A Vision for Change
Lessons Learned from Ireland’s Mental Health Care System

This past semester I had the amazing opportunity to spend a sabbatical leave from my academic faculty position in the country of Ireland. The sabbatical is an opportunity for both professional and personal growth and a time to retool and recharge by being given time away from teaching and related responsibilities.

This trip would not have been possible without many factors being in place, including my academic institution’s support, financial support, and family support. Northern Illinois University granted me a semester away from all of my academic commitments and paid me to pursue my sabbatical goals. The Illinois Board of Higher Education Nurse Educator Fellowship Award gave me the financial support so I could fund the travel for 3 months away from home. Daily household commitments were taken care of by a very supportive husband, and having an independent adult daughter allowed for the extensive time away.

In Ireland, I was offered a visiting lecturer appointment at the National University of Ireland, Galway, School of Nursing and Midwifery, teaching in both the graduate and undergraduate psychiatric nursing programs.

During my 3 months in Ireland, I learned about psychiatric-mental health nursing and Ireland’s health care system and mental health services. In this guest editorial, I would like to focus on what I learned about Ireland’s vision for change and the importance given to service users in Ireland. As a psychiatric nurse in the United States for more than 25 years, I found being immersed in another country’s mental health system for a period of time enlightening and educational. I would like to offer readers of the Journal of Psychosocial Nursing and Mental Health Services some of the highlights of what I have learned. In light of the United States’ own health care reform, this global perspective is timely.

In Ireland, the term service user includes people who are either current or past users of mental health services. Let me begin by sharing that in Ireland, mental health services are changing and evolving in a more recovery- and user-focused way. Vision for Change: Report of the Expert Group on Mental Health Policy (Government of Ireland, 2006), a national initiative, leads both mental health professionals and service users alike in Ireland’s rather challenging current economic climate. It proposes a framework of mental health service delivery with the service user at its center. Vision for Change boldly states that “each citizen should have access to local, special...
ised and comprehensive mental health service provision that is of the highest standard” (p. 5).

Legal and policy reforms are altering how services are delivered and service users’ needs and expectations are increasing in Ireland. Universal Health Insurance offers a comprehensive range of mental health services as part of the standard insurance package. This includes development of community mental health teams and services to ensure early access to more appropriate services for adults and children and improved integration with primary care services. In my travels I was able to visit community mental health centers and see nurses both at the graduate and undergraduate level being a vital part of the treatment team. Ireland’s Mental Health Act of 2001 is currently being reviewed, and the Nurses and Midwives Act of 2011 provides for a modern nursing and midwifery workforce that can fully engage with the program of health care reform. The clinical program for mental health services has prioritized early intervention for first episodes of psychosis, eating disorders, and management of patients exhibiting self-harm behaviors in emergency departments.

I had several opportunities to spend time with advanced nurse practitioners working in community mental health nursing. Traveling throughout rural Galway and seeing the community mental health care services was impressive. Many service users are living with mental illness in their communities very successfully with support of day treatment centers. Demonstration of the recovery model was evident throughout my tours of the community.

Upon attending a presentation by the National Service Users Executive, I learned of a recent consultation process that surveyed service users and their family members. The twin pillars of listening and giving hope were the two most important factors in aiding recovery. For psychiatric nurses, listening and giving hope are part of the therapeutic process and are two areas that can be strengthened in the nurse-patient relationship.

I was impressed by the service users each and every time I went out into the hospital or community environment. During my tours, the staff I met went out of their way to introduce me to the service users and allowed me to hear their perspectives and thoughts about their mental health treatment. The service users I met were proud of their staff and the facilities. In one of the hospitals I toured, service users wore badges that said “service user” much like my badge said “RN.” Many service users spoke of their opportunities to be part of interview panels when a new staff member was to be hired. One service user in a research group I was involved with at the University was able to give his perspective on impending research ideas. In Ireland, it is evident that the service user has a voice.

Adopting a recovery approach is core to Ireland’s Vision for Psychiatric/Mental Health Nursing (Health Service Executive, 2012). Nurses are encouraged to ensure increased involvement and participation of service users and caregivers in all aspects of care. This includes the design, delivery, and evaluation of services where they have meaningful and genuine influence. I was impressed with seeing this in action during my time in Ireland.

I am cognizant that no system is perfect. In an era of scarce resources, declining numbers of psychiatric nurses, and a growing demand for mental health services, a vision for change is timely and absolutely essential. In closing, I implore all of my colleagues to prioritize the needs of our very own service users. To improve outcomes and experiences for our service users, it is essential that the psychiatric-mental health nursing profession strengthen and maximize the potential of nursing, especially in light of our changing health care environment. I ask you, what is our vision for change?

REFERENCES


Jeanette Rossetti, EdD, MS, RN
Associate Professor
Northern Illinois University
DeKalb, Illinois

The author has disclosed no potential conflicts of interest, financial or otherwise.

The author thanks the faculty, staff, and students of the National University of Ireland, Galway, School of Nursing and Midwifery, especially Kathy Murphy, Head of School Professor, and Siobhan Smyth, Lecturer and Programme Director, for their hospitality.

doi:10.3928/02793695-20121205-01