

Oral presentation

## **Coercion: point, perception, process**

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### **Background**

The use of coercion in the treatment of persons with serious mental illness is a long debated strategy to gain adherence to treatment for persons believed to be cognitively impaired by their illness. This article examines the psychometric properties of a scale developed to measure perception of coercion. Using a psychometrically sound scale found to be both reliable and valid in a specific sample of men and women from New York State, we found no difference in perception of coercion between those court-ordered to remain in treatment following hospital discharge and those persons receiving outpatient treatment without a court order.

### **Methods**

Therefore, to understand why, given the objective difference in the use of coercion, there was no difference in the subjective perception of coercion, we conducted 20 open-ended interviews with 11 persons without court orders and 9 persons with court orders.

### **Results**

We found that where a collaborative relationship was established between the case manager, assigned to the patient with the court order to coordinate post-hospitalization treatment services, and the patient, it was much less likely that the patient perceived him/herself as coerced or forced to take treatment. Conversely, persons without advocates felt themselves to be coerced into treatment when there was no court order to insure treatment adherence.

### **Conclusion**

Since perception of coercion significantly influences adherence to treatment, it is vital to identify strategies to reduce perceived coercion for all who receive treatment for serious mental illness.