

Oral presentation

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Recommendations of Swiss users to reduce aggression and coercive measures in psychiatric wards

Christoph Abderhalden*¹, Gerda Malojer², Gianfranco Zuaboni³ and Ian Needham⁴

Address: ¹University Bern Psychiatric Services, Nursing and Social Education Research Unit, Bolligenstrasse 111, CH-3000 Bern 60, Switzerland, ²St. Pirminsberg Klinik für Psychiatrie, Psychotherapie und Suchtbehandlung, Klosterweg, CH-7312 Pfäfers, Switzerland, ³Sanatorium Kilchberg Psychiatrische Privatklinik, Alte Landstrasse 70-84, CH-8802 Kilchberg, Switzerland and ⁴University of Applied Sciences St. Gallen, Department of Health, Tellstrasse 2, CH-9000 St.Gallen, Switzerland

* Corresponding author

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Background

To explore what experienced psychiatric service users would recommend in order to prevent aggression-related coercive treatment in psychiatric wards.

Methods

We conducted 3 focus group discussions with experienced psychiatric service users and invited them to discuss possible measures to reduce aggression and coercive treatment in psychiatric inpatient care. Participants were 5 men and 12 women aged 29–59 years. Their experience with inpatient care is based on 1 to 29 hospital stays (mean 8) in altogether 10 (out of 32) psychiatric hospitals in 3 regions of German speaking Switzerland. Five persons gave as their diagnosis schizophrenia, 4 bipolar disorder, and 3 personality disorder. We analyzed verbatim transcripts of the audio-recorded group discussions employing qualitative content analysis methods.

Results

The recommendations clustered around two main categories and 12 themes. According to the users, measures to prevent escalation of aggression leading to coercive treatments should mainly focus on the issue of power and powerlessness in carer-patient-interaction and on the management of (mutual) anxiety and fear among staff and patients. Other recommendations relate to information and cooperation, patient-staff interactions, team and

teamwork, advocacy, the ward environment, ward rules, therapies, availability of psychiatric services, and staff attitudes. It became obvious that the users' understanding of coercion encompasses more than seclusion, forced medication and restraint. The material also included accounts of positive experiences of coercive treatment and descriptions of situations where coercion seemed inevitable.

Conclusion

The discussions with this group of experienced users provided a wealth of relevant information that could contribute to the prevention of coercive measures and help to discover blind spots of the professionals.