

‘The Challenges of Being a Mental Health Nurse’: conference review

Rachel Waddingham reports from the launch of the Critical Mental Health Nurses’ Network

Introduction

Conferences often perplex me. Heavy with anticipation, I pour through the programme hungry for something that will challenge, excite or inspire me.

On a good day, I find something truly delicious – stimulating ideas or possibilities that I hadn’t expected.

On some I leave with little more than a bitter taste in my mouth and a desire for antacids.

Whatever dishes I’m served, I think it’s safe to say I rarely have enough time to digest them.

A week, month or year later much of what I’ve experienced fades into a vague sense-memory. The more complex the flavours, the harder it is for me to translate them into a recipe I can follow at home.

Some 100 conferences later and it can feel like I’m still eating beans on toast.

It was against this backdrop that I took part in the first conference of the new Critical Mental Health Nurses’ Network, entitled ‘Voices, Visions and Other Unusual Experiences – The Challenge of Being a Mental Health Nurse’, which was kindly sponsored and hosted by Durham University’s Hearing The Voice Project, and held on 9 and 10 April 2015.

Sure enough, the first day followed the same well-worn format that I am both comforted

by and frustrated with – a string of tasters from eloquent presenters with little space for reflection.

Speakers were drawn from a range of backgrounds, including nursing, psychology, psychiatry and – of course – people with lived experience of mental health nurses.

Fiona MacCallum spoke with grace and power, sharing examples of nursing care where validation and human connection were conspicuous by their absence.

I spoke about my own experiences of nursing, both good and bad, highlighting the actions of my former community psychiatric nurse who helped prevent me from getting sectioned and was willing to sit under a tree in my garden when I was too afraid to let her inside my flat.

Gary Sidley, a retired mental health nurse and clinical psychologist, asked whether mental health professionals are the main culprits for creating and perpetuating stigma.

Two experienced nurses from the local area shared their own journeys.

Valentina Short encouraged nurses to reconnect with, and reflect on, what led them into the profession in the first place.

Paul Veitch shared some of the tensions and opportunities he has encountered in enacting his role as an approved clinician under

the Mental Health Act within a forensic setting.

Peter Bullimore, founder of the National Paranoia Network, shared his work developing a network of ‘Maastricht Assessment Centres’, training staff to explore relationships between voices, paranoia, difficult life experiences and trauma.

Finally Russell Rassaque, a psychiatrist, talked about the ‘Peer Supported Open Dialogue’ randomised controlled trial that is currently exploring whether the Open Dialogue Approach that is so successful in Finland can be tailored to fit our NHS.

As tasty as these small morsels were, as the event progressed I became acutely aware of the rumbling of a thousand unacknowledged elephants in the room.

Finally, at the end of the day, a welcome voice named one of them by asking how an approved clinician can square their conscience with depriving people of their basic human right to freedom.

The resultant exchange was both profoundly uncomfortable and completely necessary.

Yet with minutes left on the clock this important question was left hanging in the air alongside its unspoken brethren, dominating post-conference discussions in the pub.

In a single-day event, that is where these conversations would have ended. Luckily, we had something else up our collective sleeves.

In the second day, our aim was to seek out these elephants, welcome them and – if we could – make them a cup of tea.

We wanted to break the conference mould and create a more generative space that hinged on us all listening, thinking, feeling, talking, connecting, reflecting and challenging one another and ourselves.

Skilfully facilitated by Mary Robson, this day revolved around three central themes: being a mental health nurse; care, crisis and coercion; and progressive practice.

We ditched the plenaries and PowerPoint for group discussions stimulated by pithy five-minute impromptu provocations that were honest, challenging and – at times – gut-wrenching.

At the end of each section we returned together to create a honeycomb-like structure in our quest to seek out connections

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