

HESAV-SCHOOL OF HEALTH SCIENCES

MENTAL HEALTH

Multidisciplinary research, serving the health care field

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Mental health

Concerned with upholding humanistic, respectful psychiatric clinical practice, HESAV develops interdisciplinary research projects centred on mental health care, focusing in particular on acute inpatient psychiatric care and public policies.

The high prevalence of mental illness is a great challenge not only for our health care system but also in terms of public health and even as a societal problem, since the issues that arise from it affect all aspects of living-together in the community (security; indirect costs due in particular to difficulties in the field of employment; role of informal caregivers; stigmatization; etc.).

Several projects focus on analysing the effectiveness of care interventions. Pinpointing the importance of treatment alternatives to medication, our teams are interested in issues such as the clinical indications and effectiveness of packing therapy, as well as in changes taking place in clinical interventions in the field of autism aimed at achieving better articulated care programmes and improving communication between professionals, parents and patients.

Violence in treatment situations and the ways in which violent crises can be managed are also issues investigated by our researchers. A wide range of studies carried out at HESAV have dealt with issues including: theoretical knowledge and concrete approaches used to manage violent episodes; the impact of recourse to police interventions in crisis situations; evaluation of interviewing techniques aimed at improving initial care and prognosis for patients experiencing acute psychotic episodes...all these projects contribute to our understanding of the importance of the relationship between professionals and patients and highlight the relevance of early intervention strategies.

Finally, an innovative project focuses on rethinking intensive care practices in the context of treatment for acute psychiatric episodes through the development of a musical device to be integrated into intensive care rooms and the evaluation of its benefits for patients and for the quality of the care relationship.

Current research

Knowledge and power.
The practices of forensic psychiatrists relating to compulsory social measures. A comparative study of the cantons of Vaud, Geneva and Valais (1940–the present).

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With support from SNSF,
Division PNR 76



SWISS NATIONAL SCIENCE FOUNDATION

This project is part of the ‘Assistance and coercion: past, present and future’ National Research Programme (NRP 76). This NRP’s main objective is to analyse the characteristics and effects of social measures that undermine or protect the integrity of individuals. As one of about twenty projects selected by the Swiss National Science Foundation, our study aims to investigate the place of psychiatrists’ forensic reports in decision-making processes. A forensic report is a required document when appointing a legal guardian or interning someone in a psychiatric institution (‘compulsory social measures’). It decides on aspects such as responsibility, the potential danger to self or others and the need for care. What knowledge does a forensic report produce and what treatments and institutions (hospitals, homes, different sorts of prison) does it recommend? How does the psychiatrist describe the conduct that justifies restricting someone’s freedom for their own safety or the safety of others? How do those who have been the subject of a report react to the decisions imposed on them?

To answer these questions while considering historical and geographical variations, the study covers a long period (1940–the present) and compares three French-speaking cantons (Vaud, Geneva and Valais). From a methodological point of view, in addition to studying institutional archives and various other sources, we will do a quantitative analysis of 600 forensic reports and a qualitative analysis of a smaller corpus of cases having incurred both civil and criminal measures.

Our broad hypothesis is that the practices of forensic reports reflect and influence socio-political responses to transgressive behaviours. It remains to be ascertained whether the evolution of these reports represents social progress in helping those affected by compulsory social measures.

Musical listening in a seclusion room (CSI) in a psychiatric environment.

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With support from
Fondation Gerbert Rûf,
BREF-Soziale Innovationen
project.

Restraint measures in the care of psychiatric patients are very controversial, in Switzerland and in other European countries alike. Seclusion room (CSI) or secure room (the name varies from one institution to another) stand for a lockable space intended to reduce sensory stimulation so that patients can regain control over their psychological condition and their behavior. The clinical use of those spaces is problematic in many ways: it is an assault on personal freedom, autonomy and dignity of patients; the therapeutic function and the effectiveness of the seclusion are not proven; low sensory stimulation itself may be laden with risks, and above all, this type of intervention makes it difficult to establish a caring relationship based on dialogue and interaction.

The use of music to fill the silence of the room and thus to contribute to reducing the feeling of loneliness and abandonment as expressed by the patients seems to be a promising idea, especially if they have the opportunity to manage themselves the music device, which restitutes them back certain autonomy and a degree of control over their immediate environment. These considerations formed the starting point for an action-research project (Amenhotep, 2012-2016) which allowed the development of a music-hearing device that complies with very strict safety rules specific to acute psychiatric wards, and to make a choice of music tracks that were subsequently categorized according to their emotional content. Currently, several rooms are equipped with this device in three psychiatric hospitals in Switzerland and in neighboring France (Lyon).

The main objective of the project «listening to a music in CSI» is to assess the feasibility of an empirical applied research protocol by testing some of the theoretical assumptions formulated by the clinical teams previously involved in its development. The project must observe if the patient's use of the device takes different forms according to their needs at the moment; if the device facilitates new forms of interaction between caregivers and patients; and, finally, if its implementation and use have an impact on the subjective well-being at work of the former and on the subjective experience of seclusion in CSI of the latter.

The long-term role of forensic medical expertise in placements and detention: from the Enlightenment to the Swiss Civil Code, in Geneva and Vaud..

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With support from SNSF,
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In civil and penal jurisdiction, forensic assessments coin decision-making with regard to the compulsory confinement of persons posing a threat to themselves or to others. Where does this power of the experts stem from and which factors contributed to the development of forensic psychiatry in Switzerland?

The period under investigation (1760–1910) saw a rise of the epistemological and social power of forensic psychiatry as well as, simultaneously, a strengthening of legal provisions guaranteeing individual freedoms and an increase in the number of institutions replacing hospitals. The project wishes to describe the emergence of novel coercion structures dealing with “deviant” behavior and “abnormal” conduct in a period of liberalism. The project will draw comparisons between the cantons of Geneva and Vaud in which control mechanisms, internments, and treatment methods were put in place precociously, based on forensic assessments.

The recent reappraisal of the history of psychiatry in Switzerland calls for the study of forensic assessments over a longer period of time. Even before cantonal and federal legislation (Swiss Civil Code, ZGB 1907, for example) declared medical expertise mandatory, therapeutic or safety internment was based on forensic assessments of which little is known and that are difficult to access in the archives. This project will highlight the history of an ambivalent practice that is reflected in the current legal situation.

The project wishes to identify the current challenges in the field of forensic psychiatry with regard to placement and internment measures. It will deal with changes to practices, sensibilities, the discourse, and those institutions responsible for forensic assessments, i.e. how they are structured and how they assert themselves. Thanks to the historical reappraisal of the impact of forensic assessments on society, this project will serve today’s experts as a basis for the critical reflection of current legal and administrative procedures.

Current PhD research

Psychiatric patients and recovery: individual and collective resources.

AUDREY LINDER

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Nowadays, in the French-speaking part of Switzerland, the concept of recovery is central in mental health policy. The specificity of this concept is to be person-centred. It is defined as a process of building a “new self” after the destruction of the “old self” by psychiatric illness. However, a reinsertion in society also necessitates some collective resources.

My thesis will focus on how individual and collective resources work together in the psychiatric patients’ career. To answer this question, I will use three methods of data collection. The first method is a documents review, with two different corpus. The first one will gather documents about recovery (association’s leaflets, charters, websites, swiss scientific articles). The second one will gather scientific articles written by French-speaking Swiss authors about the larger concept of reinsertion since 1970s. With the first corpus, I will try to show how the concept of recovery is constructed, what it is made of, what possibilities it opens. With the second corpus, I will demonstrate how the conception of reinsertion has evolved since the deinstitutionalisation to arrive to the actual concept of recovery.

The second method consists in a two-year ethnography in a psychiatric unit of rehabilitation. In this unit, the psychiatric team say they work towards the patient’s recovery, but they also focus on group and community treatment. They consider that these two approaches are complementary. I will therefore question the way in which psychiatric illness, recovery, reinsertion but also responsibility and autonomy are dealt with in the psychiatric unit’s everyday life.

Finally, semi-structured interviews will be conducted with ex-patients of the psychiatric unit. The purpose of these interviews is to study the process of reinsertion from the patient’s point of view and, more precisely, to identify which groups (family, friends, other patients, etc.) the patient affiliates with, and how these affiliations evolve – or not – during the reinsertion process.

Completed research

Corinne Schaub

In collaboration

Catherine Bigoni (HESAV)

Alexia Stantzios
(DP-CHUV/SPN)

Bruno Deschamps
(DP-CHUV/SPN)

End 2019

Identifying the complementary and integrative medicine (CIM) practices of healthcare professionals in canton Vaud's Northern Psychiatric Sector (DP-CHUV/SPN) and the individual determiners of their intention to use CIM.

Cristina Ferreira

In collaboration with

Jacques Gasser (CHUV, UNIL)

Ludovic Mangué (HESAV)

Delphine Moreau (HESAV)

Sandrine Maulini (HESAV)

Noemi Dissler (HESAV)

Bettina Blatter (HESAV)

End 2019

Protection by confinement: sociological and historical perspectives on inpatient civil commitment.

Krzysztof Skuza

In collaboration with

Shyhrete Rexhaj (HEdS La Source VD)

Claire Terrapon (HEdS La Source VD)

Kim Lê Van (HESAV)

End 2019

Needs, current clinical practices, and support for family caregivers in adult psychiatry in the French speaking part of Switzerland: An assessment study.

Krzysztof Skuza

In collaboration with

François Ansermet (HUG, UNIGE)

Audrey Linder (HESAV)

Thomas Jammet (HESAV)

End 2018

Contemporary reconfiguration of the clinic of autism. The tension between forms of expertise: an analysis of enunciation.

Alexia Stantzios

In collaboration with

Emilie Bovet (HESAV)

End 2015

Stories for History: Polyphony of Psychiatry.

Krzysztof Skuza

In collaboration with

Emmanuelle Opsommer (HESAV)

Raymond Panchaud (Fondation de Nant)

Gilles Bangerter (HESAV)

Julie Dubois (HESAV)

Audrey Linder (HESAV)

Diane Martin (HESAV)

End 2014

Cold wet sheet packs (CWSP): clinical indications, efficacy and subjective experience of the patients in adult acute in-patient psychiatric ward.

Alexia Stantzos

In collaboration with

Gilles Bangerter (HESAV)

Angelika Gusewell (HEMU)

Cédric Bottand (HEIG-VD)

Emilie Bovet (HESAV)

End 2014

Rethinking the practice of intensive care in acute psychiatry units. Towards the construction of a research-action. Elaboration, application and evaluation of a musical object in an intensive care room.

Completed PhD research

Corinne Schaub

Director of thesis

Prof. Diane Morin

Faculty of Biology and Medicine, University of Lausanne

The effect of hand massage on stress and agitation in patients with dementia and on stress and mood of their nurses.

Co-Director of thesis

Prof. Armin von Gunten

Faculty of Biology and Medicine, University of Lausanne

Dr. Julius Popp

Faculty of Biology and Medicine, University of Lausanne

End 2016

All research can be found on the website of HESAV

<http://recherche.hesav.ch>



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