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EXAMINATION OF THE FACTORS ASSOCIATED WITH EARLY DISCHARGE OF INPATIENTS FROM PSYCHIATRY CASUALTY DEPARTMENT IN JAPAN

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[Objectives] The purpose of this research was to clarify the factors that predict discharge of the inpatients from acute psychiatric wards in Japan. [Methods] 383 subjects who had been hospitalized in 22 acute psychiatric wards for more than a week participated in this prospective study. They were assigned into two groups based on whether discharge within three months or not: the discharge group (n=293) and the hospitalized group (n=90). The following outcomes were assessed at the time of admission; the demographic variable, the living environment before hospitalization, psychiatric symptoms, social functions, the living and social skills relevant to discharge observed by nurses. Two groups were compared in terms of these variables. [Results] Compared to the hospitalized group the discharge group demonstrated significant differences in age ($t=2.250$, $p<.05$) and rate of diagnosis of schizophrenia ($\chi^2=8.436$, $p<.05$). Subjects with schizophrenia in the discharge group had significantly higher level of ADL ($t=4.768$, $p<.001$) and lower frequency of autistic behaviours ($t=2.831$, $p<.01$) than those in the hospitalized group. [Conclusion] The results suggest that particularly patients with schizophrenia a longer duration of hospitalization is associated with negative symptoms.

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STUDY ON STRATEGIES FOR STRENGTHENING RESILIENCE OF PEOPLE WITH SEVERE MENTAL ILLNESS THROUGH PROFESSIONALS' EXPERIENCES

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Objective: Although People with Severe Mental Illness(PSMI) have same psychiatric diagnosis and similar conditions, the progresses are very different, according to their resilience developed. This study is to explore effective strategies of strengthening resilience which mental health professionals have developed and experienced through interacting with PSMI. **Design and Method:** This study is a qualitative one. The data from mental health professionals were collected through intensive interviews with 7 individuals sampled purposely and a focus group consisted of 5 participants. The contents of the interviews were analyzed based on Giorgi's phenomenological method by using Nvivo. **Results and Conclusion:** Statements were categorized to central ideas : 1) Making opportunity by mobilizing all that are easy to be dismissed but possible, 2) Securing supportive environment system, 3) Holding out as long as possible with permitting and learning from failure, 4) Managing to overcome diverse obstacles, 5) Making achievements little by little, 6) Being with PSMI as a companion for long. In its final analysis, the central phenomenon of strengthening PSMI's resilience as a professional is 'being a companion with creativity free from the pre-existing frame and pertinacious patience'.

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BURNOUT IN PORTUGUESE NURSES AND POLICE OFFICERS: A COMPARATIVE STUDY

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Objectives: To compare burnout levels in Portuguese male nurses and police officers, both engaged with stressful professions. Burnout appears in jobs with chronic stress provoked by emotional demands of patients, clients or citizens (Freudenberger, 1974; Maslach & Leiter, 1997; Schaufeli & Buunk, 2003). Regarding nurses, studies concluded that they experience burnout (Buunk et al., 2010; Pienaar & Bester, 2011; van Beek et al., 2012) and that it can be a contagious process (Bakker et al., 2005). Police officers are a "force under pressure (Blum, 2000) vulnerable to burnout (Brown &

Campbell, 1994; van Gelderen et al., 2011; Velden et al., 2010) that leads to those conclusions: "law enforcement officers are killed by more job-related stress than they are by criminals" (Ranta Sud, 2008). Comparative studies reveal higher emotional exhaustion and depersonalization in nurses than in police officers (Bakker & Heuven, 2006; Maslach & Jackson, 1997). **Design and method:** Participants were volunteers Portuguese males, 345 nurses and 345 police officers, mean age of 36.2 years for police officers and 34.9 years for nurses, with an average of 12.9 (police officers) and 11.3 (nurses) years of professional experience. Data were collected after institutions' authorization in north of Portugal hospitals and security police departments (PSP) using Maslach Burnout Inventory – HSS (Maslach & Jackson, 1997; Marques-Pinto et al., 2003), after institutions' authorization. **Results and conclusions:** Despite low levels of burnout (1.2 and 2.3 to negative dimension and 4.4 for professional accomplishment in a 0-6 scale), results show significant differences, with nurses experiencing higher emotional exhaustion and depersonalization, and lower personal accomplishment than police officers. Age is negatively correlated with emotional exhaustion and depersonalization only in nurses. Results are similar to other studies (Bakker & Heuven, 2006) and alert that burnout, especially in nurses affects provided care (Schaufeli & Buunk, 2003) and patient satisfaction (Vahey et al., 2004).

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THE COMPARISON OF SERVICE CHARACTERISTICS BETWEEN ASSERTIVE COMMUNITY TREATMENT PROGRAM AND PSYCHIATRIC HOME-VISIT NURSING IN JAPAN

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Purpose. In Japan, deinstitutionalization has been delayed and outreach services have not yet developed. Only recently, many pioneering outreach activities are being started. Assertive community treatment (ACT) and psychiatric home-visit nursing (PHVN) are among the most well-known of those outreach programs. However, differences between these two treatments are not clear. We compared these two services to discuss their role in community mental health. **Methods.** We collected data from the clients of 6 ACT agencies and 21 home-visit nursing care stations in 2008. The included subjects were people with mental illness (ACT: n = 32, PHVN: n=97). We recorded every face to face contact with clients by using service-code checklist for 1 month. After one year, in 2009, we collected again the same data. **Results.** The service intensity of PHVN was lighter than that of ACT in Japan. On average, PHVN contacted their clients 3.5 times a month, whereas ACT contacted their clients 8.5 times a month. PHVN supported their clients primarily at home, whereas ACT supported clients also in other settings PHVN emphasized client monitoring and assessment, whereas ACT engaged the client to provide concrete and direct support.

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USE OF MENTAL HEALTH BED-DAYS AND OUT-PATIENT SERVICES FOLLOWING AN IMMEDIATE INTENSIVE AFTERCARE PROGRAM FOR NON-PSYCHOTIC PATIENTS AT PSYCHIATRIC CENTER BALLERUP, COPENHAGEN

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Objective: To evaluate the effects of an immediate onset, high intensity aftercare program for non-psychotic patients after discharge from Psychiatric Centre Ballerup (PCB) one year after its introduction. We postulate that intensive follow-up will improve medication adherence, lower drop-out rates and improve clinical outcome. Further, immediate onset prevents symptom relapse after discharge and sometimes allows to shorten admission time. **Design and method:** Patients included during the first year (N=188) are compared with a retrospective control group of patients following a former less intensive outpatient program. Data concerning age, sex, diagnoses, re-admissions, bed-



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