

Mental Health and Mental Illness

It is useful to think of mental health as a point on a continuum. Good mental health is when we feel well and able to cope with changing circumstances. Poor mental health is when we feel anxious, stressed and less able to cope. At the extreme of the continuum is serious mental illness.

Most of us are at different points on the continuum at different times. The following is important to remember:

- > The Scottish Health Survey 2022 estimated that around one in three people are affected by mental health problems in any one year.
- > All of us are likely to be affected by mental distress at some point, either when we experience mental distress ourselves or through a relative, friend or neighbour.
- > Around a third of Scottish appointments with general practitioners are for emotional or mental health problems.
- > Most long-term absences from work are due to emotional or mental health problems.
- > The most common form of mental distress is depression. Twice as many women as men are treated for depression.
- > Most people suffering from some kind of mental distress live in the community; only a small number are admitted to a psychiatric hospital.

Mental Health Issues for Mediators

It is important to approach the mediation process in the same way as for any other client. Mediators must use their own judgement and consult their supervisor if necessary to discuss and agree appropriate action.

Cases involving mental health may be more difficult to mediate because the mediator(s) have to decide:

- > if the person is able to understand what is required of them and their neighbour for mediation to work;
- > if the person is able to understand any agreement that they reach;
- > if the person is able to keep an agreement which is based on future behaviour.

Mediation is appropriate if it enables people to talk about their difficulties in a safe environment. An agreement can be drawn up as a statement of intent about how a person intends to behave in the future. The process has a positive outcome for all concerned, provided we are careful not to put vulnerable people at a disadvantage and are realistic about possible outcomes.

Questions to Consider

What indications do you have that there may be mental health problems?

- > Do you and your co-mediator feel anxious about the client's behaviour, appearance or surroundings?
- > Is there a high level of inconsistency/unpredictability in what they are saying or how they are behaving?
- > Are there aspects to the client's story or description of events which seem bizarre, highly distorted or very unlikely?

If There is Cause for Concern:

- > Is it appropriate to ask the client if there is any support available e.g. friend, neighbour, advocate?
- > Is it appropriate to ask the client whether it would be useful for you to contact their GP/nurse?
- > If you are really concerned, do you need to make excuses, leave, and inform your supervisor?

Personal Safety

Mediators need to know if a client's behaviour or perception of reality would be a real threat to themselves or other people. You should be aware of and comply with your agency's guidelines on personal safety at all times. For further information on personal safety see Sacro Briefing Paper no.10, Personal Safety For Mediators.

Drug Misuse

Much of the above can also apply to drug and substance misuse, although it is important to remember that most people suffering from mental health difficulties are not drug misusers and people who use drugs do not necessarily have mental health problems. See Sacro Briefing Paper no. 1, Alcohol and Drug Misuse.

Mental Health Disorders

Mental health disorders encompass a wide range of diverse illnesses, which have been given a variety of diagnostic labels. The nature and severity of disability, if any, will vary and individual circumstances should be focused on rather than the diagnosis.

The use of labels to describe mental illness or disorder is contentious and great care should be taken before "labelling" a person as being "mentally ill". A wide range of factors affects our mental health and the causes are not yet fully understood. All of us suffer from stress, sleeping badly, irritability, fears and mild feelings of "depression" from time to time without being classified as mentally ill. Confirmation of any diagnosis and appropriate assessment must be done by a doctor or mental health care worker. It should not be assumed that, because someone has been diagnosed as mentally ill, they are unable to take part in any mediation.

Mental Health - Conditions: <https://tinyurl.com/4tp9j87u>

Support: <https://www.samh.org.uk/>

This is one in a series of briefing papers on Community Mediation for practising and trainee mediators.

Published by the Scottish Community Mediation Centre

Sacro, 17 Gayfield Square, Edinburgh EH1 3NX

tel: 0131 624 7263

email: info@scmc.org.uk

web: www.scmc.sacro.org.uk