteem as one is able to contribute to the school.

➢ Establishing a trusting relationship with at least one adult
Adults, such as parents or teachers, can serve as a positive role model or a learning target, which is important for developing self-esteem.

➢ Choosing friends who encourage others to strive for their best
It is important to choose friends who are responsible. Those who have high expectations and behave well will also encourage others to strive for their best.

➢ Setting goals and planning how to achieve the goals
Setting practical and achievable goals is vital. This is because achieving a goal helps to enhance one's self-esteem. Once we have achieved our goals we can set other goals to build on the ones we have completed.

➢ Spending time with friends and adults who are supportive
Our self-esteem will be enhanced when we are supported by others.

➢ Helping others voluntarily
Helping others allows us to experience and gain our own values.

➢ Keeping a neat appearance
A clean and tidy appearance provides a better feeling of ourselves as well as influencing others' perception of us.

3. The Social Aspect

Interpersonal relationships have a great impact on mental health. We will feel a sense of security, self-esteem, self-confidence, happiness and eventually become a happy and healthy individual when we establish good interpersonal relationships with others. During times of crises, our social network becomes an important resource for solving the problems to achieve physical and mental well-being.

Social support comes from family, friends, partners, relatives and other members of our social network. It can support the development of our self-esteem. The support may be emotional, mental, physiological, informative, effective or practical, which helps maintain a sense of well-being or better adjustment in different daily events.

These social networks may be based on friendship, trade or shared membership. The interaction forms a network among different individuals. One can achieve social acceptance and receive mental and physical support and services from the networks.

Mental health information

  ✧ Youth.gov.hk – Mental Health - http://www.youth.gov.hk
  ✧ Gov HK – Your Mental Well-being - http://www.gov.hk

Home > Residents > Health & Medical Services > Health Education > Your Mental Well-being

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4.3 Mental Disorders

(A) The Causes

In traditional Chinese and Western cultures, it was believed that mental disorders originated in the religious and the spiritual world. Some people believed that mental patients were manipulated by an evil spirit, cursed by witchcraft or that their illness was caused by other unusual evil magic or spirits, resulting in their insane thinking and behavior. Driving out the evil spirits and/or isolating the patients were the major treatments of mental disorders. Nowadays, some people still use the supernatural approach as an interpretation of abnormal mental states. A research on the effect of psychiatric labeling that was conducted in 2005-2006 by the Department of Psychology of the Chinese University of Hong Kong interviewed 941 people. Research stated that 20% of the participants believed that mental disorders were due to fate, while 15% of the participants believed that mental disorders were the consequence of their behavior. 10% of the participants believed that mental disorders were due to the problem of Feng Shui. A study in Lancet, the medical journal, showed that one of the causes of misunderstanding towards mental disorders was that mental patients were being neglected in developing countries. For example, in Zambia, people suffering from mental disorders are thought to have been attacked by an evil spirit, or the illness is caused by witchcraft. Eventually, patients are not willing to talk to or seek help from others.

Treatments for mental disorders will be difficult to establish if people do not have the proper understanding of the causes and classifications of mental disorders.

1. The Biological Perspective

From the biological perspective, biological factors are the major determinant in developing mental disorders, especially genetic factors. This point of view considers a patient with a mental disorder may have different brain structures or functions, or neurological reactions. The abnormal mental state is due to genetic factors or environmental risk factors. For example, over-consumption of alcohol of a pregnant woman will do harm to her baby. One of the explanations of schizophrenia is that a majority of the patients are found to have symptoms of swelling brain ventricles and atrophy of the gray matter in the brain. Mental disorders are believed to be induced by an imbalance of neurotransmitters - dopamine, norepinephrine and serotonin. Lastly, many genetic and twin studies suggest that bipolar disorder and schizophrenia may be inherited.

2. The Sociological Perspective

From the sociological perspective, mental disorders are caused by the interactions between society and the culture. That is, mental disorders are a product of the culture of the society. The underlying causes of mental disorders are the major societal changes, like fluctuations in the economic situation, social movements, wars, natural disasters, diseases, urbanization, social hierarchies, income gaps, inequalities or injustices, which influence the mental state of each individual. Therefore, mental disorders are not only a personal predicament. They are also linked to the social context. Meanwhile, different societies have different behavioral norms and standards. Mental disorders are sometimes regarded as those types of thinking or behavior that deviate from social norms and standards.

3. The Psychological Perspective

Psychologists believe that conflicts, crises, tension and trauma are the causes of mental disorders, especially for vulnerable people. For example, a child who has witnessed their parents being murdered will eventually suffer from frustration and emotional fluctuations, or even Post- traumatic Distress Syndrome. Research also states that pessimists and perfectionists are prone to mental problems. Pessimists lack positive attitudes towards life. They usually understand and perceive things negatively. They are prone to depressive moods. In severe cases, individuals will become spiritually vacuous and tired of life. On the other hand, perfectionists are often too demanding toward themselves and others. They will be in a depressive state such that they feel guilty, self-blaming, and will want to wither and escape if the reality and their expectations do not match. Severely affected individuals perceive themselves as guilty and tired of life.

4. The Integrated Perspective

From the bio-psycho-social perspective, human beings are affected by biological, psychological and social factors. Any mental disorders may be the result of the interactions of these three factors. Biological factors such as heredity and physiological features are the fundamental factors contributing to mental disorders. Under these biological conditions, a person is susceptible to mental disorders when they are simultaneously affected by psychological factors such as negative mental states, unpleasant personal growth and traumatic experiences. These factors together with social-cultural factors such as pressures from family, school and society will eventually trigger mental disorders.

(B) Classifications

Mental disorder is a collective term. In general, mental disorders include neuroses, such as anxiety disorders, phobias, obsessive compulsive disorders and psychotic disorders such as schizophrenia and bipolar affective disorders.

Simply speaking, neuroses refer to the ill-being of emotions, cognition and behavior. The ill-being disturbs the daily routine of the patients. They may not be able to cope with their work, leisure and social activities. Different from the patients of neuroses, the patients of psychotic disorders usually lose contact with reality. Sometimes they will have hallucinations. They see, hear and smell things that do not exist at all. Some of them have paranoia and think that they are being persecuted or have great privileges. They will have some queer behavior due to their hallucinations and paranoia. They may be tormented by it.

Introduction of different mental disorders

The following are the websites providing related on-line information on different mental disorders:

Institute of Mental Health - http://www.imh.org.hk

Kwai Chung Hospital - http://www.ha.org.hk/kch

Hong Kong Association for the Promotion of Mental Health - http://www.smilecentre.com.hk

1. Depression

Depression is a common mental disorder, characterized by sadness, intensely depressed mood, worry, unhappiness, feelings of being discouraged and 'down in the dumps'. An individual may feel hopelessness and helplessness. Everyone experiences feelings like these and they usually do not last for a long time. It is said to be abnormal if these kinds of emotions persist over a period of time. Postnatal depression is a common type of depression. New mothers are always prone to worry, uselessness and feelings of being defeated. Hence, some mothers who have postnatal depression need to be supervised, supported and given help.

Depression symptoms include insomnia, loss of interest, poor appetite, decline in energy levels and concentration. A person suffering from depression usually withdraws socially. Depressed people may be fatigued and not able to concentrate on work. Eventually their interpersonal relationships deteriorate and they become isolated. Moreover, with the decrease in appetite, it is usually accompanied

by weight loss. Insomnia or hypersomnia are also common. Psychologically, people are less self-confident and even prone to self-hatred. In extreme cases, depressed people attempt suicide.

However, to determine whether there is a prevalence of depression, in addition to the professional assessment of whether the emotions of the patients are seriously affecting their work, social activities and daily living, it is important to make sure that the depressive mood is not caused by other diseases such as a low level of thyroid hormones or drug use. Therefore, the clinical diagnosis of each case has to be conducted by specialists of mental health and clinical psychology.

Bipolar disorder is the most common type of depression. During the occurrence of the illness, the patient experiences extreme fluctuations in mood. They are sometimes depressed and sometimes manic. Many patients experience highs and lows in mood, and some of them will choose to be alone. It is also called bipolar mood disorder in the medical terminology.

Death of Vincent Van Gogh

Vincent Van Gogh was a famous artist and painter. In 1889, he had a quarrel with his friend and later cut off the lower part of his own ear lobe, which he gave to his friend. Later he was sent to a mental hospital. Finally, he committed suicide. Later, doctors referred to the mental state of Vincent Van Gogh as Bipolar Disorder, a mental disorder that mixes manic and depressive moods.

The problem of mental disorders is worsening in Hong Kong due to social isolation and lack of social support. Reports that were published by the Hong Kong Mood Disorder Center in 2007 stated that mental disorders increased over the past 20 years. According to a press release by that center in that year, 8.3% of the population had mental disorders. Compared to same kind of research 20 years before, the rate of mental disorders has increased by four times. 32.5% of patients suffering from mental disorders attempt suicide. Another piece of press release that was published by the center in 2001 stated that people found life to be more stressful since the financial crisis and the high unemployment rate in 1997. Research stated that emotional problems of people in Hong Kong were expressed in terms of physical symptoms. 85% of patients exhibited different physical symptoms such as pain, fatigue, insomnia and digestive discomfort. Research carried out in 2004 suggested that 4.1% of the population had symptoms of depression (112,793 people from age 15 to 60) such as fatigue (84%), poor

concentration (82.9%), bad temper (80.8%), insomnia (76%), muscle pain or tension (74.2%) and impatience (67%). As stated in the research, 60% of those with depressive symptoms reported that they were depressed, while 40% of them attempted suicide.

Depressed Little Prince

http://www.depression.edu.hk/

2. Post-traumatic Stress Disorder

Post-traumatic Stress Disorder (PTSD) is caused by a traumatic event or the witnessing of such an event, which triggers fear, helplessness or horror in response to the perceived or actual threat of injury or death to the individual or another. An individual perceives the traumatic event as life threatening, unpredictable, infrequent and with intense emotions.

Effects of traumatic events differ among individuals. Different individuals have different physiological and psychological reactions. Social background, physical ability, genetics, past experiences and expectations affect how an individual reacts to the traumatic event; thus they have different psychological reactions. The majority of people may experience mild distress responses or behavioral changes, such as insomnia, feeling upset, worrying, and indulging in smoking and heavy drinking. These individuals are likely to overcome the experience with the help of education and community support. A minority may have moderate symptoms such as persistent insomnia and anxiety. They are likely to overcome the problem with the help of psychotherapy and medication. In relatively fewer individuals, trauma results in psychiatric disorders such as PTSD or depression, and they are likely to need special treatment.

Sichuan Earthquake

The Sichuan earthquake caused serious injuries and death to many people. For the people who were fortune enough to survive, they experienced physical and psychological traumas which should not be overlooked.

In Mianyang 404 hospital, a 6-year-old little girl, with her clothes covered with dust and her head wrapped with bandage, kept sitting

still on the bed. Two days later, when her father found her at the hospital, she could only look blankly at him without saying anything. In the previous few days, no matter how the health care workers chatted and played with her, she did not even give back a little smile. She did not seem to be hungry at all. She ate only when the nurses fed her with a spoon. Occasionally, she would call 'Mum' but her mother was not found.

A 30-year-old woman was buried for three days before being rescued. She was very traumatised when she was admitted to the hospital. She was weeping and spoke in a high pitch. She got nightmares every night. 'Move the stones away from me!' she cried several times a night.

The above cases are likely to be the symptoms of Post-traumatic Stress Disorder (PTSD). Huge and deep fear in disasters may have profound impact on the victims. The emotions will be felt even when they are out of danger.

Source: China Times, 28 May 2008 - Website:
http://forums.chinatimes.com/report/earthquake/media/97051803.htm

3. Schizophrenia

Schizophrenia is another kind of mental disorder. It is a form of severe mental disorder. The symptoms can be divided into two groups:

✐ Positive symptoms which include delusion (false beliefs or beliefs derived from deception), thought disorder (illogical thinking, others simply don't understand his/her meaning), hallucinations and strange behavior.

✐ Negative symptoms such as social withdrawal, difficulties in communicating with others, loss of interest towards the surroundings, lack of motivation, slow thinking processes, difficulties in expressing emotions.

Schizophrenia is a mental disorder that is characterized as a distortion in the perception of reality. It leads to a split mind or a breakdown in logical thinking processes. The split mind results in unusual behavior with confused and inappropriate actions, speech, and emotions. Patients may appear to be desperate and withdrawn from reality, putting themselves in their imagined world. Professional treatment is essential for helping these patients. They are usually hospitalized. There is no long-term cure for the disorder.

Introduction on Schizophrenia

http://www.mhahk.org.hk/chi/sub4_1_info_b1_3.htm

What is Early Psychosis?

There is usually an incubation period during the onset of a psychosis such as schizophrenia. At this stage, the thoughts and feelings of the patient are obviously confused and in chaos. To separate this state of mind from other mental disorders and avoid stigmatization so that the patients are able to seek early treatment, the illness is called early psychosis.

Early psychosis is an abnormal mental condition at an early stage that is often accompanied by delusions, hallucinations and disorganized speech. The thoughts, emotions and feelings of people suffering from early psychosis are frequently out of touch with reality.

While the condition may affect individuals in any age group, it is more prevalent among young people aged from 15 to 25. If early psychosis is identified in its initial stages and treated properly, it will be possible to minimize the disabilities that it causes and prevent serious complications from developing full blown mental disorders. The logic is similar to that of treating a fever. Fever is an initial symptom. If we pay attention to this symptom, it will not develop into a serious illness such as Pneumonia. Hence, we should deal with this mental disorder seriously and properly.

Source: E.A.S.Y. Programme
http://www3.ha.org.hk/easy/eng/index.html

4. Dementia

Dementia is a term which covers a range of illnesses involving the degeneration of the brain. It can lead to a serious decline in mental abilities, including loss of memory. There are different types of dementia, and the most common are:

✐ Cortical dementia - memory impairment, personality changes, loss of speech (e.g. Alzheimer's disease)

✐ Sub-cortical dementia - memory impairment, personality deterioration which can result in degeneration of cognition, emotion and movement. (e.g. Huntington's chorea.)

Alzheimer's Disease

Alzheimer's disease: a neurological disorder, which has serious degenerative effects on an individual. These effects include:

✧ Difficulty in remembering recent events - leading to confusion and forgetfulness
✧ Developing disorientation - leading to increasing confusion, an inability to recognize people or places
✧ Episodes of hallucinations - leading to the seeing of objects or individual people that are not there
✧ Paranoia, leading to feelings of anger, or feelings that people are watching
✧ Violent mood swings

Patients who have Alzheimer's disease eventually lose the ability to care for themselves and to carry out daily activities such as washing, dressing, eating meals, reading and writing.

Possible causes include genetic inheritance, abnormal deposits of protein in the brain or the inhalation of environmental toxins.

4.4 Problems and Crisis of Mental Patients

Mental disorders are chronic disorders. Unfortunately, there are generally stigmatizing attitudes towards people with mental disorders. Patients and their families have to overcome and solve different problems and crises in order to recover from the disorder and integrate into society. The only way to understand the problems and crises that they are facing is to explore how to provide care and support to patients and help them overcome the problems.

(A) Discrimination and isolation

There is a lot of misunderstanding towards mental patients. These misunderstandings eventually lead to discrimination. The following are some misconceptions and clarifications of misconceptions towards mental patients, which are provided by Kwai Chung Hospital[1].

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[1] Web site of Kwai Chung Hospital: http://www.ha.org.hk/kch

Misconception	Clarification
Patients with schizophrenia have split personality or multiple personality disorder (or dissociative identity disorder)	Patients with schizophrenia only have one consistent personality. Patients with split personality or multiple personality disorder are rare and are different from schizophrenia.
Mental disorders are induced by family	Parenting, contradiction among the family and lack of communication will not lead to mental disorders. Yet, some kind of mental illnesses are related to the genes, but is not liked to the relationship among the family members.
Mental patients are prone to violence	Some patients may use violence when their condition is deteriorating. However, most of the mental patients tend to be socially withdrawn and without any tendency to use violence.
Heavy drinking and drug abuse lead to chronic mental illnesses	Research stated that heavy drinking behavior and drug abuse increase the probability of the onset of the disorder. However, it is not the direct cause of schizophrenia.
Mental patients are able to control their symptoms	Patients are not able to control their symptoms as those with high blood pressure or diabetes mellitus.
Mental disorders are an indicator of weak moral standard	Moral standard of patients and normal people are similar. Symptoms of patients are induced by physiological factors, not their moral standard.

Source: Website of Kwai Chung Hospital
http://www.ha.org.hk/kch/eng/education/edu-index.html

Mental patients are perceived to be prone to violence, suicide and unpredictable behaviour and inability to make rational decisions. The negative labelling frightens the patients and eventually leads to social withdrawal. In return, the social withdrawal reinforces the misunderstanding towards the mental patients, resulting in social isolation.

In this regard, the Equal Opportunities Commission, the Department of Psychiatry of the Chinese University of Hong Kong and the Department of Social Work of Hong Kong Baptist University collaborated to conduct a study on mental patients, with 757 participants, in 2002. In this study, they interviewed patients and discharged mental patients from 28 halfway houses and one public psychiatric outpatient clinic, collecting firsthand data on opinions and experiences of discrimination.

The study showed that the negative labelling on patients was more threatening than the disorder itself. They found that patients generally concealed their case history and isolated themselves, hindering early diagnosis of the problem and treatment. The majority of the participants reported that living in a society which has negative labelling on their illness created an extremely uncomfortable environment for them. This labelling nibbled away their self-confidence, leading to low self-esteem and self-blaming. It made them conceal their case histories and deprived them of their dignity and involvement in their daily routine. This study also showed that family members might be the source of the labelling. This may be due to their misunderstanding towards mental illness, which eventually causes frustration and helplessness.

Other research also states that people with mental disabilities are subject to discrimination. Some of their relatives stay away from them. Some patients withdraw from joining social activities because of this. Some patients feel ashamed of themselves due to the discrimination in the community. Thus, they conceal their case history from their relatives. They may encounter problems or even suffer a setback when they are searching for jobs, receiving education, finding accommodation and engaging in social activities. These experiences become a barrier for them to integrate into society. Social isolation hinders the rehabilitation of mental patients because they will be more incapable of dealing with their problems. Research suggests that this will eventually increase the risk of suicide among these patients.

Mental Rehabilitation Centre at Laguna City Dispute

In 1994, when a mental rehabilitation service centre opened at Sai Tso Wan, the residents of the Laguna City strongly opposed its opening. In addition to issuing resident cards and keeping a watch on the centre users by taking photographs and videos, the residents also brought their children to the press conference to protest.

The problems of social exclusion and isolation of mental patients should not be overlooked. Different parties should provide various community services, which help patients to improve and establish better social contact and eliminate the feelings of isolation and loneliness.

Although different constitutions, laws and regulations have been established to prohibit discrimination on the basis of their disability, mental patients still encounter difficulties in finding jobs. This may be due to the stigma of mental illness, prejudice against employing ex-mental patients for the need for extra resources in supporting their employment, as well as sudden termination of employment due to their relapse.

To deal with the problem of discrimination, a guideline for hiring people with disabilities is provided in some countries. Based on the law, the employers are obligated to hire a proportion of disable people; mental patients are included as well.

In Hong Kong, the "Mental Health Ordinance" (Chapter 136) provides that before issuing compulsory hospital orders, mental patients have the right to ask to see the District Court judge or a magistrate. From 10 September, 2001 onwards, the "Mental Health Ordinance," Article 31 states that in cases of compulsory hospital admission, patients need to be informed that they have the right to ask to see the District Court judge or magistrate in order to protect them on the ground of human rights.

(B) Suicide

Suicide is not necessarily associated with mental disorders. However, the risk of suicide attempts is higher among mental patients, especially those with bipolar depression. There are many predisposing factors, such as anxiety, severe pain or illness, emotional problems, financial problems, fear or incapability to face major life choices.

Parasuicide is a suicide attempt, where a person may not have an intention to terminate their life. Instead, they intend to seek help from others when they are in pain and frustration. In this case, the suicide attempt is a signal of seeking help when a problem arises. For example, abusing drugs may be initially a way to seek help. Unfortunately, an overdose leads to death.

There is no single and outstanding sign or golden rule for predicting suicidal acts. However, the following signs alert us that someone is feeling stressed and depressed:

❖ Making a direct statement about killing themselves
❖ Loss of interest in personal appearance
❖ Family and social withdrawal
❖ Change in personality
❖ Alcohol and drugs use
❖ Running away from home
❖ Concentration on issues related to death

Suicide prevention includes the techniques that can be used to help prevent a person from thinking, attempting or practising suicide.

❖ Making people aware of the suicide prevention hotline[2], hotline number should be placed in an eye-catching area.
❖ Knowing how to deal with people who are frustrated
❖ Establishing a support network
❖ nvolving people in meaningful activities
❖ Be alert and knowing how to deal with warning signs

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[2] The Samaritan Befrienders Hong Kong - 24 hours hotline: 2389 2222

(C) Impact on care givers and family members

Family support is of the utmost importance in the treatment of the mentally ill. A holistic social support service is important for the rehabilitation of mental patients. Support and care provided by family members are essential for patients during the rehabilitation.

Mental disorders are chronic illnesses. Most of the caregivers quit their jobs to take care of the mental patients. Relatives of mental patients are found to have a higher level of depressive moods than other citizens. This level will be even higher if the patients live with their family. It may be due to the frequent contact with the patients and their worries about the progress of rehabilitation. If they do not know how to communicate and solve the conflicts between the patients and family members, it will further lead to a higher level of depression.

Taking care of a family member who is a mental patient is a major stressor. It causes chronic strain on the other family members. The problem will be more serious if the caregiver takes care of the patient on their own, because they have to deal with the stress alone. These caregivers are also prone to a higher level of depression.

Conversely, for family members who are not the major caregivers, or who do not have to contact the patients frequently, their level of depression will not be too high. Meanwhile, families with full time jobs have more income than families who have to rely on subsidies from the government. Therefore, families that rely on government subsidies have a greater financial burden than other families. The financial burden, together with the pressure from their close contact with the patients, makes the families on government subsidies the group with the highest level of depression.

After all, families with mental patients also need to handle emotions, problems and stress. Other than satisfying the physiological needs of the patients, the families also need to face discrimination, as well as search for support services and information on the disorder and the related treatment. Eventually the family members will be mentally and physically exhausted. If adequate information and suggestions can be provided to the families, such as giving them information about the service providers, day care services and respite care services and giving them training on stress management, the care givers can be well supported.

4.5 Mental Health Services

(A) Deinstitutionalisation

1. The United States

Half a century ago, there were two different choices for mental patients in the United States. Those who were wealthier were able to receive psychotherapy whereas the poor could only receive services provided by mental hospitals in their region.

Reduction of institutionalization was advocated in 1950s. Psychiatrists believed that deinstitutionalization was beneficial to mental patients as they could enjoy closer contact with their families and the community. This idea has received widespread recognition. With advancements in medicine, the medications available allow patients to function normally outside of hospitals.

The federal government of the United States subsidizes the community medical centres. With the establishment of Medicaid, the U.S. health programme for people with low income and resources is jointly funded by the states and federal government and managed by the states. It provides more opportunities for mental patients to be transferred to community medical centres, infirmaries and other organizations from mental hospitals.

There are 3 components of deinstitutionalization:

- Release of hospitalized patients into the community
- Prevention of subsequent re-admission into hospital
- Adequate provision of alternative psychiatric services in the community

2. Hong Kong

In Hong Kong, people with major mental disorders are hospitalized, usually in Kwai Chung Hospital and Castle Peak Hospital. They are hospitalized until their condition becomes stable with the control of medication. The patients need to be hospitalized when their condition is worsening, or if it is feared that they will harm themselves or others. This also applies to criminals with mental disorders. Siu Lam Psychiatric Centre was opened for this purpose.

However, some people make the criticism that institutionalization will result in adverse effects on the treatment and rehabilitation of the patients. Patients are segregated from society. They may encounter problems when they reintegrate into society later.

The psychiatric out-patient units of the general hospitals may be one of the solutions to the segregation and institutionalization of mental patients. The psychiatric department, like the department of surgery and department of internal medicine, is only one of the departments in a general hospital. It may enhance the acceptance of psychiatric services in the community. The public therefore is able to understand that mental patients do not necessarily need to be hospitalized or placed in mental institutions. Instead, they can enjoy a variety of therapies and social activities within the community. In addition, in view of medical resources, when the psychiatric unit works collaboratively with other units in the general hospital, it enables concentration of treatments and human resources and thus increases the economic efficiency by lessening the financial burden involved in building mental hospitals which segregate patients from the community.

Furthermore, day hospitals are another choice. Day hospitals can reduce the feeling of "imprisonment" and "segregation" in patients. Patients are able to maintain a good relationship with their families and enjoy social and economic activities. It reduces their dependency and withdrawal from society and helps them integrate into society. It also reduces the responsibility of the family to take care of patients and the financial burden that is brought on by hospitalization. In addition, patients are able to enjoy the same treatments that are provided by in-patient hospitalization.

(B) Community and rehabilitation services

Effective community services and rehabilitation services can reduce the need for institutionalization for psychiatric patients.

1. Community services

✎ Psychiatric centres and outpatient services
Psychiatric centres and outpatient services provide mental health assessment, treatment and referral services for the public. The legislation in Hong Kong requires mental patients who have been discharged to comply with the following: take on the responsibility to attend follow-up consultations in specified psychiatric clinics; comply with taking recommended medications; and allow access or monitoring by social workers and community psychiatric nurses. The above conditions are clearly written and fully understood by patients. When the patient does not comply with these conditions, the case psychiatrist has the right to recall the patient to hospital for further treatment.

✎ Child Psychiatric services
The features of mental health problems in a child may differ from adults. This may be due to the fact that the intellectual ability and the sense of self-

awareness of a child are not fully developed yet. The features may be in the form of physical health problems, communication problems, and learning disabilities with behavioral disturbances.

✎ Psychogeriatric services

The problem of ageing in Hong Kong implies the demand for psychogeriatric services will increase. Until 2009, psychogeriatric wards are only available in Kwai Chung Hospital and Kowloon Hospital. The major mental disorders among elderly are dementia and chronic schizophrenia.

✎ Community Psychiatric Nurses

The major tasks of psychiatric nurses are: visiting discharged mental patients and providing direct care and rehabilitation services to the clients, and preventing relapse. They also help the clients adjust better with their families as well as reintegrate into the community.

2. Rehabilitation services

Rehabilitation policy focuses on community care and aims to facilitate the reintegration of discharged mental patients into the community by helping them adjust to community life, establish life skills as well as good interpersonal relationships and healthy leisure activities.

✎ The Hospital Authority

The Hospital Authority provides a wide range of rehabilitation for psychiatric patients, including:

Within the hospitals: Occupational therapists, social workers and clinical psychologists provide intensive rehabilitation programmes to prepare patients better for discharge and to integrate into the community.

Within the community: Different psychiatric facilities include psychiatric day hospitals, specialist outpatient clinics and community psychiatric services.

➢ Community Psychiatric Teams
   Community Psychiatric Teams are part of the Community care facilities providing designated care and rehabilitation programmes to psychiatric patients.

➢ Community Psychiatric Nursing Services
   Community Psychiatric Nursing Services (CPNS) provides nursing care and treatment for patients in their own homes by a group of specially trained qualified nurses. Community Nurses administer proper nursing care to patients through home visits and at the same time, imbue patients and their families with the knowledge of health promotion

and disease prevention. For psychiatric patients, CPNS also provide crisis intervention service. They will report the patients' progress to the attending doctors when necessary to enhance the rehabilitation process. The ultimate goal of CPNS is to provide continuous care for patients who are discharged from hospitals and allow them to recover in their home environment.

➢ Community Psychogeriatric Teams
Community Psychogeriatric Teams are part of the community care facilities providing designated care and rehabilitation programmes to psychogeriatric patients.

Furthermore, there are four teams providing early assessment and detection of persons with psychoses while there are seven teams for elderly suicide prevention.

✐ Non-government organisations
NGOs are mainly funded by government subvention, providing a wide range of rehabilitation services:

➢ Long stay care homes
Under medical and rehabilitation policies, a hospital is a place for providing treatment to patients with serious illnesses, whereas chronically ill patients are discharged to long stay care homes, e.g. the New Life Psychiatric Rehabilitation Association in Tuen Mun. Apart from providing care, these homes also provide:

✳ Training on social skills
✳ Training on living skills
✳ Vocational training and sheltered employment
✳ Help in establishing healthy recreation activities
✳ Aftercare services

➢ Halfway Houses
A halfway house is designed for discharged mental patients who do not rely on aftercare services. It is hoped that they can find a job in the community and carry out housework in the halfway house, allowing people to begin the process of reintegration into the society by sharing responsibility and adjusting to real working environments.

Some mentally ill patients may not be welcomed by their families. They may be homeless or have difficulties in making adjustments in the community. The halfway house may act as a bridge between institutional care and community care in Hong Kong. They have a transitional function that provides living skills training and social skills training, to name just a few, in a home based setting for them. It not only provides accommodations for the residents, but also trains them in independence

of living, to achieve an optimal level of skill for their re-integration into the community though casework, group work and family work, which will eventually help them to adjust to their new social life and work.

➢ Aftercare services
Aftercare services are designed to facilitate patients discharged from hospitals or halfway houses to reintegrate into the community, by helping them adjust to their daily living as well as their social and working environments. Social workers will follow up on the cases of discharged patients and provide services such as:

* Counseling on employment and work
* Solving problems that encounter in daily life
* Counseling on family, social and interpersonal relationship
* Organizing self-help groups
* Assisting in the application of social services
* Referral of appropriate social resources or facilities to enhance social
  supporting network
* Assisting in regular follow up consultation and medication
* Dealing with urgent events and crisis

➢ Sheltered Workshops
The aim of sheltered workshops is to provide appropriate vocational training for discharged mental patients, and enhance their working capacity in order to reintegrate into society wherever possible. As an example, the New Life Psychiatric Rehabilitation Association established a farm, which provides working opportunities near the Castle Peak Hospital, for discharged mental patients before the establishment of the sheltered workshop.

➢ Activity centres
The target of the activity centres are mental patients who are in recovery and those with mild cases of illness. Referral of cases depends on the degree of recovery. The aims of the activity centres are to increase the ability of patients in adjusting into society, working ability, achieving an optimal level of independence, and prevention of relapse.

➢ Self-help groups
These provide valuable support networks for mentally ill persons to enable them to reintegrate into the community. Inside the groups, psychiatric patients or their family members may share their feelings, concerns and experiences with one another. It is also a channel for them to ask for advice or assistance. The support will be more effective if members of the group usually have similar backgrounds or experiences regarding the same conditions of health.

(C) Family care and support

When the mental patients stay in the community, care givers need more long-term support for their social life and financial difficulties. These forms of support are vital to them.

The support services for families are provided by the Hospital Authority, the Social Welfare Department, the Family Resources Centre and self-help groups of some Non-government Organizations. In October 2007, the Social Welfare Department and the Hospital Authority collaborated and implemented the Community Mental Health Intervention Project to help those who are susceptible to mental disorders and provide professional care services for families, such as casework, treatment and support services in order to help them deal with problems that are induced by mental health.

The following are examples of institutions that provide mental health services:

1. Castle Peak Hospital – Services for Family and Caregivers (http://www.imh.org.hk)

Seminars for family members: conducted by psychiatrists, clinical psychologists, pharmacists or other professional workers, with question and answer sessions to answer questions raised by participants.

2. Richmond Fellowship of Hong Kong (http://www.richmond.org.hk)

The Richmond Family Institute is aimed at providing education, training and support for the family members and relatives of people, as well as the general public, with mental illness.

Aims
- To provide knowledge of mental illnesses and mental health for family members and promote their mental health
- To assist and provide support for their family members to deal with problems of patients
- To enhance the skills and abilities of caregivers in taking care of patients
- To provide education and training for workers in the field of mental health
- To promote mental health in the community, accepting patients and enhance interaction between two parties

Services provided

- Consultation and interview: individual counseling and emotional support
- Educational and skills training activities: group discussion and seminars, continuous training class and resources corner
- Community-based education programs: promotions, exhibitions and seminars
- Others: referrals

3. Community Mental Health Link Units

Community mental health link units were established by the social welfare department in 2002. The objectives of these services are to support the non-government organizations in providing services to people with mental disabilities and their family members to help them develop the physical, intellectual and social ability needed for integrating into society.

(D) Public Education

Public education is important to mental patients as well. It can promote social inclusion and public acceptance, as well as prevent social isolation and exclusion. By increasing the knowledge and understanding of mental disorders, the general public will be more ready to accept mental patients to be integrated in the community.

The government, NGOs and various district bodies can collaborate and provide information about mental disorders, treatment of diseases, prevention and early detection of syndromes, and information on rehabilitation services that are available in society through different media and campaigns held in districts.

This education can be initiated by front line workers, such as social workers and teachers, who have more opportunities to be in contact with the public. They can educate the public about the symptoms of mental disorders and thus allow early diagnosis and treatment of disorders. Being afraid to seek medical help, or incorrect use of medications will only delay proper treatment, worsening the situation, and eventually coming at a heavier cost. With regard to mental disorders such as schizophrenia, the relapse rate is high during the first two years after treatment. The initial symptoms during the relapse may be different from those previously experienced. Hence, even the relatives or the patients themselves may not be aware of the fact they are becoming ill again.

Public education is also important for the mental health of the public. People should know how to understand themselves, others, and the society they live in. To understand oneself, they should understand their needs in the first place, such as whether they can

reach target by using the resources that are available at the moment, or which targets they should try to reach first. People who are able to understand themselves are able to understand others by stepping into other people's shoes. This is a formation of empathy as well as a communication skill. People can achieve the best adjustment by observing the environment and possible directions, understanding others and satisfying one's needs. In addition, people have different needs at different stages across their lifespan. Those who do not understand themselves well, those who are divorced from the reality of their situation, and those who are not well prepared for predicable changes will encounter difficulties in adaptation to unpleasant situations and stress. Therefore, a holistic education on mental health can help the public maintain a good mental status that reduces the social burden brought on by mental disorders.

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