

**Addressing Violent and Aggressive Behaviours in a Schizophrenic Patient
Appropriately: Challenges of a Mental Health Nurse**

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Unit Code

Word Count: 1544 words

Schizophrenia is a severe mental condition that is characterised by changes in thinking and perception in patients. It usually manifests in teenage or early adulthood, and may present in the form of hallucinations, delusions, disorganized behaviour and speech, problems in processing information, and lack of concentration (Kruse and Schulz, 2016). In some cases, it may co-exist along with substance abuse, learning disabilities, and developmental disorders. Schizophrenia along with other psychotic conditions may also lead to aggressive and violent behaviours that may be verbal or physical (Valimaki et al., 2016). As a mental health nurse, it is extremely challenging to manage a patient with schizophrenia and provide holistic care, education, spiritual support, and self-management strategies while respecting the client's mental thought processes and emotional reactions (Mahone et al., 2016). This paper aims to address the approach adopted by mental health nurses for schizophrenic patients in healthcare facilities and the specific challenges they face while delivering care to these patients and their families as observed by me during my clinical placement experience.

Schizophrenia is a psychiatric disorder that is marked by changes in cognition, thought processes, and emotions, which ends up affecting patients' family, social, and professional lives (Kooyman and Walsh, 2011). Despite the fact that schizophrenic patients need to be on anti-psychotic medications throughout their lives, this is not enough to address the entire spectrum of symptoms in these patients. Additionally, anti-psychotic medications may lead to extra-pyramidal symptoms, neurocognitive impairments, and non-compliance in some cases (Os, 2011). Therefore, medications alone are not enough and person-centered approaches such as psychosocial therapies need to be implemented to promote hope and optimism in schizophrenic patients and their families (Durgoji et al., 2019).

Among the psychosocial interventions that were adopted by mental health nurses or psychiatric nurses for schizophrenic patients at the facility where I did my clinical placement, there are several major evidence-based categories that show promise in control of symptoms and prevention of relapse (Savelyev, 2017). Some of these that were practiced at the facility include cognitive behavioural therapy and cognitive remediation therapy, family interventions, social interventions, psychoeducation

programmes, case management, psychodynamic psychotherapy, insight-oriented psychotherapy, and behaviour modification programmes. Each of these interventions was carefully chosen based on the individual requirements of schizophrenic patients, and each of them have unique objectives and treatment agendas (Pinho et al., 2017).

Despite the abundance of psychosocial and behavioural interventions for schizophrenic patients, the implementation of these by a mental health nurse in the clinical setting is not so easy. The most important reason for this is the lack of appropriate education and training of the nurses to be able to effectively deliver these interventions to the patients (Barrowclough et al., 2012). Secondly, all of these interventions are carried out over a period of a few months and there is always the risk of non-compliance and limited resources. The third reason is lack of awareness at an institutional level thereby leading to lack of collaborations, and lack of recruitment of personnel and services that are necessary to implement these interventions (Chien et al., 2013). However, the major challenges in managing schizophrenia in patients are probably the ones that are experienced by a mental health nurse in the clinical setting. Three of these specific challenges that I observed during my clinical placement are elaborated in this essay.

The first challenge encountered by mental health nurses in managing aggressive and violent behaviours in schizophrenic patients is lack of acceptance of a mental health problem by patients and regularly dealing with unpredictably aggressive behaviours in patients (Malla et al., 2015). Unable to predict the violence or aggression displayed by patients can be very stressful for mental health nurses who constantly need to be aware and prepared for an adverse situation. This, in turn, increases the levels of burnout, frustration, and stress in mental health nurses with limited opportunities for their stress release (Joubert and Bhagwan, 2018).

A study conducted by Tajvar et al. (2015) in Australia has found that mental health nurses who constantly provided care to patients with unpredictable behaviours showed high levels of emotional stress and were unable to find the time or opportunity to release this stress. Another study conducted by Vasconcelos et al. (2016) also showed the same results pointing towards increased levels of burnout, stress, and

exhaustion in mental health nurses in caring for schizophrenic patients. This high level of stress and frustration combined with societal stigma towards mental illness in many parts of the world makes it extremely difficult for mental health nurses to have a rewarding professional life. A study conducted by Marie et al. (2017) in a Palestinian healthcare facility has found that not only common people, but other primary care nurses also make fun of mental health nurses calling them “crazy” to work with schizophrenic patients. This adds to their mental stress as a lack of both personal and professional support can very soon escalate to the breaking point for these nurses (Marie et al., 2017). As a result, high levels of emotional and mental stress, frustration, increased feelings of burnout, and lack of adequate support from the professional community is a significant challenge for mental health nurses working with schizophrenic patients.

The second important challenge encountered by mental health nurses in managing aggressive behaviours in schizophrenic patients is the lack of available education, training, and resources that can empower the nurse to adequately implement interventions for these patients. Recently, the numbers of schizophrenic and other mental health patients are increasing all over the world due to increased amount of stress and pressure to compete professionally. This demands an equal increase in mental healthcare providers who can understand challenging behaviours and mount appropriate interventions to manage these behaviours. However, currently, there is a large gap between demand and supply which compromises the quality of care provided to these patients (Bjorkman et al., 2018).

Lack of funding and resources in the mental healthcare sector is another concern that contributes to challenges faced by mental health nurses in delivering quality healthcare services to schizophrenic patients. Some of the outcomes of lack of resources include long waiting lines of patients in mental health facilities, no fixed time slots for appointments leading to extremely long and time consuming patient interactions, and lack of available information to nurses about referring patients to other district psychiatric centres for an advanced level of care. Another challenge faced by mental health nurses is lack of education and training which makes it difficult for them to

evaluate the extent of mental illness, and the risk of becoming aggressive and causing harm in their schizophrenic patients. Given the large number of patients and less number of mental health nurses, the duration between subsequent visits is longer thereby compromising the quality of care given to individual schizophrenic patients (Fleischhacker et al., 2014). Therefore, the second important challenge for managing aggressive behaviours in schizophrenic patients is lack of education, information, and resources for mental health nurses to deliver optimum care to these patients.

The third important challenge for mental health nurses in dealing with schizophrenic patients is the effort it takes to break the shell that these patients build around themselves and to look into the most personal aspects of their lives to ascertain the causes of their aggressive behaviours. The problems perceived and faced by schizophrenic patients are of an extremely sensitive nature and these patients often face difficulty in sharing these problems with mental health nurses. Studies have found that people with schizophrenia and other mental illnesses often feel guilt and shame, and are shunned by their family and the society. This makes it extremely difficult for them to establish a trustful relationship with their mental healthcare providers (Mittal et al., 2014).

The fact that mental health conditions are considered taboo are deep-rooted in several cultures and population groups around the world, thereby increasing the challenges faced by these patients in accessing quality healthcare services. This adds to the burden of mental health nurses as first, they need to overcome the trust issues of the patient for establishing an open communication channel, and then evaluate and manage behavioural problems as necessary. Based on nurses' accounts, they need to be extremely calm, patient, and empathetic with their schizophrenic patients initially to encourage them to open up about their problems. They need to give them their complete unbiased attention without checking the clock or doing something else, as they might end up losing the patient forever. Therefore, the shame, guilt, and taboo associated with mental illnesses in our society places an increased burden on mental health nurses to approach the patients carefully so as not to push them away and deprive them of quality mental health treatment (Rossler, 2016).

In conclusion, there are several evidence-based interventions to manage aggressive and violent behaviours in schizophrenic patients; however, in the clinical setting as per my observation, mental health nurses face several challenges in managing these patients appropriately. The first challenge is the high level of emotional stress faced by mental health nurses due to lack of support and understanding from their institution and the society. The second challenge is lack of available education, training, and resources provided to the mental health nurse for managing schizophrenic patients. The third challenge is the taboo associated with mental illnesses in our society that make it difficult for mental health nurses to breach patient barriers and deliver appropriate interventions to manage their behaviours.

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