# A reflective study on the training for nursing professionals in psychiatric institutions

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#### Abstract

This study was subsequently conducted to in-depth understand the demands of professional training for competent nurses serving in psychiatric divisions, typically focusing on the training contents and effective approaches through continuous interviews and reflections. Adopting qualitative research methods, the researcher interviewed 4 professional nurses, working in a psychiatric division, to insightfully understand their demands of professional development contents and effective training approaches on the bases of their daily job tasks and reflective inner voices. Through a series of on-site interviews, reflective interpretation, and validating triangulation, this study finally drew the crucial conclusions: Psychiatric nurses care for patients with their mental, behavioral, and emotional problems, not only focus on general nursing routine work but especially they have to focus on the communication and problem response of the patient's family, emphasizing the establishment of therapeutic interpresonal relationships. The nursing process is a dynamic development, focusing on core capabilities and values.

Keywords: psychiatric institutions, nursing professionals, the training and reflective

#### **1. Introduction**

A questionnaire on psychiatric disorders was conducted between 2005 and 2008 in the United States, it was found that 348 people were diagnosed in psychiatric disorders out of 3.03 million people suffering in schizophrenia. The direct cost on medical treatment for mental illness was estimated to be USD17.1 billion, equivalent to about USD4 billion per year, and the average annual cost spending on each patient was USD5,984. Over the same period, the indirect cost relating to mental illness was USD74.74 billion, equivalent to about USD18.68 billion each year, average annual cost per patient was USD24,664, and the total annual cost was about USD23 billion. On the other hand, it was found that approximately 5% population in the UK were suffered from serious mental health problems. However, caregivers who are caring for people with mental health diseases

resulting a higher financial costs and greater pressure than those caring for other diseases (Clibbens, Berzins, Baker, 2019). Patients suffering schizophrenia are the sixth highest-burden disease among all diseases in the world, and it is foreseen a demand for community mental care in the future (Huang & Wang, 2015). Taiwan's mentally ill population has been increasing year by year. According to the statistics report from the Ministry of Health and Welfare (2020), the number of persons with disabilities has increased from 1,125,113 in 2013 to 1,198,358 in 2020, increased of 73,245 people in 7 years, a growth rate of 6.5%. The proportion of people with disabilities in the total population increased from 4.81% to 5.08%, an increase of 0.27%. People with disabilities are commonly trapped in chronic diseases and tense to break away from the society, causing they are prone to dysfunction in daily living activities and deterioration in cognition, then becoming chronic psychiatric disorders (Lin, Xu, Li & Jiang, 2014). Due to the lack of understanding of mental illness by the Chinese people and the negative stereotype of mental patients, the patients are under great pressure after the illness(Chen, Tian, Lin, Kuo, Wu, Chen, Lu, & Huang, 2020). With the invention and application of psychiatric drugs, the symptoms of psychiatric patients have been controlled, and issues related to the patient's life function, quality of care, de-stigmatization and patient human rights have also received much attention from all walks of life(Chang, Rong, & Chang, 2015). Mental illness is one of the most stereotype common diseases in today's society (Paananen, Lindholm, Stevanovic, & Weiste, 2020). Research on mental illness rarely discusses the training and methods of nursing professionals in psychiatric wards, as well as the training process and needs. Therefore, this article aims to gain insights into the needs for professional training capabilities, methods and professional training of nursing staff in psychiatric wards.

## 2. Literature Review

#### 2.1 Community rehabilitation of psychiatric patients

The five most common needs for care of mental patients in the community are: treatment of mental symptoms, supportive employment, financial benefits, and treatment of community rehabilitation. It has been proven that these care services can effectively help to stabilize mental illness patients and enhance their daily functions. There is a significant positive correlation between daily function and disease stability. Community rehabilitation for patients with mental illness can effectively stabilize their symptoms and prevent disabilities. The main purpose of community rehabilitation is to help patients with mental illness live independently in the community and reduce disability. In order to strengthen the function and quality of community rehabilitation services, we must reinforce the overall care of patients with mental illness (Cheng et al., 2018). With the cooperation of nurses and family members, the patient's condition can be stabilized with regular medication (Hsu, Kao, Ying, & Pan, 2020). Community rehabilitation can effectively provide assistance for mental patients, and stabilize their conditions, also to prevent disability and degeneration. Providing rehabilitation planning to psychiatric patients can improve their ability to work, work motivation, social skills and daily living functions. Health caregivers should sustain community rehabilitation to psychiatric patients, focusing on improving their daily living functions. Caregivers need to carefully monitor and evaluate the recovery of patients from drug treatment during the community rehabilitation (Cheng, Chen, Lin, & Huang, 2018). Sustainable professional care is helpful for both patients and caregivers. The practice of rehabilitation provides caregivers with an opportunity to integrate the support of the care team and peers, also enhancing knowledge (Clibbens et al., 2019). From the above, providing supports to patients on disease management, psychological recovery, daily living management, family support and community participation, strengthening communication skills and regular medical treatment, etc., can effectively assist and stabilize the mental patients.

#### 2.2 Related care for psychiatric patients

In addition to drug treatment and daily life caring, chronic mental patients also need to have very important "work training". The process of restoring their work habits, strengthening their physical fitness, and increasing their social and psychological adjustment capabilities will help improve the effectiveness of future work abilities (Huang, Lee, Lin, Chuang & Huang, 2018). If mental patients have the ability to take care of themselves, they will have a better quality of life. Besides providing supports on stabilization their mental illness and reduce their interfering behaviors, one of the key rehabilitations is to provide training on self-care and personal hygiene to reduce functional degradation, so that they can better adapt to society (Huang, Wei, Huang & Huang, 2019). Employment challenges for patients with mental illness are not only attributed to the severity of disability, but it is necessary to think in a new way to conceive employment problems and intervention services (Cheng, Chen & Lee, 2019). A new way is to transform the traditional view as patients being the core receiving supports in a passive way, into an empowering concept that helps the patient to understand his own situation, stimulates his motivation for change, and develops the corresponding skills needed. With a service view centred on the individual needs, mental health care professionals have also modified the past therapeutic interpersonal relationships and gradually become partnerships with the patients (Li & Tsai, 2017). Patients' confidence and self-care management are improved when the health care professionals use a normalized attitude and reduce categorizing from mental illness (Paananen et al., 2020). It can be seen from the above that the care services for psychiatric patients includes: medication, stabilization of mental symptoms, work training, self-care ability, mental health and disease-related knowledge, community life skills, community intervention therapy, relationship with family members and empowerment, etc.

2.3 The role and function of nursing staff in mental institutions

Community mental cases have six major needs: disease management, crisis management, daily life management, family support, and social participation; it requires a cross-professional, integrated and continuous community empirical service model (Liu, Rong & Lee, 2017). In order to transform the traditional treatment for mental diseases, professionals need to consider patient's needs as the starting point, and taking into account the mutual needs between the patient and caregiver, then review the care services for the patients to rediscover the future development direction of mental health care in Taiwan (Li & Tsai, 2017). When developing an appropriate health intervention strategy in addition to medical treatment, we can also consider providing more resources such as health education, physical activity, leisure sports, and even participation in community care services. These resources can improve patients' quality of life and meet their physical and mental needs, also increase the opportunities for interaction with others, so that they can successfully integrate into the community (Liu, Chen, & Chu, 2018). The role of psychiatric home nurses is as clinical nursing experts, consultants, educators, and coordinators. Their main functions are to evaluate situations, provide patients and their families with correct knowledge and medical consultation to recover, also provide crisis management at emergency and referral assistance, assist patients to receive continuous care in a familiar environment, help patients take medication regularly through the psychiatric home care scheme, stabilize the condition, and successfully living in the community (Hsu, Kao, Ying, & Pan, 2020). It is important to establish a supportive home environment, with supports by the surrounding residents and the community to foster patient's emotional connection and sense of belonging. It is meaningful to provide individualized life reconstruction experience and socialization through building trust and confidence between the patients, family members, friends, and co-operative communities. Emphasizing opportunities and support to reconnect with family, friends and the community are vital for people with severe mental illness (Watson, Fossey & Harvey, 2017). In addition to policy planning and administrative support, the development of

mental rehabilitation also requires the joint efforts and cooperation of different professional groups, and most importantly the cooperation and participation between the patients and family members. With the care and supports by the surrounding people and community, assisting the patients to recover to be the first priority (Wang & Ouyang, 2020). It can be seen from the above that the roles and functions of nursing staff in mental institutions include: assessment of problems, medication, health education, social skills training, development of care service strategies according to individual needs, daily living management, rehabilitation-oriented to assist patients to adapt to community life, establish a supportive home environment, and implementation of home care, etc.

#### 3. Methods

## 3.1 Research design

This study adopted qualitative research methods. Nurses currently engaged in psychiatric nursing clinical work were selected as participants for this study. Interviews were conducted and results were collected to evaluate the professional training requirements of nurses in psychiatric wards. The study focused on the training content and approaches, understanding the needs of patients, professional reflection, and deep inner feelings. The conceptual architecture diagram of this research is shown in Fig. 1:

3.2 Research participants

This study adopted qualitative methods. The interviewed nurses have worked in a teaching hospital in the southern region of Taiwan for 3 months or above, who were able to complete the questionnaire and communicate in Chinese and Taiwanese, were selected to participate in this study. 3.3 Methodology

In order to protect the rights of the participants, the research team first applied for the review of the human ethics committee. The researcher explained the research purpose to the participants and obtained their consent at the beginning. All participants signed a letter for consent, and they were allowed to terminate upon request at any time. The time required for each research interview was approximately 40 minutes to 1 hour. In order to make the qualitative interview more precise to the research questions, the interview was outlined in advance according to the research purpose and research questions. Then narrative and observation analysis were used to conduct in-depth interviews, and a total of 4 people were interviewed.

3.4 Data collection

Data processing and analysis were conducted after the interview, and the manuscripts were established. All the spoken data of the interview, the emotional reaction at the time and the relevant interview situation were resorted to written expressions, and a complete and detailed text manuscript was established. Transcription of the manuscript: After the interview, the researcher listened to the audio file repeatedly, then transcribed the manuscript and created a digital file and a written file. Next, the researcher studied the content of the manuscript, explored the themes and carried out data coding. Data coding were made up after repetitively reading the manuscript, searching for relevant words according to the research purpose and research questions, exploring the meaning that the participants wanted to express, and coding these important messages for interpretation and analysis.

#### 4. Research Results and Findings

4.1 When facing patients and their families, nurses in psychiatric wards are needed to be confident and professional to perform nursing care work. Providing nurses with professional education, training and clinical guidance which can meet the actual needs to their jobs to ensure the quality of mental health care. It is important to provide training, counselling, and management to fulfil nurses' job needs, so that they are fully familiar with the professional routines, skills and ethics of mental health care, in order to enhance the professional commitment for the health care workers (Lee, Ma, Chiou, & Su, 2012). After interviewing the participants, the researcher observed that:

Follow the work process to implementation, psychiatric care mainly implements drug treatment, care service, and violence prevention. Patients' family members will come during the meeting time, and we need to explain patient's conditions in details. Our job duties include observe the patient's daily condition, perform care services, work shifts, ward visits, and occupational activities (C4).

Nursing staff will perform work routinely, which is already a life-oriented behavior, not only caring for patients, but also caring for their families. They must also keep abreast of special events of psychiatric patients. The work is full of challenges and crises.

I like psychiatry very much. I chose psychiatric care from the beginning and have never regretted going to the psychiatric unit. I have been working for 20 years. I feel that the patients from the psychiatric ward are more lovely than those from the medical and surgical wards. It is easy to take care of the patient once her mental symptoms are stabilized(C3).

When the nursing staff recognizes the occupation, they will get used to the work process and the characteristics of the patient, and find the motivation and value of the work from it, which will make a great contribution to the patient and their families.

Adequate professional education of nursing staffs have a huge impact on patients. It is good that the nursing staffs have found ways of fun in their workplace, using the nursing professions in caring for patients, and continue to work happily and make contribution. Psychiatric nurses need to have frequent interactions with patients and their families, focusing on the establishment of nurse-patient relationships and the cultivation of mutual trust to help the implementation of clinical nursing care service. There are seven variables to explain the 42% variance in professional commitments, including age, family support for mental health care, year of experience on clinical nursing, current year of experience on psychiatry, advanced professional level, monthly salary, and job title (Lee et al., 2012).

4.2 Psychiatric nurses need to have professional knowledge and skills, but also need to master interpersonal communication skills in order to apply them in clinical work. Caregivers being partnership between the psychiatric patients have transformed into a new way of therapy, assisting patients to understand their own conditions and development of essential skills. Through the confident professionals, and strengthening the therapeutic relationship with medical staffs, patients can be trained to build up self-managed skills (Li & Tsai, 2017). After interviews with the interviewees, the study discovered that:

*I will meet the patient and understand the main problems. When family members* come to inquire about the condition and care service of the patient, we would discuss with the family members and let them understand the patient's thoughts to establish a good relationship between the family(C1).

Nursing staff grasp the opportunity to establish a good therapeutic relationship with patients and their families to collect data and evaluate the core problems of the patient, so as to provide individual and complete care.

We are unfamiliar with the patients at the beginning, so we will establish a good relationship with them first. From the time of admission to the hospital, we will first explain the rules and environment of the ward, so that they are less anxious or worried. We will provide care and ask questions, to check out their conditions and whether the

patient can accept to be in a hospital, etc., as well as assist and encourage them to participate in treatments and ward activities, integrating into the group(C2).

The treatment of the disease starts with the establishment of a relationship. When the patient's disease symptoms occur, it is necessary to actively comfort and provide symptomatic care, emphasizing the maintenance of the medical-care relationship, so that the patient and family members can reduce anxiety and anxiety and other negative emotions and behavioral manifestations.

Having a good relationship between nurses and treatments is beneficial to discover the deep inner problems of the patient. Nursing professional skills are the basic skills, and more importantly, it is necessary to establish a trust relationship with the patient's family and maintain a harmonious relationship with the patient. After a trust is built up, it is easier to discover the patient's main problems through interaction and evaluation, then provide suitable treatment and care. Such patients are sensitive and must pay attention when communicating with them, use empathy to further reflect on their needs and provide help. Sustain the training of mental health nursing staff's professional ability, and improve the professional commitment quality. Establishing a positive peer relationship, developing a professional commitment support network, and establishing harmonious interpersonal interaction with peers can not only stimulate the enthusiasm for the mental health care worker, but also enhance a good relationship with peers and open up a professional commitment support network. Therefore, training of mental nursing professional ability can improve the commitment quality (Lee et al., 2012).

4.3 The study of psychiatric nursing is endless, and what we have learned and practise are changing over times. It is really not easy. Years of psychiatric work experience, what is the reflection on experience in this field?

Self-assessment of practical work is necessary for the mental health nurses to engage their performance from the level of proficiency to very proficient. The direct nursing supervisor may consider to provide further training to psychiatric nurses to strengthen their therapeutic communication skills, in order to determine the concerns of the patients and their issues, so that the topic of the conversation can meet the needs of the patients (Chiu, Rong, Shian, Chou & Su, 2008). After interviews with the interviewees, the study observed that:

The common problem of psychiatric patients is that patients do not eat meals or take medicines, which upsets themselves. We often think how to make the patients to be more cooperative. The part that patients cannot cooperate with, we need to discuss with the doctor whether to take long-acting injections to make the patients more stable, then they can be cooperative to take medicine and eating(C1).

The care of psychiatric patients are more complicated than that of medical and surgical patients. Due to the characteristics of the disease, it is difficult for patients to communicate or cooperate. Nursing staff must have diversified professions to cater to the care modes of patients with different characteristics.

We must also acquire professional knowledge of general clinical and surgical skills, such as the communication patterns of young, old, and adult patients are different, therefore we need to keep up by continuing education(C4).

Psychiatric patients have a large age gap, and the type of disease is not a single disease. It is all-encompassing. In order to care for such patients and provide good quality, nurses must continuously improve their professional knowledge to apply them to clinical care. Learning is endless and innovative. Nursing staff must learn across different fields.

Psychiatric nurses caring for patients in psychiatric unit, in addition to general clinical and surgical nursing routine work, they need to focus on psychiatric nursing professional skills,

emphasize on the establishment of therapeutic interpersonal relationship, also need to be familiar with the clinical symptoms of the patient's mental illness, and pay more attention to the violence, aggressive behavior, or emergency. Psychiatric nurses often face a risk to deal with patient violence, so it is more difficult than nurses in other units. Mental health care is a profession based on accumulated experience. The nurses should also have mature personality, professional knowledge and skills, and respect the personal value of patients with sincerity, acceptance and caring. Continuing nursing education is an important issue nowadays. The development and growth of nursing staff's professional competence requires consensus planning and promotion by a professional team. The focus of professional training for mental health nurses is based on competency requirements which includes training courses and practical exercises for mental health nurses at all levels (Huang, Xiao, Rong & Su, 2011). It is necessary to observe the work performance of the nursing staffs in the clinical environment and evaluate their abilities, keep pace up-to-date and continuously improve the nursing professional ability to provide patients and their families with high-quality nursing care.

4.4 Training content and effectiveness of psychiatric nursing professionals are very importants for medical and nursing care system.

The uniqueness of psychiatric nursing need to pay special attention and emphasizes the interactive process with patients by using their interpersonal skills. Psychiatric nurses need to have a sound and mature personality to be able to correctly use their personality traits as a treatment tool, and then perform various roles and functions (Chen, 2015). After interviewing the research participants, we learned that the training content required for nursing staffs are:

The proficiency of the unit's personnel and materials. Understand how to take care of patients and the operating procedures. Resilience in crisis management. Have a basic understanding of psychiatry, empathy and communication skills for patients and their families(C4).

The nursing staff training process is complete. In addition to the basic care level, it also emphasizes the handling of violent attacks and is humane, focusing on assessment and adjustment of personal learning status.

Actual performance and proficiency of observation and execution. Use various assessment forms to assess skills and standard procedures. Use written examination to understand the nursing staff's knowledge of the disease, the care of patients and the theory of medicine (C4).

After training, nurses can independently take care of patients and cooperate with the personnel and affairs of the unit, familiar with the work flow and care service which can be completed within the time limit. Achievement can be divided into quantitative and qualitative, based on individual nursing plan goals.

The training of psychiatric professionals is continuous and dynamic. Psychiatric care includes: therapeutic communication, psychiatric overall assessment, medication, behavior therapy, group therapy, violence treatment and suicide prevention, from novice to expert, require continuous education training and job analysis during the learning process. The focus of clinical professional competence training for mental health nurses: N1 level training focus- (1) Therapeutic environment and psychiatric nursing operations. (2) General patient care. (3) Therapeutic communication meeting. (4) Mental health care assessment. (5) Psychiatric drug treatment and care service. (6) Violence evaluation and handling. (7) Behavioral treatment of hospitalized cases. (8) Growth groups. N2 level training focus- (1) Nursing care for severe psychiatric patients. (2) Empathy. (3) Special care for psychiatric drug treatment. (4) Special handling of violence. (5) Behavioral therapy evaluation. (6) Supportive group therapy. N3 level training focus- (1) Psychiatric overall nursing. (2) Crisis management. (3) Special group

treatment. Emphasize research and development on clinical practise and academic ability. Psychiatric nurses have multiple roles, depending on the patient and the nursing situation. Professionals engaged in psychiatric nursing should have mature personality, professional knowledge and skills, and respect the personal value of patients with sincerity, acceptance and caring (Chen, 2015).

## 5. Research results

5.1 The care performance of psychiatric nurses in this study has a high level of proficiency, showing that the psychiatric nurses can provide excellent nursing service quality in clinical care. They are confident and show nursing professionalism, perform nursing care work, continue to interact and communicate with patients and family members, and emphasize the establishment of therapeutic interpersonal relationships, so that patients and family members can receive warm and caring service to restore health and return to the society.

5.2 Psychiatric nurses need to have professional knowledge and skills, but also need to master interpersonal communication skills in order to apply them in clinical work. In the field of psychiatric work, in addition to general basic care, sensitive observation skills are required to prevent patients from violent attacks and self-injurious behaviors. In response to expected or unexpected special events, psychiatric nurses need to trained for professional ability development and growth, focus on strengthening their roles and functions in the mental institutions.

5.3 It is important that the psychiatric nursing professionals to master their responsibilities in the workplace, which require training of professional abilities for the changing needs of the medical care environment. In order to show the dynamics and future nursing profession, the professional training system needs to be emphasized, through connection and training process, we should focus on the current standards, rather than following the existing system.

5.4 The process of psychiatric nursing professional, as shown in Fig. 2.

## 6. Conclusion

The professional knowledge of psychiatric nursing staffs are sufficient. However, the disease problem of psychiatric patients is not a single problem, but a complex and comprehensive problem. Nursing staff must be familiar with the professional skills of social affairs and take care of patients and their families. Object, in-depth analysis and mastery of the complex structure. Psychiatric nurses take care of patients with mental, behavioral, and emotional problems. In addition to normal nursing routines, they also need to focus on communication with patients' family members and response to problems. The nursing process needs to maintain good communication and establish interpersonal relationships with patients and family members. In addition to medical and surgical care, their jobs are more emphasised on mental health care. Metal illness patients often have violent, aggressive behavior or emergencies, therefore, mental care nursing needs to bear more psychological pressure and must have the ability to deal with emergencies. Their skills are unique. The training of nursing professionals in mental institutions should be planned and developed with a dynamic structure. The content and orientation of the training should be closely related and hierarchical, ranging from new recruits to senior staff and promoted to managers, especially teaching and administrative skills, also the inter-departmental negotiation skills. Nurses should have those professional abilities, including: communication skills, interpersonal relationships, stress coping and problem-solving abilities, etc., to meet the needs of people and current social trends. Nurses need to be trained or educated at each stage or phase, depends on the professional ability and keeps up-to-date in accordance with the trend of the times, the nursing care or medical services we

provide should meet or be even higher than the current needs, in order to become a model of the medical care system.

Furthermore, the reasons for the serious work of psychiatric nurses are reflected. Their serious work is due to high work pressure or workload, and often required working to meet regulatory requirements. Nurses are a disadvantaged ethnic group. Nursing is a professional, but is it autonomous? Mental illness is not just a medical problem, it is also a social problem. Therefore, it is very important for nursing staff to understand the society needs, especially the understanding and cognition of the current society, communication and treatment, and master the patients' condition and their thinking. The evaluation of the performance and ability of psychiatric nursing staff is carried out by the senior nursing staff or supervisor of the unit. Is the content of the evaluation consistent with the knowledge taught by the school or the content of the hospital? Whether the training process and content of the transfer or supporting nurses are the same as the general newcomers? These questions are worth for further discussion.

## 7. Suggestion

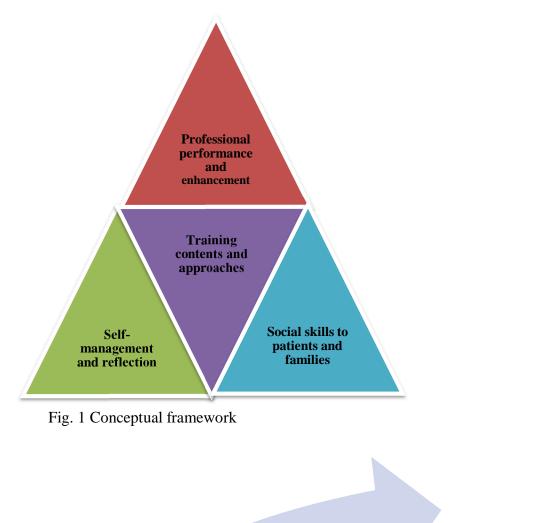
7.1 Regularly assess and meet with the psychiatric nurses can effectively understand their needs, problems or abilities, then the institutes can be able to provide timely positive assistance, intervene in education and training or adjust the learning mode, accompany and support problems, and listen to the true feeling, enhance self-confidence and ability, and become more professional and valuable in nursing, so that they can continue to shine in the workplace.

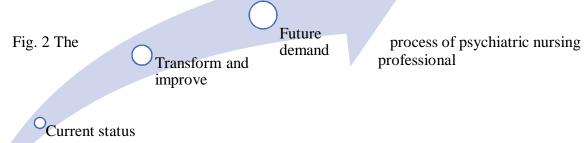
7.2 How to self-identify and integrate into the group is very important. The nursing career is a dynamic development, leading the staff from now to the future, according to the position and level of the nursing professional to conduct job analysis, detailed assessment and appraisal, checking whether their professional abilities and skills are adequate and appropriate. Continuous education, training and professional upgrading to meet the needs of current and future medical care.

7.3 Establish a training process for the transfer or supporting nurses to familiarize themselves with the work environment and patients in the psychiatric unit, so as to be competent in the different work unit and continue the professional development in a stable and supportive workplace environment.

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## References

- Chang, S. E., Rong, J. R., & Chang, T. J. (2015). Using Oral Historical Study to Explore the Changes of Psychiatric Medical Care Model in the Yuli Hospital. The Journal of Psychiatric Mental Health Nursing, 10(2), 5-18. DOI : 10.6847/TJPMHN.201512\_10(2).0001
- Chen, C. J., Tian, J. J., Lin, H. J., Kuo, C. Y., Wu, Y. Y., Chen, Y. A., Lu, W. Y., & Huang, H. M. (2020). The Application of Mindfulness-based Stress Reduction on Patients with Mental Illness. The Kaohsiung Journal of Nursing, 37(1), 37-51. DOI : 10.6692/KJN.202004 37(1).0004
- Chen, H. M. (2015). The role and function of psychiatric nurses. Social Pharmacy and Pharmacy Ethics, 31(2), 148-150.
- Cheng, H. O., Chen, T. Y., & Lee, H. L. (2019). A Cohort Study on Productivity of Work Training for Chronic Psychiatric Patients in a Psychiatric Hospital. Journal of Taiwan Occupational Therapy Research and Practice, 15(3), 131-141. DOI : 10.6534/jtotrp.201912\_15(2).0004
- Cheng, J., Chen, C., Lin, M., & Huang, X. (2018). To explore the efficacy of community rehabilitation for facilitating daily function among patients with mental illness, Perspectives Psychiatric. Care, 54, 580-585. DOI: org/10.1111/ppc.12283
- Chiu, K. L., Rong, J. R., Shiau, S. J., Chou, K. R., & Su, S. F. (2008). The Evaluation of Psychiatric Mental Health Nurses' Clinical Nursing Task Performances. The Journal of Psychiatric Mental Health Nursing, 3(1), 28-37. DOI: 10.6847/TJPMHN.200810\_3(1).0005
- Clibbens, N., Berzins, K., & Baker, J. (2019). Caregivers' experiences of service transitions in adult mental health: An integrative qualitative synthesis, Health and Social Care in the community, 27, 535-548. DOI:org/10.1111/hsc.12796
- Hsu, H. F., Kao, C. C., Ying, J. C., & Pan, L. F. (2020). Effectiveness Analysis of Home Care Services for Patients with Schizophrenia. VGH Nursing, 37(1), 43-54. DOI : 10.6142/VGHN.202003\_37(1).0005
- Huang, H. W., Wei, F. C., Huang, S. S., & Huang, S. Y. (2019). An Improvement Program for Oral Maintenance Ability of the Patients in Psychiatric Daycare Centers. The Journal of Psychiatric Mental Health Nursing, 14(1), 44-53. DOI : 10.6847/TJPMHN.201906\_14(1).05
- Huang, J. Y., Shiau, S. J., Rong, J. R., & Su, S. F. (2011). Establishment of Basic Clinical Competence and Training for Psychiatric Mental Health Nurses. The Journal of Psychiatric Mental Health Nursing, 6(2), 1-7. DOI : 10.6847/TJPMHN.201112\_6(2).0001
- Huang, Y., Lee, H. L., Lin, M. Y., Chuang, W. F., & Haung, C. L. (2018). A Horticultural Training Model for Patients with Chronic Mental Illness. VGH Nursing, 35(1), 51-60. DOI : 10.6142/VGHN.201803\_35(1).0006
- Huang, Y. C., & Wang, Y. H. (2015). A Long Way Home: The Current State of Care Provided by Family Caregivers and Public Health Nurses to Persons with Mental Illness in the Community. The Journal of Nursing, 62(4), 26-33. DOI : 10.6224/JN.62.4.26
- Lee, S. F., Ma, C. C., Chiou, C. P., & Su, S. F. (2012). The professional commitment of Nurses in a public Psychiatric Teaching Hospital. Journal of Nursing and Healthcare Research, 8(2), 83-93. Doi:10.6225/JNHR.08.2.83
- Li, J. B., & Tsai, S. L. (2017). The Development of Psychiatric and Mental Health Nursing in Taiwan: Reflection From the Perspective of Recovery. Journal of Nursing Research, 64 (3), 5-11. DOI: 10.6224/JN.000034

- Lin, S. S., Sheu, S. J., Lee, Y. C., & Chiang, H. H. (2014). The Physical Activity and Life Healing in Psychiatric Patients: Taijiguan as an Example, The Journal of Nursing, 61(4), 46-55. DOI : 10.6224/JN.61.4.46
- Liu, H. T., Chen, S. Y., & Chu, T. F. (2018). Relationship between Symptom Severity and Quality of Life in Psychiatric Patients. Taipei City Medical Journal, 15(1), 54-68. DOI : 10.6200/TCMJ.201803\_15(1).0006
- Liu, W. I., Rong, J. R., & Lee, K. T. (2012). A Systematic Review on Care Needs of Mentally-ill Patients in the Community. The Journal of Psychiatric Mental Health Nursing, 7(2), 1-13. DOI : 10.6847/TJPMHN.201212\_7(2).0002
- Ministry of Health and Welfare (2020), List of Disability Statistics. [Online] Available: https://dep.mohw.gov.tw/DOS/cp-4646-50610-113.html (June 3, 2020)
- Paananen, J., Lindholm, C., Stevanovic, M., & Weiste, E. (2020). Tensions and Paradoxes of Stigma: Discussing Stigma in Mental Health Rehabilitation. International Journal of Environmental Research and Public Health, 17, 5943-5961. DOI:10.3390/ijerph17165943
- Wang, C. P., & Ouyang, W. C. (2020). Recent Developments and Suggestions for the Psychiatric Community Rehabilitation Centers of Taiwan. Formosa Journal of Mental Health, 4, 315-340. DOI : 10.30074/FJMH.202012\_33(4).0001
- Watson, J., Fossey, E., & Harvey, C. (2017). A home but how to connect with others? A qualitative meta-synthesis of experience of people with mental illness living in supported housing, Health and Social Care in the Community, 27, 546-564.