The healing power of human reconnection: clinician and user’s views on a unit for young adults with early mental difficulties
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Learning Goal:
To describe clinician and young service users beliefs about which components of care they deemed to be more helpful for patients with psychotic symptoms

Abstract Text:
Many specialized programs for young adults with first episode psychosis have been developed around the world. These programs offer need adapted treatment to restore the lost potential by combining psychosocial and psychopharmacological interventions. There is evidence for a beneficial effect of this multimodal care model (Marshall & Rathbone, 2011). However, it remains to be determined which of the specific modalities of the programs contribute to good outcomes. Moreover, differences exist between clinician, youth and parental beliefs about the helpfulness of interventions for early psychosis (Jorm et al., 2008). For example, clinicians deem antipsychotic treatment more helpful than the other two groups. The aim of this study was to explore our multidisciplinary team (n=41) and our young service users (18-25 years) conceptions of which components of our program were the most useful. Our clinical staff and service users responded to a questionnaire and an open ended question on which components of our program they deemed to be more helpful for patients with psychotic symptoms.

Preliminary results showed that collaboration with the family (67% of respondents), restoring hope for the future (62%) and assisting social reintegration (61%) were seen as the main therapeutic factors. On the contrary, neuroleptic medication (39%) was only perceived as an important therapeutic factor for a minority of clinicians (i.e. essentially medical staff). However, complementary ANOVA’s showed significant differences between the various medical structures of our unit (i.e. inpatients program staff esteemed the collaboration with families less than the outpatient staff, whereas, they valued psychoeducation more than the outpatient staff).

Our preliminary data suggests that clinical staff value the healing powers of relational interventions (especially related to families of patients) to assist in the treatment of psychotic symptoms of their patients. In our presentation we will compare our results with the feedback received from our service users.