A study on the process of how mentally disabled patients begin to visit medical institutions —Their life stories before the treatments and discussion

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[Aims]

In 2004, a task force of the Mental Health and Welfare Division of the Ministry of Health, Labor and Welfare has presented the reform visions for mental health welfare.

Since then, regional mental health systems have been developed and expanded as priority in addition to discharge support for mentally disabled patients.

Various investigation have been conducted on specialized institutions, professionals and patient families. The results of these investigations revealed the following things.

- i) Practical nursing methodology and support for the mentally disabled patients after visiting department of psychiatry.
- ii) Living conditions of mentally disabled patients who live in a regional area before visiting medical institutions.
- iii) Process of how mentally disabled patients begin to visit medical institutions.

In this study, we interviewed the mentally disabled patients about the anteroposterior episodes of their daily life experiences and the process of how the patients begin to visit medical institutions.

We then discussed the meaning of those experiences for the patients and their influences on the treatment process and the patients' subsequent lives.

Through the discussion, we aim to obtain the suggestions of the discharge support and of the nursing care for the mentally disabled patients who live in the regional area.

[Discussion 1]

For most of the patients, the first morbid experiences and their surrounding environment promoted the awareness of the need of hospital visit, leading to the first treatment acceptance. However, the patients experienced the changes of treatment regimens including the changes of hospitals and doctors due to the distrust of medical institutions, poor sense of therapeutic effects and suffering adverse events. Afterwards, the patients met new people such as reliable health and medical welfare experts and friends with mental illness. In addition, the patients experienced various life events such as romance and marriage. As a result, the patients achieved the changes of the sense of values and their courses on the basis of disability acceptance that comprehensively includes self-understanding, self-acceptance and social acceptance. And although the patients have the feelings of insufficiency and anxiety for the current situation, the patients also achieved mental health restoration.

[Methods]

We selected participants from the mentally disabled patients who routinely visit the department of psychiatry of the medical institutions in cooperation with the persons in charge of psychiatric day care and outpatient department. We told these patients that their participation is voluntary and that their privacy is protected orally and in writing, and we then obtained the written consents from 6 patients. We qualitatively and inductively analyzed the interview results using Grounded Theory Approach of Strauss Corbin by collating the concept of resilience defined by Bonano and the central concept of PTSD advocated by Judith L. Herman.

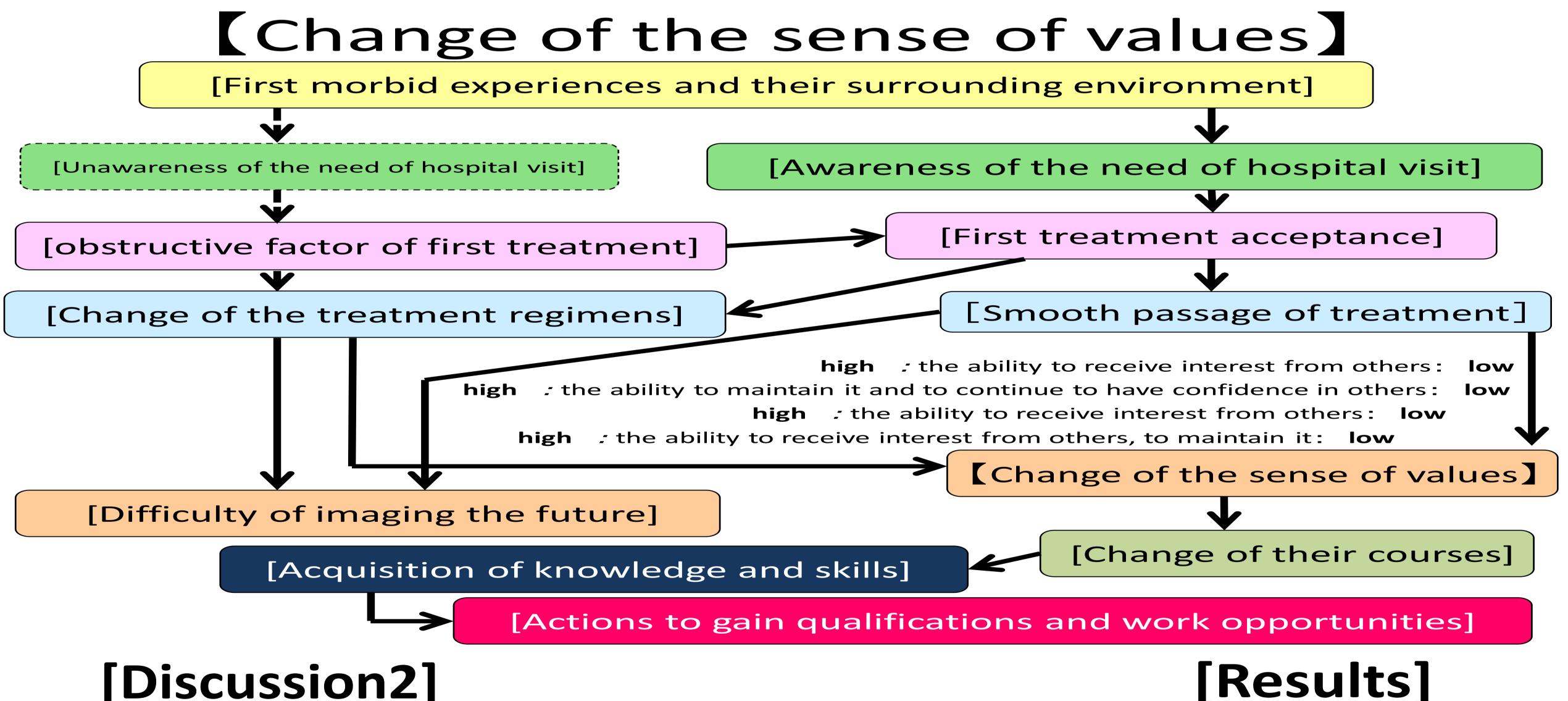
[Method of the data analysis]

The Grounded Theory approach developed by Strauss and Corbin was employed for analysis.

The procedure of the analysis

based on Grounded Theory approach

- 1. The reading of data for understanding
- Extracting of propaties and a dimensions every piece
- Labeling data
- Comparison of dimensions and proparties between labels
- Labeling categories
- Comparison of dimensions and proparties between categories
- Grasping relations between categories
- Making a category association map based on a paradigm
- 5. Theoretical sampling
- * The comparison is performed through all processes of analysis



[Discussion2]

Therefore, the patients were able to pursue the stability and growth even more, acquire knowledge and skills, gain qualifications, take aggressive actions seeking work opportunities, and hope for the future. However, there were some patients who have problems with the ability to receive interest from others, to maintain it and to continue to have confidence in others. For such patients, it was difficult to change the sense of values and their courses.

We extracted the following 8 categories concerning the anteroposterior episodes of the daily life experiences of the mentally disabled patients and the process of how they begin to visit medical institutions.

[First morbid experiences and their surrounding environment]

[Awareness of the need of hospital visit]

[First treatment acceptance]

[Change of the treatment regimens]

[Change of the sense of values]

[Change of their courses]

[Acquisition of knowledge and skills]

[Actions to gain qualifications and work opportunities]