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978-0-521-46088-0 - Mental Health Service Evaluation

Edited by Helle Charlotte Knudsen and Graham Thornicroft

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With the emerging international consensus towards deinstitutionalisation and community care of the mentally ill, there comes a growing need for evaluation of mental health services. Redressing the current lack of guidance on conducting this research, this book comprehensively reviews the most recent developments in research design, method and measurement. At the level of both whole systems and individual programmes within mental health services, the issues are adeptly illustrated with practical descriptions of comprehensive evaluation projects.

The book is divided into six parts. Part I introduces the background to community services and provides an overview of research levels and designs which are further illustrated in Part II. Part III focuses on technical measurement issues and new developments in statistical applications. Special problems and system-level research are highlighted in Part IV. Parts V and VI then address programme-level evaluation-projects, including user outcomes and needs assessment, and finally consider the health economic implications.

All those involved directly in mental health services research or who wish to learn from its evaluation will find this book of importance.

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Mental Health Service Evaluation

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Foreword

The veracity of the statement that mental illnesses are frequent and can have severe consequences has now been accepted in most developed and many developing countries. The notion that mental health services can offer the mentally ill more than asylum and protection is also becoming accepted; but just how much health services can do, at what cost and how remains a matter of debate and uncertainty because information about the issue is insufficient in quality and quantity. In part, this is due to the methodological difficulties arising in any attempt to measure changes in human behaviour, quality of life and levels of functioning in social roles. In part, the lack of data is due to a reluctance to carry out detailed (and often tedious) measurements and to provide sufficient resources to make assessment in a scientifically and ethically acceptable manner. It is still rare to find that research on service evaluation receives as much recognition in academic circles and among decision-makers as its complexity and importance deserve. In part, data are difficult to obtain because those who operate services fear that the data will be used to reduce budgets, personnel or both, or to induce changes in the operation of services. In part also, there is insufficient awareness about the existence of methods that can be used in the evaluation of services and about the advantages that those who are involved in providing them can have if valid and relevant data are made available without delay.

The authors and editors of this book have every reason to be proud of its appearance. They have brought together many of the elements which have to be available if evaluation of mental health services is to happen and be useful to all concerned. The book contains lucid reviews of epidemiological issues arising in evaluation programmes,

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clear and straightforward descriptions of methods which can be used to evaluate programmes and health service systems, and fine examples which illustrate the issues raised.

It is my sincere hope that this volume will serve not only as a repository of knowledge but also as a tool box which its authors and readers will use in making evaluation an integral part of practice. If it does become that, evaluation will not be an act done by third persons for reasons external to the goals of the service and of the people employed in it, hated and eventually useless or harmful: it will be as much a part of work that satisfies and helps as are the other components of mental health care. There are hundreds of millions of people in the world who could benefit from mental health care: rational evaluation will make our resources go further in providing them with the help they need.

Norman Sartorius

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Preface

Since the beginning of the nineteenth century, society has struggled to meet the ever-growing needs for psychiatric services from an ever-growing population with ever-growing demands for better standards of care. During the nineteenth century, mental hospitals were built outside the urban areas; these hospitals were organised in accord with the best standards of care of that time. But because of progressive overcrowding and understaffing, the care of the patients in these hospitals became inhumane and humiliating. These conditions led to an ideological movement intending to give back to patients their dignity and autonomy. This movement has been encouraged by changed perceptions of an individual's rights and dignity which have blossomed during the twentieth century.

At the present time the ideological assumptions guiding the development of policy in the care of the mentally ill have been joined with economic considerations. As a consequence, the reduction in the availability of psychiatric beds has not been sufficiently balanced by an increase in community services for the mentally ill. Among the most visible social consequences of these changes are the homeless mentally ill wandering the streets of metropolitan areas and the unacceptably high numbers of people with mental illness who remain in prisons. To address these deficits, changes in service must both improve standards of care and at the same time be cost-effective. It is no longer acceptable for well-intentioned, humanitarian professionals alone to be involved in planning decisions; the caregivers, the service users and their relatives must also be involved. Consequently it is now necessary to set clear goals for services, to develop new, more effective treatments, and to develop services which are based on evidence.

But research and practice in mental health are not straightforward.

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The complexity of society must be reflected in the complexity of the research. The care of the severely mentally ill patient involves more than the patient, his or her relatives and the psychiatrist. The social welfare system, volunteer organisations, primary health care staff and the criminal justice system all play key roles in the pattern of care. Their joint impact must be a part of the overall assessment of the effectiveness of the care of the patient.

The strengths and weaknesses of the newly evolving ways of organising mental health services and institutions have been subjects of growing concern in the last 30 years. The early 1970s saw an enthusiastic wave of research efforts in the evaluation of community mental health services. The focus of these studies was evaluation of changes in the use of services. We are now witnessing a new wave of research activities in this area. This new work continues the original lines of investigation and also stresses meeting the needs of the mentally ill and the health economic consequences of structural changes in the mental health system. These new investigations have been supported by developments in the areas of epidemiology and statistics. Equally important is the growing concern of national health authorities with the improvement of mental health services, which is expressed in many countries by setting mental health services research as a high priority.

Even though there is an emerging international consensus that mental health services should be increasingly decentralised away from central hospital sites, and that community mental health services should be sensitive to the needs and views of their users, there is still a lack of guidance on how relevant research should be conducted. This book provides a relevant and timely contribution to this rapidly developing field. The authors are both directly concerned with the planning, implementation, delivery, evaluation and modification of community-based mental health services, and have outstanding research qualifications in health sciences, social science, statistics and epidemiology.

The book addresses those researchers, research assistants, ancillary staff, public health physicians and research workers, and mental health service staff who are producing, or wish to learn from, the results of mental health service evaluations. We also intend to reach planners, mental health managers, finance directors, public policy staff, and politicians who wish to be informed by the results of research projects in their judgements, and who wish to use this

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information to commission higher-quality research in future. We also wish to reach students of these various disciplines who wish to upgrade their technical knowledge of mental health service evaluation during their training years.

The book is divided into six parts. Part I introduces the history, background and goals of deinstitutionalisation and community mental health services and provides an overview of research designs and the levels of research. In particular it addresses the interrelationship between evaluative research and public policy. Part II (Comprehensive Service Evaluation Projects) illustrates these issues with practical descriptions of three comprehensive evaluation projects: the Copenhagen Community Psychiatric Project (Denmark), the Mannheim Project (Germany) and the Nacka-Värmdö (Stockholm) Project (Sweden). Part III (Methods: Measurement, Strategies and New Approaches) focuses on more technical measurement issues and on new developments in statistical applications. Part IV (System-Level Research) highlights special problems and opportunities in research at the level of the mental health system. Part V (Programme-Level Research) considers the special circumstances of programme-level evaluation projects including patients' and caregivers' outcomes and the assessment of needs. The volume concludes with Part VI (Health Economics in Mental Health) that contains a chapter on health economics at programme and system levels and a conclusion.

The inspiration for this book was lectures given at a NATO Advanced Research Workshop on Research Evaluation of Community Psychiatric Services held in Il Ciocco, Italy, on 3–7 September, 1993, where contributions from many outstanding research experts in related fields were presented. We wish to thank NATO (the North Atlantic Treaty Organization) for the grant which facilitated that workshop. It is refreshing that an international body dedicated to military purposes can also find the resources to contribute to issues of health. We owe especial thanks to the Institute of Preventive Medicine, the Copenhagen Health Services, and especially to Ms Vibeke Munk, the administrative director of the Institute, for their outstanding contribution to the organisation and coordination of both the NATO workshop and this book. We wish also to thank Professor Sarnoff Mednick, Social Science Research Institute, University of Southern California, for his considerate and inspiring contribution as a member of the organisation committee and in his guidance in the development of the book. Finally we wish to thank the

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