

**THE PERCEPTIONS OF MENTAL HEALTH CARE USERS REGARDING THE
FACTORS LEADING TO THEIR RE-ADMISSIONS AT LETABA HOSPITAL IN
LIMPOPO PROVINCE**

by

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ABSTRACT

Mental health units are having an increased number of patients who are more than the available number of beds due to readmissions. Most of the time psychiatric illnesses are recurrent conditions which lead to frequent hospitalizations. If a patient is diagnosed as having a psychiatric illness in a prior admission is admitted to the ward again, irrespective of the reason for that admission the second and the subsequent admissions are considered readmissions.

Purpose

The purpose of this study was to explore and describe the perceptions of mental health care users regarding the factors that led to readmissions in Letaba hospital.

Design/methodology/approach

The research design of this study was qualitative, exploratory, descriptive and contextual. Data collection was done using in-depth individual interviews.

Sampling

The sample consisted of mental health care users (MHCUs) who were readmitted within 6 months after discharge from the same hospital, and were stabilized according to the reports of the multidisciplinary team.

Findings

The findings of this study indicated that most of the MHCUs were readmitted due to failure to follow instructions given on discharge. The MHCUs highlighted factors such as non compliance to medication, refusing to come for checkups, poor insight and undermining the care givers. Other factors that contributed to the rate of readmissions

included behavioural factors such as destroying property and abusing substances.

Research limitations/implications

Selecting a sample of MHCUs for data collection was a challenge because as soon as they were stabilized MHCUs were in a hurry to go home immediately.

Originality/value

The results of this study gave more insight about the perceptions of MHCUs themselves regarding the factors leading to their readmissions as compared to the information given by family members.

The knowledge gained highlighted the need for individualized discharge summaries as down referrals to clinics and district hospitals. Community health workers should be empowered with mental health knowledge to make follow ups and supervise MHCUs in the community.

Key words: Relapse, Discharge, Compliance, Psychiatric patients, Primary health care, Deinstitutionalization