

**BOOK REVIEW: RESTRICTIVE PRACTICES IN HEALTH CARE AND
DISABILITY SETTINGS, EDITED BY BERNADETTE MCSHERRY & YVETTE
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The use of restrictive practices in the treatment of people with mental illness and disability has a very long and chequered history and is recognised as a global concern. There is significant evidence that restrictive practices have no therapeutic value, have deleterious effects on people exposed to these practices and that the experience of individuals is largely negative. Nevertheless, some health professionals view restrictive practices as beneficial and necessary whilst others view such practices as an embarrassing reality and as a failure of treatment. In the light of such controversy, this new text, 'Restrictive practices in health care and disability settings', is a welcome addition to the published literature on this topic.

This is a solid tome of almost three hundred pages bringing together international experts in mental health and disability from disciplines including law, social work, psychiatry, pharmacy, mental health nursing, consumer academics and those with a lived experience of mental illness. These authors are all influential players in the discourse of restrictive practices and their writings reflects the current state of play in Australia and internationally regarding the quest to reduce and eliminate control mechanisms in health and disability care. The text examines the latest evidence in relation to restrictive practices in mental health and disability. Differing approaches to the legislative, policy and practices of restrictive practices are provided from England, New Zealand, Germany, the Netherlands and Australia. This text will be a valuable resource to both undergraduate and postgraduate students in health professions and legal studies, as it brings together new understandings on control issues in care. Further, the text firmly bears witness to the paradigm shift required in the treatment of people with mental illness and disability in order to potentially eliminate or at least vastly reduce restrictive practices.

The text is divided into five parts with individual chapters within each part. There is some repetition across the text in relation to the historical, human rights, legal and clinical practice of restrictive practices, but this is to be expected when a large number of international authors are considering these issues from different perspectives. A great strength of the text is the coherent weaving and interweaving of common ground in various contexts.

Part One is background with Chapter One setting the scene regarding the scope of the text, the legislative and human rights context, i.e. the United Nations Human Rights Convention on the Rights of Persons with Disabilities (2007) and definitional issues in terms used to describe restraint. The definitional issues are described in general terms, but more could be made of the use of terms such as 'restraint practices' and 'restrictive practices' as they are often used interchangeably in legislative, policy

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and research papers, which can be confusing for those working, researching or studying in this area. Later chapters use these and other terms such as rapid tranquilisation, chemical restraint variously and inconsistently, reflecting the ongoing problems with definitional clarity and the difficulties in establishing good quality evidence, as well as making meaningful international comparisons in research.

Chapter Two is the strongest and most courageous chapter in this impressive text, bearing witness to the discrimination of people with mental illness and disability and presenting a bold vision beyond reducing restrictive practices to complete elimination. These authors, with lived experience of restrictive practices, discuss the social 'othering' of people with a mental illness, as well as providing strong examples of the trauma and re-traumatisation consumers have experienced. Definitions of restraint defined in Australian are tabled but without further discussion about the jurisdictional differences in mental health acts and policies. Such discussion would have been a useful addition, particularly since an elimination of restrictive practices would require changes to mental health acts nationally.

They also identify that 'any legal system operating only on the category of people labelled mentally ill is discriminatory' (p.17) and is in fact a form of lawful violence. This paradigm shift is examined usefully in Chapter Two providing a sociologically based theoretical model describing the intersectionality of restraint from a micro- to macro-systems perspective. This insider view foregrounds the negative and ongoing trauma to people experiencing forms of restraint. This chapter also has an engaging and laudable section in what care could look like in 2050 with an elimination of restraint practices. However, detail about how to care for people who are a danger to themselves or others, who are suicidal or psychotic, is not provided beyond the suggestion that systematic community based holistic care can provide care that respects individuals' human rights.

Chapters in Part Two explore a diverse range of issues: rapid tranquilisation, restrictive practices on people with intellectual impairment and gender in regard to designing legislation to facilitate real change. Chapters Three, Four and Five are very dense and heavy going in places, but certainly provide a great resource for psychiatrists and those in the legal profession regarding the legal complexities involved in effecting policy change. Chapter Five is a valuable and timely examination of the need for a lens on gender in relation to restrictive practices and the need for a trauma-informed approach to care. Quotes provided by women are harrowing examples of the harms caused by experiences of restraint. Chapter Six chronicles tragic fatalities of people exposed to restraint and explores a range of practices which can facilitate a reduction in restraint from an English perspective.

Part Three discusses issues relating to the implementation and monitoring of reforms using data from Australia, the Netherlands and Germany. The content is somewhat uneven across chapters but provides a breadth of detail across an international context of attempted reforms. The use of data and associated limitations about restrictive practices is clearly a fundamental factor in monitoring the effect of change as described in Chapter Nine, whilst Chapters Seven and Ten focus on legislation and human rights issues. Chapter Eight provides an Australian context from the state of

Queensland, detailing the lessons learned from the implementation of the state mental Health Act of 2010, yet does not overcome the predominance of the risk and safety discourse continuing to justify restrictive practices.

The risk discourse is further problematised in Part Four exploring societal, psychiatric and mental health culture as a key influencing factor in the continuing justification for the use of restrictive practices. Chapter Eleven takes the reader through the appalling clinical practices as detailed in the 'Oakden report' from South Australia (concerning abuse and violence against residents of the Oakden Older Persons Mental Health Service) and calls for strategies that can lead to organisational change through leadership but, in conclusion, warns that without respectful workplace cultures, systemic reforms cannot be realised. Chapter Twelve focusses usefully on recovery-oriented care and associated challenges but is generally silent on the burning questions, 'What does care look like when no restrictive practices are used at all?' and 'How are health professionals and carers to be protected from aggression and violence in the workplace?'. Nevertheless, this chapter synthesises the limited quality of evidence about how to improve care and consumers' experience of care in acute psychiatric institutions and other health settings and this 'pulling together' of themes and challenges makes a substantial contribution to ongoing discussions in the literature. Chapter Thirteen reports on the state of play with specific examples of research in aged care settings, regarding the use and overuse of psychotropics and has prescience in the context of another Australian development, the Final Report of the Royal Commission into Aged Care Quality and Safety, released earlier this year. The final chapter of the book takes the reader on an often-neglected exploration of the need for the engagement of doctors to reduce restraint by changing medical behaviour.

In summary, this weighty text enhances awareness as well as the knowledge base about the ongoing complexity and controversy regarding the use of restrictive practices with the most vulnerable in society, those with mental illness and disability. The logical progression of chapters from current reforms to transformative, recovery-oriented care provides the reader with an engaging narrative building on previous knowledge in each chapter. The collective impact of various forms of restrictive practices need to be recognised and understood as greater than the sum of individual restraint and seclusion practices which frequently have a profound and enduring negative impact on consumers. The paradox of providing care in the context of the use of controlling practices remains both a perennial issue and a wicked problem facing health professionals working in the care of people with an acute mental illness and in disability settings. This text addresses these core issues in a systematic and comprehensive way which I have not encountered in any collection of literature to date. I thoroughly recommend this text to those working, studying and researching in legal, social work, psychiatry, mental health nursing and disability fields.