



Correction

Correction: Di Lorenzo et al. Staff Attitude Towards Coercive Measures in Hospital and Community Psychiatric Settings. *J. Clin. Med.* 2025, 14, 2886

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Text Correction

There were three errors in the original publication [1].

- (1) A correction has been made to the Abstract, regarding the definition of SACS score increase and decrease, which were reversed (**the correction is in bold**).

Abstract

Background/Objectives: The use of coercive measures in psychiatry is an ethically controversial issue. Staff attitude towards coercive measures could explain the different application frequencies of coercive measures across psychiatric services. **Methods:** We analyzed the attitude towards coercion held by professionals working in a psychiatric department using the Staff Attitude to Coercion Scale (SACS). We statistically evaluated the correlation between the SACS score and the demographic and work characteristics of professionals. **Results:** The most represented category of participants was nurses (73.03%). Most professionals worked in a Mental Health Community Service (MHCS) (72.09%). We reported a score of 41.9 ± 8.8 SD in total SACS and high scores in two SACS factors: “Coercion as offending” and “Coercion as care and security”. Professionals working in Service for Psychiatric Diagnosis and Care (SPDC) showed **increased** scores in total SACS and **reduced** the SACS dimension “Coercion as offending” score. Place of work, particularly “working in SPDC”, was statistically significantly associated with total SACS in a positive way and with the “Coercion as offending” score in a negative way in our regression multivariate test. **Conclusions:** Our professionals showed a predominantly critical and pragmatic attitude towards coercive measures. The professionals who are more frequently exposed to violent and aggressive behavior, such as those who work in SPDC, showed a reduced critical attitude towards coercion in comparison with those working in MHCS, suggesting that exposure to violence can shape the response of professionals.

- (2) In the original publication [1], the means and standard deviation of the SACS score were incorrectly reported in Table 2, as published. The corrected Table 2 is reported below (**corrections are in bold**).



Received: 1 August 2025

Accepted: 22 September 2025

Published: 21 October 2025

Citation: Di Lorenzo, R.; Mucchi, F.; Magnani, N.; Starace, F.; Bonisoli, J.; Bottone, C.; Ragazzini, I.; Ferri, P.; Marrama, D. Correction: Di Lorenzo et al. Staff Attitude Towards Coercive Measures in Hospital and Community Psychiatric Settings. *J. Clin. Med.* 2025, 14, 2886. *J. Clin. Med.* 2025, 14, 7418. <https://doi.org/10.3390/jcm14207418>

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Table 2. SACS total and factor scores correlated with demographic and work variables.

Variables	SACS Total Score (m ± SD)	Coercion as Offending (m ± SD)	Coercion as Care and Security (m ± SD)	Coercion as Treatment (m ± SD)
		Profession		
Nurse	42.2 ± 8.3	19 ± 3.6	19.4 ± 4.7	5.9 ± 2.2
Psychiatric Rehabilitation Technician	38.1 ± 7.2	20 ± 4.3	17.5 ± 3.3	4.5 ± 0.9
Nurse Assistant	38 ± 1.4	20.5 ± 2.1	17.5 ± 0.7	5 ± 1.4
Educator	36	23	20	3
Psychiatrist	46 ± 13.2	18.6 ± 4.4	20.8 ± 7.9	7.7 ± 2.7
Psychologist	39.5 ± 17.7	17.5 ± 6.4	16.5 ± 9.2	7.5 ± 6.4
Total	41.9 ± 8.8	19.1 ± 3.7	19.2 ± 4.8	5.9 ± 2.3
Statistical test Probability	chi2 = 5.78 p = 0.3279 Kruskal–Wallis test	chi2 = 2.73 p = 0.7422 Kruskal–Wallis test	chi2 = 3.79 p = 0.5798 Kruskal–Wallis test	chi2 = 9.1 p = 0.1044 Kruskal–Wallis test
		Age (</≥ median)		
<51 years	43.02 ± 7.9	18.6 ± 3.6	19.8 ± 4.6	6.0 ± 2.0
≥51 years	41.4 ± 9.3	19.5 ± 3.8	19.1 ± 5.1	5.9 ± 2.5
Statistical test Probability	chi2 = 29.9 p = 0.5183 Kruskal–Wallis test	chi2 = 33.4 p = 0.3508 Kruskal–Wallis test	chi2 = 32.0 p = 0.4142 Kruskal–Wallis test	chi2 = 25.9 p = 0.7224 Kruskal–Wallis test
		Sex		
Male	42.3 ± 8.4	19.2 ± 3.6	19.4 ± 5.0	6.1 ± 2.3
Female	41.7 ± 9.0	19.1 ± 3.8	19.1 ± 4.8	5.8 ± 2.3
Statistical test Probability	chi2 = 0.006 p = 0.9366 Kruskal–Wallis test	chi2 = 0.06 p = 0.8115 Kruskal–Wallis test	chi2 = 0.018 p = 0.8946 Kruskal–Wallis test	chi2 = 0.2 p = 0.6176 Kruskal–Wallis test
		Place of work		
MHCS	40.3 ± 7.9	19.9 ± 3.4	18.6 ± 4.5	5.6 ± 2.1
SPDC	46.2 ± 9.5	16.9 ± 3.7	20.8 ± 5.5	6.6 ± 2.6
Statistical test Probability	chi2 = 6.9 p = 0.0083 Kruskal–Wallis test	chi2 = 9.9 p = 0.0017 Kruskal–Wallis test	chi2 = 3.2 p = 0.0722 Kruskal–Wallis test	chi2 = 2.4 p = 0.1237 Kruskal–Wallis test
		Years of employment (</≥ median)		
<25 years	42.2 ± 9.6	18.9 ± 3.9	19.3 ± 5.4	5.9 ± 2.3
≥25 years	41.6 ± 8.1	19.4 ± 3.6	19.2 ± 4.4	5.8 ± 2.3
Statistical test Probability	chi2 = 35.3 p = 0.4547 Kruskal–Wallis test	chi2 = 27.1 p = 0.8281 Kruskal–Wallis test	chi2 = 38.0 p = 0.3341 Kruskal–Wallis test	chi2 = 37.6 p = 0.3495 Kruskal–Wallis test
		Years of employment in the same service (</≥ median)		
<10 years	42.6 ± 10.4	19.3 ± 4.0	19 ± 4.4	6.4 ± 2.6
≥10 years	42.1 ± 7.7	18.8 ± 3.8	19.7 ± 5.5	5.8 ± 2.1
Statistical test Probability	chi2 = 31.1 p = 0.6584 Kruskal–Wallis test	chi2 = 31.9 p = 0.3393 Kruskal–Wallis test	chi2 = 35.8 p = 0.4295 Kruskal–Wallis test	chi2 = 35.5 p = 0.4443 Kruskal–Wallis test

(3) In the original publication [1], there was a mistake in Figure 1 as published. The corrected Figure 1 appears below.

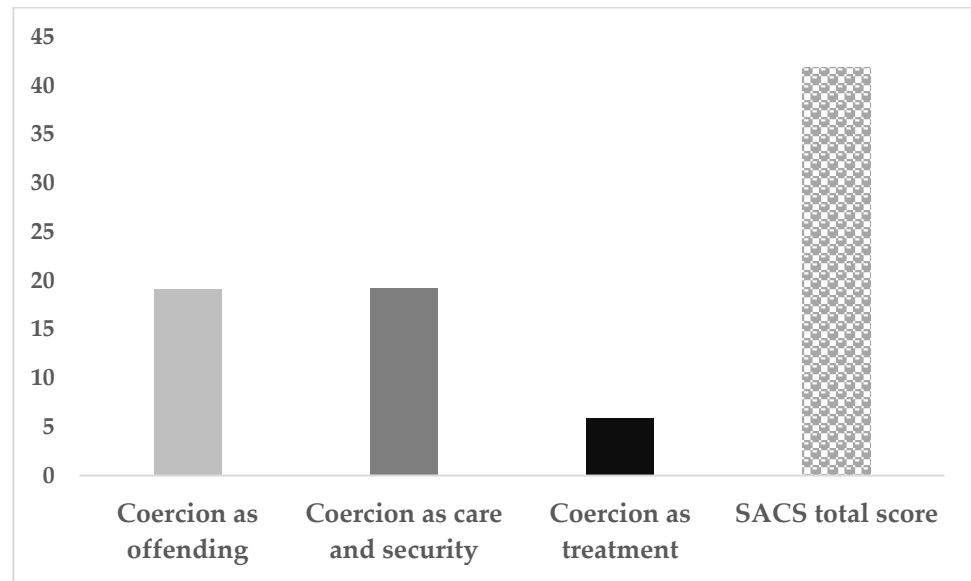


Figure 1. Total and 3-factor SACS scores.

The authors state that the scientific conclusions are unaffected. This correction was approved by the Academic Editor. The original publication has also been updated.

Reference

1. Di Lorenzo, R.; Mucchi, F.; Magnani, N.; Starace, F.; Bonisoli, J.; Bottone, C.; Ragazzini, I.; Ferri, P.; Marrama, D. Staff Attitude Towards Coercive Measures in Hospital and Community Psychiatric Settings. *J. Clin. Med.* **2025**, *14*, 2886. [[CrossRef](#)] [[PubMed](#)]

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