

Oral presentation

Open Access

Differences between patients with positive and negative views regarding justification of involuntary admission

Christina Katsakou*¹, Stefan Priebe¹, Diana Rose¹, Angela Sweeney² and Ksenija Yeeles¹

Address: ¹Unit for Social & Community Psychiatry, Queen Mary University of London, Glen Road, London, E138SP, UK and ²Service User Research Enterprise, De Crespigny Park, London, UK

* Corresponding author

from WPA Thematic Conference. Coercive Treatment in Psychiatry: A Comprehensive Review
Dresden, Germany. 6–8 June 2007

Published: 19 December 2007

BMC Psychiatry 2007, 7(Suppl 1):S57 doi:10.1186/1471-244X-7-S1-S57

This abstract is available from: <http://www.biomedcentral.com/1471-244X/7/S1/S57>

© 2007 Katsakou et al; licensee BioMed Central Ltd.

Background

Involuntary admission to a psychiatric hospital is often a long, complicated process likely to elicit strong feelings in patients experiencing it. Qualitative research in this area would give us a better understanding of patients' views on this complex experience and help interpret findings from quantitative studies.

Methods

The present study complements a quantitative investigation on outcomes of involuntary admission. 60 in-depth semi-structured interviews were conducted with patients who had been involuntarily admitted in 4 sites in the England. The sampling and analysis methodology draws on grounded theory. The sample includes participants admitted under different sections of the Mental Health Act. Their experiences of involuntary admission and treatment and their views on the justification of these interventions were explored. Comparisons between participants with overall positive and negative views were performed. Changes in patients' views over time were particularly examined. Interviews were tape-recorded and transcribed verbatim. Data was coded using MAXqda software for qualitative analysis.

Results

Results indicate that the evaluation of risk and mental illness, as well as perceived violations of autonomy and discrimination shaped participants' views on the justification

of their compulsory admission and treatment. Patterns of changing views consisted of gradual realisation of poor mental state and subsequent need for treatment.