

編號：F 499 系所：護理學系乙組

科目：精神衛生護理學

本試題是否可以使用計算機：可使用，不可使用（請命題老師勾選）

一、 2001 年世界健康日之主題為「停止排斥、勇於關懷」(Stop Exclusion-Dare to Care)，呼籲世界各國重視精神疾病問題，提供較佳精神醫療照顧，減少對病患的歧視和烙印，請您回答下列問題：

- (1) 如何將此概念落實在社區精神復健之推動，列舉可能落實的方案與作法（10%）。
- (2) 目前國內以「回歸社區」理念，推動以醫院為基礎的社區精神照顧模式有哪些？請分別評論其執行過程之優點和缺點？（8%）。
- (3) 請提出理想的社區精神照顧模式，包括模式內容、應用策略及支持理由（7%）

二、 系統理論是家庭評估的重要理論基礎，在家庭系統理論中強調結構、功能、界域等重要概念，請您回答下列問題：

- (1) 名詞解釋：Family system、family boundary 的概念（6%）
- (2) 請舉出 5 項影響家庭系統運作的因素，並以實例說明此一概念在臨床的觀察現象（10%）
- (3) 如何檢視一個精神病患的家庭互動過程，請列舉您所讀過的相關主題之論述或研究內容？（9%）

**(背面仍有題目,請繼續作答)**

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三、請閱讀本文，並針對下列題目回答。

**Best of Times and Worst of Times: The Future of Psychiatric Nursing.**

Perhaps it is, as the saying goes, the best of times and the worst of times to be a psychiatric nurse. In a world of terrorism, we face an almost universal increase in general anxiety over basic issues of safety and the shape of the future our children will inherit. In a country mired in war, we face societal factions, differing opinions, and strong emotions. Economic challenges, exponential petroleum prices, and real estate bubbles all promote nervousness, angst, and general depressive views of the future. Our country struggles to address ravages of substance abuse, domestic violence, and growing suicide and homicide rates. It would seem a time when issues of mental health would take to the forefront as never before. It would seem a time when professionals, such as psychiatric nurses, who specialize in mental health would be highly visible and sought after. Beyond mental health, it is a time when we know more than ever before about the risk factors and etiological pathways for the development of psychiatric disorders. Neuroscience and genetic research have opened doors to potentially life-changing treatments. It would seem a good time to be a psychiatric nurse.

Yet it is also a time of the lowest enrollments in graduate programs developing advanced practice psychiatric nurses. It is a time when undergraduate nursing curricula are integrating basic psychiatric nursing content, often diluting it into almost unrecognizable permutations. In many places, nursing students may graduate without ever having experienced caring for a patient with a psychiatric disorder or planning mental health care for a community population. It is a time when psychiatric patients are more and more presenting to primary care settings for their ongoing psychiatric treatments. It is a time of shortened hospital stays, closed psychiatric units, and almost nonexistent child psychiatric services. It is a time when we are seeing limited to no reimbursement for preventative mental health care.

Without a doubt, it is a challenging time, perhaps like never before, to be a psychiatric nurse. But it is also one of the most potentially opportune times as well. We have the knowledge, skill set, and commitment to contribute in even larger and more critical ways of improving the health of our society. And the stakes are high. We face professional extinction if we fail to rise to the challenges. Our future as a profession, our strength to improve health, and, indeed, our growth and very existence are linked inexorably to our professional organizations. We are small in number as a specialty group and must be able—must be willing—to consolidate our power by speaking with one voice—by advocating and being visible within an organized rubric. We all need to be members and active partners in support of professional psychiatric

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nursing organizations. 本文部分擷取自 Susan McCabe 刊載在 *Archives of Psychiatric Nursing* (2006) vol. 20, issue 1.

1. 每段請以一百字左右翻譯此文(15%)
2. 說明本文論述的重點(15%)
3. 試以闡述個人意見 The Future of Psychiatric Nursing 與 advanced practice psychiatric nurses (20%)