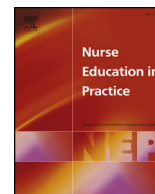




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## Review

## Advancing the knowledge, skills and attitudes of mental health nurses working with families and caregivers: A critical review of the literature

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## A B S T R A C T

Involving and supporting the family members and caregivers of people with mental illness is essential to high-quality mental health services. However, literature suggests that there is a lack of engagement between family members and mental health nurses (MHNs). Lack of knowledge among MHNs is often cited as one of the main reasons for this lack of engagement.

The aim of this review was to explore the knowledge, skills and attitudes that are required by MHNs to enable them to work more effectively with families affected by mental illness. A literature based critical review was used to access and review 35 papers in order to extract concepts that could inform the design of eLearning materials to assist MHNs advance their knowledge in this area. Two overarching themes were identified; 'Mental health problems and the family' and 'Working with the family'. From these themes, the knowledge, skills and attitudes required to work more effectively with families are described. The findings from this review provide a descriptive account of the knowledge skills and attitudes that are required for effective family work. In addition, the review provides an empirical foundation for education programmes in the area.

### 1. Introduction

The focus of this critical review is to explore what knowledge, skills and attitudes are required by Mental Health Nurses (MHNs) who wish to advance their knowledge when working with families where one or more members of the family experience a mental illness. The review is a part of a European Union funded project, which has developed open access eLearning materials [European Commission [2013–3403] for MHNs, educators, students, practitioners and other interested stakeholders throughout Europe and elsewhere across three themes (Working with Families, Mental Health Promotion and Prevention and Recovery). In this paper, the focus is on the 'Working with Families' theme. It is recognised that the term 'carers' has sometimes been a contentious one, (McDaid and Higgins, 2014). Therefore, throughout this paper, we use the terms family members and caregivers to describe the range of people who may be affected when a relative experiences mental illness. While the focus of this paper is on MHNs, it will have general relevance to other mental health professionals as well. Throughout the paper, the authors use the term 'mental illness' but it is

not their intention to subscribe to a purely biological interpretation of mental distress.

### 2. Background

While there is widespread recognition that working with families is central to promoting recovery for mental health service users, there is evidence that family members, relatives and caregivers often feel excluded from the care process (Dahlqvist Jönsson et al., 2011; Ewertzon et al., 2010; Schmid et al., 2009). In addition, mental health professionals often fail to consider the needs of children and adolescents whose parents experience mental illness (Ali et al., 2012; Hedman Ahlström et al., 2011). Furthermore, family members do not perceive that their needs are taken seriously or that they are being listened to. They express a need for more effective communication with MHNs and that MHNs could be better attuned to the specific issues, which they are confronted with (Vermeulen et al., 2015).

Some reviews in the literature have explored the evidence available on interventions for family members and caregivers for someone with a

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mental health problem. Interventions that comprise mutual support-groups for families show positive effects on psychosocial well-being, increase knowledge about symptoms, reduce stress, improve the ability to manage situations and provide social support (Chien and Norman, 2009; Macleod et al., 2011). Well-designed psychoeducational interventions including coping and problem-solving strategies enhance communication and are effective in improving family members' knowledge and ability to cope (Sin and Norman, 2013). Carer-focused interventions appear to improve the experience of caring and quality of life and reduce the psychological distress of caregivers for people with severe mental illness (Macleod et al., 2011; Pharoah et al., 2010; Sin and Norman, 2013; Yesufu-Udechuku et al., 2015).

Several family working models have been developed, but they are not widely implemented (Falloon, 2003; Seikkula et al., 2011; Solantaus et al., 2010). For example, the Beardslee's preventive family intervention for children of mentally ill parents is available (Beardslee et al., 2007) as well as The Ten Essential Shared Capabilities (ESC) that has been developed to guide all mental health practice, co-operation and mutual partnership with families and carers (Hope, 2004).

The concept of family-focused practice has emerged in response to the need to recognise the impact of mental illness on the family, which often transcend individual service users. Foster et al. (2012) define family-focused practice as 'A method of care delivery that recognises and respects the pivotal role of the family. The key element of family-focused care is a philosophy of care, incorporated into practice, which recognises the uniqueness of each consumer and family' (2012, p.7).

There is a need for more knowledge and skills among MHNs to work with families (Houlihan and Higgins, 2013; Reupert and Maybery, 2016) as MHNs are performing poorly in comparison with other mental health professionals (Reupert and Maybery, 2014). Some attempts have been made to recognise and define the knowledge and skills needed by MHNs, such as the Family Intervention Competency Assessment and Reflection Scale (FICARS) (Gamble et al., 2013). However, while the importance of family-focused care is recognised, according to families' experiences, practice has not developed accordingly. One solution might lie in education, but to be able to develop education further, more detailed information is needed about the knowledge, skills and attitudes required to work in family-focused ways. It is against this backdrop and context that this critical review has been conceptualised as part of a larger study, which was commissioned to design open access eLearning materials. To guide the development of the eLearning materials, we focused on post graduate, post registration or advanced level education which was identified as an under developed area.

### 3. AIM

The aim of this critical review was to explore the knowledge, skills and attitudes that are required by MHNs to work more effectively with families and caregivers affected by mental illness.

### 4. Methodology

A literature based critical review as described by Grant and Booth (2009) was conducted to achieve the aims of the review. This approach enables the development of conceptual innovation, which can provide the basis of new thinking (Grant and Booth, 2009). In answering the review question, we did not seek to review all the literature available on the subject; we focused on identifying significant items that relate to the review question (Grant and Booth, 2009). While the authors were not attempting to write a module of learning but to provide content for the eLearning materials, they were interested in establishing a taxonomy of concepts that are related to an area where education and MHN interventions are underdeveloped (Korhonen et al., 2010). One of the most common guidelines for systematic reviews and meta-analyses is the PRISMA statement (Liberati et al., 2009). However, as this paper was a critical review only some of the elements from the PRISMA

statement were relevant. In this study only the phases of identification, screening and eligibility were required for the literature search.

#### 4.1. Search strategy

In the first phase a literature review was conducted based on the guiding question: "what knowledge, skills and attitudes should MHNs who wish to advance their knowledge have about families and caregivers to assist them in the provision of care". For the definition of advanced level, we turned to the European Qualification Framework (EQF) and conceptualised 'advanced' as learning beyond baccalaureate education and within the realm of 'Master's' level as defined at level 7 (European Qualifications Framework for Lifelong Learning). The components of advanced ('Masters') level education as interpreted in this review have been described elsewhere (Stickley et al., 2016).

The databases of Cinahl, Pubmed, PSYCHINFO Centre for Reviews and Dissemination and Google Scholar were used, in addition to manual searches in the identified reviews and articles. The inclusion criteria were: 1) full text articles published in the field of mental health nursing that addressed family work in any way; published between 2004 and 2014 2) studies or reviews published in academic journals in English.

The search terms included: famil\*, mental health, psychiatric care\*, together with advanced clinical nurse, caregiv\*, ethic\*, knowledge\*, nurs\*, skills\* and no limitations were set for design or setting. The total search yielded 3066 records, which was reduced to 515 articles when the titles and abstracts were reviewed for relevance to the guiding question. Thereafter titles and abstracts were independently screened by three of the authors (IS, BK, NK), which yielded 112 references, which were reduced to 81 articles following consultation with the team members. The full texts of the 81 articles were accessed and reviewed culminating in 35 articles being included in this review.

#### 4.2. Analysis

A deductive approach was adopted and content was extracted from the abstracts that the reviewers' thought would meet the aims of the review. There was an awareness that the area under scrutiny was not easily defined, therefore a pragmatic approach was taken to avoid over conceptualisation or abstraction of the content so that it could be easily grouped together to form themes and related concepts at a later stage. The full texts of the included abstracts (n = 35) were then accessed, read and reviewed in terms of the information that might inform the knowledge skills and attitudes that MHNs need to respond to the needs of family members. Many concepts emerged at this point, which mainly fell into seven different areas: Childhood and children, Parenthood, Training programs, Adolescence, Participation, Ethics and Psychosis. The authors discussed the different areas and created a sensitive key map that allowed the distillation of the areas into meaningful concepts that informed the knowledge, skills and attitudes that were required by MHNs. The analysis was thereby divided in two parts and at this point similar concepts were grouped together into two themes based on the authors' interpretation of requisite knowledge, attitudes and skills. Once the themes and concepts were clear, content related to those themes was allocated to knowledge, skills and attitudes and learning outcomes were formulated as required based on the European Qualification Framework at level seven to guide the development of the eLearning materials (Table 1).

### 5. Results

Two overarching themes (Table 1) emerged following the review; 1) Mental health problems and the family and 2) Working with the family. There was considerable overlap in and between the themes and this posed a challenge in terms of minimising repetition and ensuring the content was focused.

The first theme 'Mental health problems and the family' related to

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