## In practice

## Mental health by numbers

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'If, on a scale of one to 10, where 10 represents your mood at its best and one at its worst, what number would you give yourself now?'

This question is quite often asked in mental health settings. I know it is also asked by some counsellors and psychotherapists.

The usual rationale is that it provides a benchmark against which improvement or deterioration in a person's mood can be evaluated.

Regular scoring may even become part of a client's 'mood diary'.

There is a proliferation of various questionnaires, rating scales and forms of measurement in the mental health field. They are also increasingly impacting on the therapy profession.

Gathering numerical data via rating scales now seems indispensable to much research and evaluation of technologies (both drugs and therapies). It is at the heart of quantitative evidence-based research.

A numerical score may be used to determine care pathways and has become part of risk assessment processes. An example here is the numerical thresholds used with the PHQ-9 (Patient Health Questionnaire) that influence whether GPs refer patients with depression to secondary mental health services or IAPT (Improving Access to Psychological Therapies) services.

In organisations such as the NHS, numbers are demanded to enable resources to be targeted, greater operational efficiency and, ultimately, greater economic productivity. In other words, a number has practical, organisational utility (as well as the potential to be manipulated

in an era of cost cutting). Numbers equal payments.

It is easy to see, then, that numbers have become powerful. I would argue that they have now become a tyranny.

As far as I recall, I have never, in either of my roles as psychiatrist or counsellor, asked someone to rate numerically their mood or other aspect of mental functioning. I have been pondering why not, and even more why I so strongly dislike the thought of doing so.

I dislike processes and questions that attempt to objectify what is ultimately subjective. It is not just because they are flawed endeavours; such questions completely overlook the difficulties of understanding and agreeing what is meant by mood, or the complex nature of mental experiences.

Numerical evaluations of this sort are also an example of the shallow simplification that seems to be at the heart of much mental health care, allied to the reductionism that chokes holistic, individualised care.

More philosophically perhaps, rating scales turn mental *processes* into concrete *states*, although snapshots in time may still be useful.

My basic objection though, is that a number really tells me very little about the nature or meaning of someone's actual experience. It doesn't

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help me to empathise. For me it has little therapeutic function. In saying this, I know that I naturally favour the language of descriptive words and concepts and how these are used to symbolise mental experience. However, my clinical practice also bears out that it is generally more helpful to invite people to find a language for their emotions and to articulate their thought processes. The clinical encounter then becomes a journey of open exploration to which both contribute. I do of course recognise that this is not every patient's preferred journey. Some individuals prefer the numerical metaphor.

Perhaps the preceding paragraph reveals why some clinicians prefer to ask patients to rate their mood with a number. Journeys of open exploration of subjective mental processes take time and sensitivity. Numerical ratings can be done in a moment, with little emotional engagement. This begs the question, whose agenda is being served - that of the patient or the busy clinician with limited time (and perhaps, for some, limited interest)?

When feelings, thoughts, perceptions and behaviours are neatly captured with a number, I now find myself wondering what is being masked and what illusions are being created. I also think a culture that increasingly desires and demands scoring systems and measurement is one that is unable to tolerate, let alone revere, the complexity, ambiguity and mystery of human being.

Let us be clearer about what our attachment to numbers is saying about our values and be honest about their limitations.