

The times

A mental health consultation to colleagues

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From time to time I am asked to help colleagues from other disciplines with interprofessional issues. Here is an example. To avoid identifying the workers concerned, names have been changed and some details omitted.

I received a telephone call from the manager of a centre which worked on a non-residential basis with disturbed young people. He said he was approaching me because I had no other involvement with the centre, its staff or its clients. He told me he was having difficulties with a member of staff. He sounded anxious and asked that I help as quickly as possible. I arranged to meet them both the next week.

They arrived together, John, a quietly spoken man of about 30, and Mira, an Indian woman in her early 20s. He appeared tense and she angry. I asked them what they wanted to achieve. Mira said she didn't know. I gained the impression that she was there at John's request. He said he wanted an improvement in their working relationship. Mira said that this was unlikely. I asked her to tell me the problem.

Fourteen months previously a white adolescent had demanded that she wash up the dishes for him. She refused. He threatened if she did not, he would rape her. She refused again. He grabbed her skirt. She held his arm. He walked off. She felt very distressed and when she told her colleagues, felt that they responded as though nothing had happened. Three weeks before our meeting Mira saw a white male client swear at and then hit a black female worker. The police were called. She asked herself why there had not been a similar response when she had been assaulted. She felt even more unsupported.

Mira had become increasingly angry with John. She had told him that she hated him and could not talk to him. She had spoken to John only when absolutely necessary and had avoided being with him or looking at him. John sat quietly while Mira spoke. He then told me that he had been away when she had been assaulted. He had tried to deal with it on his return but had mismanaged this and behaved as though it were Mira's problem. Both of them were speaking in restrained tones and seemed to be controlling very strong feelings. There was little eye contact between them.

They told me that several female black workers had suffered racial and sexual harassment from clients. John told me that, while he said he would not allow such behaviour, he would not withdraw the service from clients. Mira said that John did not understand what it is like for black women in such a work-place. They told me that their employers did not have guidelines for dealing with abuse of workers by clients.

I reminded them that this was a work problem and that their behaviour at work was defined, even if poorly, by contract. They had a choice. Either could decide that the other was not fulfilling work obligations and so make a complaint; either could leave; or together they could try to resolve their problems. Mira said that it didn't work like that. She said that one day she was going to explode.

I suggested that we meet one more time to try to deal with the unresolved feelings. I acknowledged that I was a white male in an authoritative position and that this might affect the acceptability of my offer. John said that he would like to meet again. Mira said she didn't know if it would work. I said that I, too, did not know if it would work. She said she would try. I said I could provide a room where there could be noise without attracting the attention of other people.

Two days later we met as planned in a large carpeted room with three soft chairs. Mira and John positioned their chairs at opposite sides of the room, she glancing around and fidgeting, he looking down at the carpet. I asked them to turn their chairs to face each other and they did so. I suggested to Mira that she maintain eye contact with John and talk to him starting with the words "I resent . . .". I suggested that he remained silent. Glancing at John and in an angry but controlled voice she said, "You did nothing", "You don't care", "You said you would do something but you did nothing". I asked Mira if she thought she was sounding as she felt. She said, "No". I suggested that she brought her chair closer to his and I helped her to move it. I suggested she tried again to maintain eye contact with him. She repeated her earlier statements to him but sounded more angry and spoke in a louder voice. "I hate you, I hate

you" she said. "I hate you, you did nothing". She began sobbing and did so louder and louder, burying her face in her hands. I got out of my chair and placed my hand on her shoulder. I suggested that she look at John. She did so sobbing loudly, John sat silently with tears rolling down his face. I felt the tears in my own eyes. After some minutes, her sobbing subsided and gradually stopped. I asked John to look at Mira, to maintain eye contact and talk to her. He began crying, quietly and then more loudly. Through his tears he said how sorry he was, "Sorry I did not do more to look after you". He repeated this and similar statements and then began sobbing uncontrollably. I placed my hand on his shoulder. Mira sat quietly and tearfully, as did I.

John's crying subsided. I asked them to bring their chairs right up to each other. I helped them do so and asked them to hold each other's hands. They did this, looking quietly at each other. After a few moments Mira said, "At last I have got through to you. I was hurt and now you are hurt. Though it's not all okay I do feel a bit better now". John said nothing.

I suggested that Mira make other statements beginning "I demand . . .". She thought for a moment and then said, "I demand you don't say you'll do something if you won't or can't. I demand you do what you say you will do."

John acknowledged that he had heard what Mira had said. She asked what would happen if there was a request that the adolescent came back. John said that he would say "No", and that if his manager insisted that the adolescent came back, then he would threaten to resign. Mira said "No, I don't want that". She repeated that she just wanted to know what he would do. He repeated that he would say "No".

I encouraged John to make demands of Mira. He said "I demand that if I communicate in a way that isn't okay for you or makes you feel I haven't heard you or taken you seriously that you tell me". Mira said "Okay".

They sat quietly for a few moments. I said that perhaps we had done enough. They agreed, I said that, to facilitate the transition from this time to the rest of their day, they should tell me in some detail what they would be doing next. They did this. I asked if they felt all right to carry on. John said he did. Mira

said she did not. She said she needed to be by herself to make sense of the past hour which seemed somehow unreal. I said I was available if needed but was not suggesting that they did need me any more. They thanked me and we said goodbye. I have not heard from them since.

Comment

My intervention was limited, focused and brief. It used specific techniques to allow a feared crisis ("explosion") to be worked through. Those techniques included encouraging eye contact, proximity and physical contact, and direct communication. It was also essential to provide a safe containing environment. This was achieved by the combination of my support and encouragement and a room where it was all right to make a noise.

A more far-reaching intervention would have included the manager's manager and/or the staff group. It would have involved a discussion on sexism, racism and violence. I did not attempt this, partly because it was not what I was being asked to do. However, the request to me came from the white male manager not the black female worker, and I am left with some unease. I do hope an improvement in the relationship between John and Mira might facilitate other changes within their organisation without me being directly involved.

In my desire to evaluate this work, I would very much like to know what has happened since the consultations. However, it was not in our contract for me to ask and I feel that to do so now would be an unwise intrusion.

Is this work for a child psychiatrist? It might not be specified in many job plans. However, child psychiatrists claim expertise, not only in the treatment of mental illness but also in other areas relevant to the mental health and normal development of children. Consultation work is an opportunity to use this expertise for the benefit of children and adolescents who for one reason or other, we do not get to see in person. It is also an opportunity to support and increase the effectiveness of our multidisciplinary colleagues, at the same time demonstrating to them some of what we have to offer.

Lecture

Professor Michael Shepherd will deliver the William Withering Lecture at the Medical School, University of Birmingham, on 2 March 1992 at 5.30 p.m.

The title will be 'Epidemiological Aspects of Insanity'.