importance of multidisciplinary collaboration, including forensic psychiatry, psychology, occupational therapy, speech and language therapy, social care, and legal professionals, will be highlighted as essential to safe and sustainable discharge planning.
The presentation will also address medico-legal considerations, including proportionality of restriction, the balance between public protection and therapeutic optimism, human rights frameworks, and the ethical imperative to avoid diagnostic overshadowing. Through illustrative case material, practical challenges such as treatment resistance, risk misinterpretation, and pathway bottlenecks will be examined, alongside strategies to enhance engagement and reduce long-term dependency on secure care.
The session aims to equip clinicians and service planners with a nuanced understanding of how forensic rehabilitation must be adapted for patients with learning disabilities and neurodevelopmental disorders, ultimately improving recovery trajectories, reducing reoffending risk, and supporting dignified reintegration into the community.

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WS006

An empathic approach to recovery

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Abstract: Psychiatric hospitals, and forensic mental health settings face unique challenges in delivering empathic care. Society has wrestled with how to deal with offences perpetrated by the mentally unwell for centuries, and forensic psychiatry has ambiguous guiding principles. At times, the practitioner's duty is to justice rather than the patient, and detached concern is required to balance competing ethical demands. Challenges are posed by working with patients for whom a lack of empathy can be an integral part of their mental disorder. Forensic mental health settings represent the last long stay environments in England. Lack of scrutiny, high levels of restrictive practice, and frequent violence and aggression, can lead to burnout and failures in compassionate care. Empathic engagement in central to the therapeutic endeavour in forensic settings, to achieve understanding and to enable positive change. This should be supported by reflective spaces, restorative practice, effective outcome measures, system-based approaches to learning and value-driven leadership.

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WS007

Rebuilding lives after trauma: positive psychotherapy in the rehabilitation of PTSD patients

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Abstract: Psychiatric rehabilitation after trauma requires more than symptom reduction; it involves restoring functional capacity, autonomy, and social participation. Refugees and forcibly displaced individuals face a high burden of PTSD and complex stressors related to loss, disrupted identity, and integration challenges, which can hinder long-term recovery. In this talk, I will present clinical reflections from psychotherapeutic work with Ukrainian and Belarusian displaced patients conducted in a private outpatient setting in Poland. I will outline how Positive Psychotherapy can be applied as an evidence-informed, culturally adaptable, strengths-based approach to rehabilitation in PTSD, focusing on resource activation, meaning-making, reconstruction of identity, and rebuilding interpersonal functioning. Particular attention will be given to the therapeutic use of narratives: how patients' personal stories, as well as carefully framed stories of other refugees, can enhance engagement, reduce shame and helplessness, and support post-traumatic growth —while maintaining boundaries and avoiding re-traumatisation. Practical tools will be shared that can be integrated into multidisciplinary rehabilitation pathways, complementing psychoeducation, peer support, and recovery-oriented care.

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WS008

The role of dual diagnosis and real-life examples

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Abstract: Psychiatric rehabilitation remains a cornerstone of comprehensive mental healthcare, yet it continues to be relatively under-emphasised within mainstream service planning and clinical training. While prevention, crisis management, and acute symptom stabilisation are central to psychiatric practice, the longer-term processes that sustain recovery, reduce relapse, and promote meaningful reintegration into society often receive comparatively less attention. Without structured rehabilitation pathways, individuals with severe and enduring mental illness remain at high risk of repeated hospital admissions, social exclusion, unemployment, and functional decline.
This interactive workshop seeks to reposition psychiatric rehabilitation as a critical component of relapse prevention and long-term recovery. It will provide participants with a structured, evidence-based overview of rehabilitation models that aim not only to reduce symptom burden but also to restore autonomy, enhance functional capacity, and support personal recovery goals. Drawing on contemporary research and international service examples, we will examine how comprehensive rehabilitation programmes can improve clinical outcomes, reduce readmission rates, and enhance quality of life.
Through real-life case studies and clinical vignettes, participants will explore the practical application of key interventions, including cognitive behavioural therapy (CBT), life skills training, social skills development, vocational rehabilitation, and supported employment models such as Individual Placement and Support (IPS). We will examine how these interventions contribute to improved community tenure, greater occupational engagement, and strengthened self-efficacy. The session will emphasise the importance of multidisciplinary collaboration between psychiatrists, psychologists, occupational therapists, nurses, social workers, peer support workers, and community agencies. Particular focus will be