

# Role of clinical psychologists in 'valuing people'



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What role should clinical psychologists play in implementing the recommendation of “ Valuing People”?

Clinical psychologists, in general, work in various settings diagnosing, through assessment and treating mental health disorders. In 2001 the ‘ Valuing people’ project started as a governmental initiative and strategy with certain performance indicators in order to address the needs of people with learning disabilities by improving the quality of their lives and that of their families and carers. According to the (2001) white paper on valuing people, although it is difficult to provide accurate statistics on the number of people with learning disabilities in England, in 1999 it was estimated that about 210, 000 people have ‘ severe and profound’ learning disabilities and 1. 2 million people have ‘ mild / moderate’ learning disabilities. Further, amongst the 210, 000 people with severe and profound learning disabilities the majority (i. e. 120, 000) is working age adults; 65, 000 are youth and 25, 000 are elderly people (available on: [www. archive. officialdocuments. co. uk/document/cm50/5086/5086. pdf](http://www.archive.officialdocuments.co.uk/document/cm50/5086/5086.pdf)). Clinical psychologists are mentioned in this white paper alongside other learning disability specialists engaged with the project towards improving the health of people with learning disabilities. This essay focuses on the roles of clinical psychologists in terms of acheiving the following project objectives: (1) disabled children and young people; (2) transition into adult life; (3) more choice and control; (4) supporting carers and (5) good health.

These five objectives contribute to the overall aims of valuing people to protect the rights of those with learning difficulties as citizens, to ensure their full inclusion in their local communities, to expand the range of life-

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options available and to increase their independence. Children and people with severe learning disabilities might be unable to describe complicated internal feelings and a diagnosis can only be reached by behavioural observation and functional analysis, which the clinical psychologist can provide. In general there is a high rate of behavioural problems among people with a learning disability (Debb et al., 2001). Emerson (1995) postulates that between 30%-50% of people with a learning disability tend to demonstrate a variety of challenging behaviours. Nevertheless, challenging behaviour is not a formal psychiatric diagnosis, but rather a broad social construction (Emerson, 1998). It can, however, be taken as a sign of a mental illness - or it can mask it. Clinical psychologists can assess challenging behaviours, understand their causes and then offer appropriate interventions (including the services of other health care specialists such as social workers) in order to eliminate them.

In terms of the first objective about disabled people and young adults, clinical psychologists play a key role in identifying and accurately diagnosing their disability. A person with a learning disability is from early years likely to experience stressful and adverse life events that will create vulnerability for mental health problems (Bouras et al., 2000). That is so because in addition to cognitive problems and psychosocial stressors, genetic and biochemical factors tend to increase the probability for both challenging behaviour and mental illness (Bouras et al., 2000). The possible combination of these factors can make assessments and diagnosis extremely difficult. Correct diagnosis of disability is crucial for providing appropriate health and social care to the person with disability; while clinical psychologists work in a multi-

disciplinary team of learning disability specialists who inform both the disabled person and their family about all support services available to them.

Clinical psychologists are important in monitoring the progress that young people with disability make, when receiving health treatment alongside suitable family support services, in order to modify their treatment and the provision of support services to address any changes in their needs. This implies that clinical psychologists need to assess regularly the quality of health care these people receive and to ensure that disabled children and young people are getting appropriate health care in order that they are and feel included in education, family life and their local community.

In the second objective of ' transition into adult life' again clinical psychologists have a key role working in multidisciplinary teams of learning disability specialists (e. g. in settings such as the Connexions partnership) towards providing appropriate and continuous health and social care support to young people, who are becoming adults, and their families in order that adults with disability can be included in education, training, employment and their local community. Clinical psychologists can help young people with disability to understand their growth into adulthood and its psychological and practical implications. In this it is useful having consistency in attending the same person with disability from their youth into adulthood because then the disabled person will tend to trust more the clinical psychologist and his interventions.

The development of young people with disability into adults is associated with the third objective of the valuing people project which is about providing

more choice and control. Mental health problems can be a major factor in limiting not only quality of life but also successful community interaction and adaptation (Reiss, 1994). There is a general consensus regarding the prevalence of mental disorder in adults with a learning disability (Turner & Moss, 1996). A review of relevant research revealed a prevalence range of mental disorder in adults with a learning disability from 14.3 % to 67.3 % (Campbell & Malone, 1991). Clinical psychologists with their person-centred approach have a valuable contribution to make in enriching the choices disabled people have through involving these people in the planning of suitable services for them and increasing public awareness of what these people can do and their rights in our society.

In addition, clinical psychologists are significant contributors in the achievement of objectives (4) ' supporting carers' and (5) ' good health' because of their knowledge, skills and experience as health care specialists they can assess the needs of carers providing appropriate solutions to support them and their disabled people to access good health care services regardless of their ethnic background. Therefore, clinical psychologists should work to reduce health care inequalities and increase access for all carers and disabled people to health care. Moreover, clinical psychologists have to support and encourage the development of NHS's services and provisions of specialist learning disability services that address holistically the needs of disabled people through the work of multi-disciplinary teams of disability specialists.

To summarise, clinical psychologists can play several and important roles in implementing the recommendations of the valuing people project, especially

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in order to achieve its first five project objectives. Furthermore, in collaboration with other professionals in multidisciplinary teams of disability specialists clinical psychologists need to get involved in more proactive work. Having knowledge of human development, learning theories and aetiology of mental health illnesses clinical psychologist could play also an important role in preventive work on individual basis as well as in service development suitable for proactive adaptation and assimilation of people with disabilities in education, employment, their community and in the society.

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