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IDEAS AND INFLUENCES

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A model for understanding and working with mental illness: Gerald Caplan and 'Principles of Preventive Psychiatry'

In the process of my mental health nurse training (1964-1967) I was fortunate enough to be taught by enlightened tutors who were keen to explore the latest discoveries and new ways of thinking. The emergence of psychology and the behavioural sciences as a means to understanding normal and abnormal behaviour was beginning to change the way in which nurses and other health professionals could analyse and better understand people in their care. It was inevitable that this would find its way into the education of mental health nurses. New medications were making significant inroads in the treatment of depression and psychosis. These treatments, along with more classical approaches such as psychotherapy were playing their part in the eventual closure of the large Victorian asylums. Nurses were beginning to follow their patients into the community setting and such was the changing nature of their work, they required 'new ways of working' and began to undertake community psychiatric nursing courses in the then polytechnic higher education sector. I had the enviable task and great pleasure of writing a curriculum for such a programme based in Manchester; however the BIG question was – how to place some structure on our understanding of psychiatric services so the patient journey and relevant nursing services could be better understood. Thanks to the supportive help of librarians and my health visitor teaching colleagues I discovered the work of Gerald Caplan and his seminal work - Principles of Preventative Psychiatry (1964).

Gerald Caplan undertook his psychiatric training in Birmingham, the Tavistock Clinic and the London Institute of Psychoanalysis. He later moved to the USA and Harvard. Curiously, I only found out recently that he was a Manchester University medical school graduate.

While in Harvard and at the University School of Public Health he established a 'Laboratory of Community Psychiatry'. Their fellowship training programme was pioneering and in 1964 he wrote his most famous book and the subject of this piece 'Principles of Preventive Psychiatry' (Caplan, 1964).

This influential book placed psychiatry within a public health model. Offering an approach in which primary prevention - aiming to reduce the chances of people becoming mentally ill; secondary

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prevention - seeking to detect and minimise the effects of mental illness; and tertiary prevention – reducing, as far as possible the residual effects of mental illness and the disability it can leave behind as a platform for delivering health care. For a new and inexperienced lecturer it offered salvation, and I was able to build a curriculum for community psychiatric nurses around his well described model.

Our community psychiatric nursing students were often well experienced practitioners like me. They therefore came late to reading and understanding the academic disciplines that underpinned psychiatry and the human condition. We had all been well schooled in a tertiary, predominantly medical model of care. The fact that we could now consider screening, early intervention and that tertiary care could be positive and purposeful was revolutionary. When my colleagues and I came to write our own first textbook for community psychiatric nurses in 1980 (Carr et al., 1980), it was heavily informed by Caplan's thinking. I remain in no doubt that education programmes such as ours, based in part on Caplan's work, produced creative and brave community psychiatric nurses who can now be found leading and developing innovative and interesting services.

Some 40 years from its publication, Caplan's work has the same important relevance in our understanding of mental illness and how we establish useful and relevant services. Few people have stimulated our thinking more. Look no further than the most recent mental health policies of this and previous government and the influence of Caplan can be seen in the proposed structure and provision of mental health services.

References

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