

A FIRST PSYCHOLOGICAL HELP IN MENTAL HEALTH

MARIANA DODAN*

*Doctor in Psychology, Principal Clinician Psychologist, Child and Adolescent Psychiatry Department,
"Prof. Dr. Alex. Obregia" Psychiatry Hospital Bucharest
Scientific Researcher - Degree II

About psychological intervention...

The specific way in which the psychological factor ensures an internal balance and an evolutionary adaptation to the ever changing environment, convince everyone that it is a determinant factor in any activity that we carry out.

If we think that psychological intervention is a specific activity carried out in order to achieve this internal balance, which is necessary in a situation of adaptation, information about how it can provide first aid in mental health is important. It is the way in which social change can be influenced - a manifest, observable and verifiable transformation with respect to clearly formulated goals - that will emerge within a short period of time. The psychological help that is established in this activity can also be seen as a relationship in which a person (psychologist) who is in a better psychic balance helps, through a more or less conditioned attitude of acceptance, another person (patient) in difficulty, to achieve the psychic parameters necessary for a good adaptation.

The crisis is the situation where a person is confronted with the achievement of an important goal of his life with an obstacle which, for the moment, is insurmountable by using the usual problem-solving methods leading to a period of disorganization during which they are tried many solutions. Psychological intervention aims to influence psychiatric disorders considered as requiring

treatment by psychological methods, with the help of techniques that can be learned, centered on aspects of development, formulation and solving of specific problems, decision making, crisis control, development of an insight personally, improving affective feelings or internal conflicts, improving relationships with others.

Nothing threatens the life of the child or adolescent patient more than a crisis already underway, which can negatively influence it. We have found that it would be useful to know and apply techniques of psychological intervention to improve, on the one hand, the efficiency and the power to teach theoretically how to adapt and, on the other hand, the power to experiment what he learned. This is because it is clear to us that how to apply psychological intervention as efficiently as possible to improve the ability to experience and/or improve personal development requires some mastery in using intervention methods and techniques. Diagnosis and psychological intervention in externalization and/or internalization disorders in children and adolescents is a particular challenge because these disorders occur frequently, may have a chronic evolution and sometimes are difficult to treat. Currently, the consequences of non-treating mental disorders in time significantly influence the harmonious development of children and adolescents. Regardless of the situation, the focus is on interference between the three operating environments: social, family and school. The application

of psychological intervention techniques increases, on the one hand, the efficiency of the achieved performances in the activities carried out, and on the other hand, the understanding of the way of adapting to the situations they are confronted with.

I do not think there is any specialist who does not admit that when referring to a child and adolescent, it would be useful to know and apply some modalities of intervention that relate to processuality and development, the necessity of which was determined by the emergence of psychiatric disorders that can affect intelligence, development and cognitive functioning, which will improve on the one hand the efficiency of their work and, on the other hand, improve their ability to experience life situations. At the same time, however, we think it is necessary to draw the attention of readers that they may be disappointed that they will not find “*recipes*” for the different situations they face.

Although we will only present a limited vision of psychological intervention in a concise and somewhat pragmatic manner, it will follow (and wish to some extent) to convince you that, in order to improve adaptive capacity a problematic situation of children with mental disorders, we must first know the specific way of doing the activity that can increase its efficiency. In critical situations, scientific psychology is the only one able to substantiate an action of a specialist. When talking about psychological intervention, we must emphasize that, while some interventions treat the patient using the model medical, many approaches do not adhere to the “*disease/healing*” symptom model. However, the medical model is often used in psychological intervention research, including both quantitative analysis and qualitative analysis. Researchers in the field have developed various models and theories, either biological or psychological, to explain the causal issues of psychic disorders, but data are far from defining.

Situated at the boundary between practice and theory, psychological intervention aims at the harmonious development of the person and aims to contribute to the alleviation of mental suffering. A current trend in psychological intervention is that, using a wide range of techniques, this is achieved by specific means and methodologies relating to a clinical and theoretical framework that aims to reduce or eliminate symptoms (maladaptive behaviors) and rebalancing by modifying the causes of these symptoms (disorders) and/or sometimes by restructuring the personality.

Most forms of psychological intervention use conversation as a way of approaching the patient, but there are forms of psychological intervention that use other ways of communication such as written language, artwork, theatre, stories, play (especially in approaching the child), drawing, dance, movement, sculpture, films.

It is obvious that psychological intervention is targeted by the mechanisms that are supposed to be involved in health and illness. Thus, depending on these mechanisms, the intervention techniques applied can help the patient to identify intrapsychic conflicts and reduce them to achieve better adaptation and, thus, a psychic balance. Psychological intervention techniques can be applied to overcome the blockages that underpin psychological disorganization. The psychological intervention attempts to support the patient in overcoming the obstacles faced in personal development being applied both individually (the subject of the intervention being the patient) and in the group (the subject of the intervention being the patient inserted into a therapeutic group or even the group, for example a family etc.) to optimize interpersonal relationships (relationships between children and parents), self-knowledge and personal development.

In terms of content (type of problem), psychological intervention is a specific

intervention designed to optimize adaptation, self-knowledge and personal development, and/or prevent the emergence or amelioration of emotional, cognitive and behavioural disorders. Several stages can be highlighted in the psychological intervention process, which is supposed to contribute to promoting mental health and diminishing/eliminating clinical manifestations. A first step would be to contact the psychologist with the patient and agree on the terms of the psychological support relationship. After clinical evaluation (in the form of psychiatric/psychological assessment) and psychological diagnosis, clinical conceptualization (associated with diagnosis) would be followed. The application of psychological intervention techniques (including the follow-up of the patient's evolution and psychological intervention) supports the patient to gain an independent life, preserving his new functional psychological balance. Often, both "*clinical assessment*" (What is the initial state? What are the problems?) and "*Clinical conceptualization*" (How did these problems develop?) are not only necessary but important components of the approach of psychological intervention.

Psychological intervention plans are used to solve the symptoms - problem. A therapeutic intervention can help improve mood disorders (anxiety, phobias, depression), improve communication, work efficiency, attention, memory, emotional balance, interpersonal relationships, performance, quality of life, personal optimization, self-control of behaviour and behaviour, it helps to solve life problems, increase the overall psychic resistance and diminish the undesirable consequences of stress, improve and maximize performance, self-refinement, self-control, optimal efficiency in work, elimination of failure attitude. Really useful in addressing patients to optimize performance in their activities are psychological intervention techniques that can use relaxation, respiratory

gymnastics, hypnosis and self-hypnosis, mental self-programming, cognitive restructuring, rational-emotional method, assertive therapy, combined techniques of mental self-regulation, cognitive-behavioural and permissive orientation, suggestive psychotherapy.

If we ask how it works, then one of the answers would be that the theory behind psychological intervention argues that planned mediation in a negative situation may have a positive effect on the outcome. Intervention can help change behaviours that interfere with the well-being of the patient, family, and friends. The purpose of any kind of psychological intervention is to take measures that will lead to a positive change in the patient's way of life, to modify or prevent self-destructive behaviour.

There are several types of psychological intervention: one specific to the clinical psychologist, the so-called basic psychological intervention that is more general in nature, psychological counselling and psychotherapy that involve training in a specific way of intervention. Most specialists believe that basic psychological intervention by a clinical psychologist is about health education, health promotion, and a healthy lifestyle (e.g. through primary and secondary prevention). At the same time, the psychologist can also provide supportive counselling and therapy, crisis counselling and psychological assistance, optimization and personal development, self-knowledge (e.g. coaching).

It is important to note that, depending on the patient's problem, the sequence to be followed by the psychologist in choosing a psychological intervention is made according to the aspect of the efficiency and validity of the theory (scientifically validated interventions). When this criterion cannot be met, then scientifically validated psychological interventions are chosen only in terms of efficiency. The choice of psychological interventions considered effective by the consensus of

specialists is made before choosing psychological interventions that although not scientifically investigated derive from a tested and validated theory that must have the consent of the professional membership group to be potentially useful and non-hazardous. The latest types of psychological interventions that the psychologist can call when the other types do not exist are adherent derived interventions from the professional (theoretical and practical) training and which the consent of the other colleagues justify in the given case as potentially useful and non-dangerous. Short-term therapy focused on problem, recovery and re-education (individual, group), standard relaxation and suggestive therapies can also be used. These include psychological counselling (e.g. by behavioural techniques) specific to medical objectives (e.g. increased adherence to treatment, lifestyle modification, etc.) and/or conflict management and negotiation.

The help that can be offered through psychological intervention is that in every form of psychological intervention that starts with an explanation (given to patients who are usually faced with personal difficulties that cause a high level of distress) the fact that distress is adaptive and so the patient understands that he "*can do something*" to fix his situation. Engaging in healthy activities leads to positive changes in thought, emotional expression and relationships (inefficient behaviours). The emphasis is usually not on the form of psychological intervention but on the patient's beliefs about the effectiveness of the treatment and the collaboration with the psychologist.

What makes psychological intervention work and why it is appropriate to choose a particular form of intervention focuses on psychological intervention research, which shows that there are no significant differences in the type of technique used and the benefit that it has the patient. However, it is very important that psychological "*treatment*" be

given by a specialist and all interventions should be in the patient's interest, so as to favour the appearance of his/her well-being. When clinical research shows that one type of intervention is more effective than another, the differences are only reported for the treatment applied.

The effectiveness of the therapeutic intervention program occurs when contact with science (specialist research) is maintained and dynamism is present in the planning of a safe, effective and appropriate intervention strategy. Research shows that the therapeutic alliance is the essential element for progress, with specialists with a developed clinical sense defined by a special ability to perceive, understand and transmit messages to the patient (emotionally and socially). Just as the therapeutic alliance is important in the case of medical treatment for mental disorders, so a relationship of collaboration between the patient and the psychologist (what we call the "*therapeutic relationship*") is an "*ingredient*" that ensures the results of the intervention. The therapeutic relationship is essential in terms of the effectiveness of intervention to achieve the goals proposed (with regard to the well-being of the patient).

In many cases, specialist studies on psychiatric disorders indicate that psychological intervention can be effective along with psychiatric medication. Medication is a priority because it can provide the condition that the patient needs to carry out the psychological intervention process. Difficult to explain is a phenomenon that we are confronted with, namely, that most patients who are treated with psychiatric medication believe that this is enough to solve their problems. They need to be aware that mental disorders are not only caused by "*chemical imbalances in the brain*" that can be remedied by medication, but also by psychological imbalances, which can be remedied by appropriate psychological interventions. Mostly, drug treatment suggests that the problem is of biological

nature, so patients are not accountable for their actions, considering that administration of pills is enough for the change they need.

Although medication is important in treating a patient, health services are much more effective when offered with the support of interdisciplinary teams. Collaboration between specialists is particularly important when assessing and diagnosing psychiatric disorders, centred on the level of patient functionality and the symptom area. Often, psychiatric assessment is part of the diagnostic stage for a patient.

There are studies proving that intervention is much more effective if psychopharmacology is combined with psychological intervention, psychiatric medication being part of the intervention strategy. Many physicians recommend psychological services to patients as a treatment, as there are specialists who believe that in the first instance it would be advisable that in some cases psychological intervention should be applied and only later to apply a medical treatment (if it is still need). Like any other medical problem, the diagnosis of a mental disorder in children and adolescents must always be done by a specialist. It will be able to recommend an appropriate and customized treatment program to avoid persistent or worsening problems. The more psychological the intervention is administered, the more effective it will be! Psychological intervention becomes effective provided the applied techniques follow the personality characteristics of the patient. We are often challenged by the challenges of "*craft*" when the child's functional psychological potential has to be highlighted by using intervention methods and techniques that give him the possibility of individual and social expression in the activities he carries out.

It is recognized the need to work in psychological intervention with appropriate scientifically validated application and validation techniques. As a result, the psychological

intervention has significantly changed its approach in a direction - modern, dynamic, formative - oriented to the clinical diagnosis obtained. Being the stage preceding any psychological intervention program, clinical assessment is a starting point for any type of intervention, setting out, on the one hand, the current level of psychological development and, on the other hand, the directions and levels of further development because we know that functional psychic potential is a predictor of psychic development.

The "*radiography*" of the segments to which a psychological intervention program can address, captures deficient levels, making a "*map of psychic functioning*", "*a map*" that is a starting point in any kind of intervention on the possibility of psychological reorganization. Performance modelling to optimize the psychologically functional potential of children with mental disorders tends to occupy an important place today, as today's child and adolescent "*spend*" much of the time as subjects under instructional education. The level of development of the various functional areas can be improved to some extent by well-organized activities.

Although there are disputes between different psychological interventions guidelines that address primarily the importance of behavioural change (cognitive-behavioural therapy) versus the importance of insight (psychodynamic orientation psychotherapies), recent research shows that a combination of these is the most effective in treatment.

This is why integrated psychotherapy recommends the middle way in psychological interventions. As psychologists suggest, psychological intervention involves optimizing personal life, relationships, mental health, and has a special importance in improving psychological problems, by regulating emotional life and behaviour.

Psychological intervention remains a matter of major importance, always in the present, due to the help that can be provided

to mental health by influencing the performances achieved in the activities of the child and adolescent.

Providing psychological intervention can be considered effective if the proposed intervention strategy makes sense for the child and adolescent patient and is convinced that it can help. But it is essential to make progress! Patients usually have a positive response immediately after the psychological intervention begins, and if the results are delayed, then it is important to identify the

causes that lead to their absence. We believe that psychological intervention is effective when patient functionality becomes appropriate for him.

Of course, psychological intervention should be promoted as an effective practice for mental health. In most cases, we believe that those who have benefited from psychological intervention are the best promoters of these services, but it is not enough, it also deserves to be promoted among specialists who need to become aware of their importance