Chapter 34

The Social Mandate to Deal With Mental Health:
A Comparison Between Interventions in a Mental Health Center, a School, and a Psychoanalytic Office

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ABSTRACT

The chapter aims to explore the construct of mental health in a psychoanalytic perspective with a psychosocial approach. In particular, the chapter studies mental health by analysing traces to detect social mandate characterizing different mental health agencies. The highlighted hypothesis could be interpreted as that social mandate is a clue of local cultures about mental health, which determine fantasies about mental health issues, grounding on symbolizations shared by professionals, users, and community. The chapter introduces three clinical experiences of interventions, carried out in different contexts: a public mental health service, a public middle school, a psychoanalytic private office. All the presented experiences concern mental health field, even though they are characterized by different features in terms of subjects, methods, professionals, users, and organizations involved. The chapter explores those differences in order to focus on transversal issues.

INTRODUCTION

The wide concept of Mental Health could be considered deeply related to the concept of Well-being, which is even more wider than the first one. For instance, Merriam-Webster dictionary (n.d.) indicates Well-being as *the state of being happy, healthy, or prosperous* and the Cambridge dictionary's definition is (n.d.): *the state of feeling healthy and happy.* All the previous definitions about Well-being include the concept of Health. But what is Health, and in particular, what is Mental Health? Not a question with a

simple or unambiguous answer. This chapter aims to focus on the concept of Mental Health, to explore it by studying different points of view about this topic.

It will be proposed, in particular, to consider Mental Health as a complex topic, historically and locally characterized, a culturally determined object. Getting to the heart of the epistemological matter, this chapter is not going to study Mental Health as a natural object, but as a cultural one. It is not going to take Mental Health as an object passible of being measured with examinations that could be replicated in any time and space, regardless the analyser's involvement. Whereas the chapter is going to explore the concept of Mental Health as a cultural construction, based on symbolizations which are shared in a particular social context, historically and territorially determined, which means characterized by local cultures. In this epistemological perspective, the analyser's point of view it's not something irrelevant or something which should be controlled to clean examination field. Contrariwise researcher's evolvement could be considered as a clue. For instance researcher's fantasies and feelings could be treated as a trace to explore issues' symbolizations in shared local cultures.

In this chapter's perspective, Mental Health is founded on local culture. Namely local cultures found different symbolization about Mental Health in Rome, in Tonga, or in Bangkok.

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According with the previously introduced epistemological framework, the initial question can be rearranged as: how could the concept of mental Health be defined?

On 30 March 2018, on its official website, World Health Organization (WHO) describes Mental Health as:

Mental health is an integral and essential component of health. The WHO constitution states: Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". An important implication of this definition is that mental health is more than just the absence of mental disorders or disabilities. Mental health is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community (World Health Organization, 2018).

WHO's definition of Mental Health implies multiple elements which compose a complex concept:

- Mental Health does not coincide with the *absence of mental illness* but it's something more (and it's not exactly defined);
- Mental Health concerns the individual (*realizing his or her own abilities*) and the relations with his/her coexistence contests (*to make a contribution to his or her community*).

WHO identifies a multifactorial concept, composed by individual and relational factors. In accordance with that, this chapter will provide a Psychosocial perspective.

Both in Literature and in internet it is possible to find several interesting works about interventions based on a psychosocial approach. Those psychosocial interventions combine a psychological perspective, mainly concerning an individual target, and social perspective, generally aiming to determine actions on a community level. Whereas, the theoretical and methodological perspective here provided it's something different from that. We assume a Psychosocial perspective not only for interventions but also

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