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The development of a scale to measure staff attitude to coercion

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Previous studies have shown that there is considerable variation in the degree to which coercion is used in mental health institutions. This variation between institutions and even between wards is seen in many countries. Many factors have been put forward to explain this variation in the use of coercion, but we still can't explain it. If we had a better understanding of these factors, we would know more about how the use of coercion can be reduced in mental health care. Measures of coercion in this study are amount of involuntary admissions, forced medications and use of restraints (bed-belts) on Norwegian acute-wards. Some of the factors explored in previous studies include geography, population size, patient characteristics, ward characteristics etc. Staff attitudes to the use of coercion are one factor that has not yet been investigated in this regard. The scope of this project is first to develop a questionnaire to measure staff attitudes to the use of coercion. The next step will be to investigate if differences in staff attitudes to coercion can explain some of the variation in the actual use of coercion on wards in the mental health service. The project will also deliver updated data about how much coercion is used on Norwegian acute-wards in 2005/2006. This project is part of a big multi-center study on many aspects on Norwegian acute-wards (MAP).