Psychosocial Intervention Needs and Psychiatric Social Work Practice
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From the very beginning of the Social Work, human needs have long been part of the social work theory, practice and research as an implicit conceptual foundation but practically it has long been a neglected and contested concept in the published literature of social work though social work has been instrumental in meeting the various needs of individuals. Social Work Practice in the field of mental health is also not an exception for the same. The need of an hour is to explicitly discuss the role of social work in meeting the human needs on the research and literature; the practice of which has already begun. It will have a significant influence on the contemporary practice of Psychiatric Social Work as well in India.

Keywords: Psychiatric social work, psychosocial intervention, needs

BACKGROUND
Even after completing seven decades of practice very often a psychiatric social worker practitioner (PSW) in India have to struggle to find out the adequate role in their practice field.[1] Broadly, psychiatric social work practitioners’ accepted role is psychosocial assessments and psychosocial intervention (management). Psychosocial Intervention is a “interpersonal or informational activities, techniques, or strategies that target biological, behavioural, cognitive, emotional, interpersonal, social, or environmental factors intending to improve health functioning and well-being”[2] which is practiced not only by other professional but also by paraprofessionals, caregivers and laypersons. As we know psychosocial is relating to the combination of psychological and social behavior. Practically it is unfeasible to deal these two disjointedly by two different disciplines i.e. (clinical) psychology and (psychiatric) social work. PSW claim that psychosocial aspects of care are an important part of their practice, but it is not clear that which particular psychosocial aspect of care and how much is evident in their clinical practice. This raises the question as to whether a gap exists in the theoretical literature on psychiatric social work and its actual practices. In this juncture, there is a need to realign our focus of practice and research into some different issues which might be fruitful in the long run in many ways. One such area could be ‘needs’ or more particularly ‘psychosocial intervention needs’ practice of which has already begun.

PSYCHOSOCIAL INTERVENTION NEEDS
Although the concept of need is used internationally, there is no consensus about the precise meaning of the term. Maslow has set out a hierarchy of five levels reflecting, in sequence: needs for physiological functioning, safety, love, self-esteem and self-actualization.[3] The needs of all humans include basic survival needs (food, clothing, housing, transportation, financial resources,
and personal safety); health care needs (mental health care, physical health care including dental care); and social-connectedness needs (friends, a group to belong to, a role in life, and a meaning or purpose in life). Needs are cantilevered rather than hierarchical with each need supporting all other needs. One unmet need that adversely affects all needs is the ability to adapt to stressors, and achievement of well-being.\[4\]

In the mental health field, needs are defined in various prospective and various terms have been used such as rehabilitation needs, health needs, social needs, psychosocial needs etc. but none of these considered human needs comprehensively. According to the World Health Organization’s Health Report 2001\[5\] the needs of people with mental disorders are:

- **Medical:** early recognition of symptoms, information about illness and treatment, medical care, psychological support, hospitalization.
- **Community:** avoidance of stigma and discrimination, full social participation, human rights.
- **Family:** skills for care, family cohesion, networking with family, crisis support, financial support, respite care.
- **Rehabilitation:** social support, education, vocational support, daycare, long-term care, spiritual needs.

Again the question is which psychosocial needs has to be dealt with PSW? Psychiatric social work is instrumental in almost all the needs listed above. So, answer of the above question could be various areas of psychosocial dysfunctions or problems which require psychosocial intervention can be considered as ‘Psychosocial Intervention Needs’ which can be dealt by psychiatric social work but again we held up with a huge responsibility which might not be possible to tackle by the limited number of PSW with poor resources and role allocation.

**WHAT IS THE WAY OUT**

Right away, we can start with an assessment of ‘Psychosocial Intervention Needs’ using specific tools\[6-8\] adapted for a specific setting keeping in view of the persons in need, availability of resources, time and various other factors followed by psychosocial intervention for the same. It will have a significant influence on contemporary practice of Psychiatric Social Work; as unmet psychosocial intervention needs exist across various types of mental illness and the mental health care continuum, most of the psychosocial interventions have been considered in persons with severe or persistent mental illness, less for minor mental health problems and rarely for promotion and prevention of mental health problems. A large number of patients continue to live with mental illness after pharmacological treatments only and some with psychotherapy along with medication but rarely getting psychosocial treatments. So, there is no doubt about the need for psychosocial interventions. If some of the needs can be met through psychosocial interventions done by PSW which other fellow professionals are not taking up habitually will have a momentous implication on practice.

**REFERENCES**


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