

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.