

Method Fifty psychiatric patients participated in this research, 21 (42%) males and 29 (58%) females. Out of them, 25 (50%) had been diagnosed with depression, 15 (30%) with psychosis, 6 (12%) with psychosis and depressive symptomatology and 4 (8%) with bipolar disorder.

Results The findings showed a significant effect of psychotherapy on treatment adherence ($\chi^2 = 4.915$, $P = 0.027$), with 7 out of 11 patients who undertook psychotherapy reporting good adherence rates compared to 12 out of 39 patients who did not. Gender had a significant effect on adherence ($\chi^2 = 5.96$, $P = 0.05$), with females reporting better adherence compared to males. Perception of treatment did not correlate significantly with adherence ($\chi^2 = 0.439$, $P > 0.05$) and neither did education ($\chi^2 = 2.22$, $P > 0.05$). Also, neither age ($F(2,47) = 1.535$, $P > 0.05$) nor hospitalization time ($F(2,47) = 1.131$, $P > 0.05$) correlated significantly with adherence to treatment.

Conclusion Even though there was no significant correlation between perceptions of treatment and adherence, psychotherapy seems to improve adherence to therapy during hospitalization and is also correlated with positive perceptions of treatment, something which will be valuable for the patient even after the hospitalization.

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EV784

Preserving control: Understanding people's experiences before, during and after detention under the Irish Mental Health Act 2001

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Introduction The Mental Health Act 2001 provides a legal framework for the involuntary admission and treatment of individuals deemed to have a mental disorder to psychiatric units. The perspectives of people who have been detained are relatively poorly understood.

Objective To develop a theoretical understanding of individual's experiences throughout the trajectory of their detention and to understand the psychological and social processes that individuals use to cope before, during and after detention.

Methods Fifty individuals subject to detention across three psychiatric units consented to be interviewed three months after their detention. Using a semi-structured interview people recounted their experiences. Interviews were analysed using the principles underpinning Grounded Theory.

Results The theory 'Preserving Control' encapsulates individuals' experiences and consists of three related themes: 'Losing Control', 'Regaining Control' and 'Maintaining Control'. 'Losing Control' describes individuals' experiences of losing their autonomy and liberty through the process of detention and hospitalisation. 'Regaining Control' describes the strategies individuals used in an attempt to restore their loss of autonomy and control. 'Maintaining Control' describes how individuals lived with the consequences of detention and contended with impact on discharge.

Conclusions Whilst a large variation existed in relation to the subjective experience of being detained, the characteristic process that individuals tend to experience related to identifiable phases of preserving control in the face of this loss of autonomy. Findings from

this study highlight the importance of more sensitive interactions support and information during and after the detention process.

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Implementation of Health of the Nation Outcome Scale (HoNOS) in Outpatient Clinic, Sligo Mental Health Services: Feasibility and Agreement with Global Assessment of Functioning Scale

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Introduction Outcome measurements in mental health services is beneficial in allowing healthcare providers in determining the effectiveness of their treatment plan. Health of the Nation Outcome Scale (HoNOS) and Global Assessment of Functioning (GAF) are two well-established instruments to measure patients' outcome.

Aims and objectives To measure the correlation of these two scales, and the feasibility of HoNOS.

Methods Prospective longitudinal study of psychiatric outpatients attending a clinic in Sligo. Patients were assessed using HoNOS and GAF by trained doctors during the consultation. Feedback from doctors using HoNOS during the research was taken as a measure for feasibility.

Results Total of 441 HoNOS and 237 GAF completed on 280 patients (53.2% female, mean age 46.23; SD = 14.89). The correlation between HoNOS and GAF was ($r = -0.696$, $P < 0.001$). In reassessment, we found significant reduction in HoNOS score when comparing the first assessment with the second ($t = 4.590$, $df = 110$, $P < 0.01$) and the third ($t = 2.876$, $df = 37$, $P < 0.01$). Using a linear mixed-effects model, it was found that patients with diagnosis of schizophrenia, mood affective disorder, neurotic disorder, personality disorder and younger in age are more likely to improve during the follow-up compared to those with organic mental disorders, alcohol related problems and older age.

Conclusions HoNOS is a feasible scale and can be potentially used as an outcome measurement in the mental health services. Can help in deciding better management plan for patient and improvement of the service. HoNOS can also be used for comparison of outcomes between services in national and international level.

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Psychiatrist's mental health: A look at burnout in a psychiatry department in Portugal

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