新界西・醫院聯網
New Territories West Cluster

Hospital and community collaboration on Prevention of Depression among people with chronic illness through positive psychology intervention

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Background

- The prevalence of depression among people with chronic illness is high. The burden of disease to the health care system is also increasing. It will be more cost effective if prevention measures can be taken.

- Since 2010, Department of Family Medicine, Pok Oi Hospital has been collaborating on this with Wai Hung Charitable Foundation Well Elderly Clinic and The Hong Kong Society for Rehabilitation Community Rehabilitation Network Tai Hing Centre on the IMPACT Model.

Objectives

- To educate the patients with borderline depression with knowledge on mental health

- To improve their psychological wellbeing, satisfaction with life and Quality of life

- To increase the sense of self-efficacy in coping with chronic illness

- To prevent the co-morbidity of mental health issues and medical conditions

Selection criteria

- Patients aged over 60

- Attending Department of Family Medicine of POH

- Screened as borderline cases by PHQ 9 (score 6-9)

Methodology

- Suitable participants are referred to Wai Hung Charitable Foundation Well Elderly Clinic which collaborated with Community Rehabilitation Network Tai Hing Centre in providing a six-session group for the patients based on the intervention of positive psychology, self management and problem-solving approach.

- Group content included education on mental health, exercise, problem-solving treatment, healthy living and community resources.

- A set of questionnaires including PHQ 9, Self Happiness Scale, Satisfaction with Life Scale, SF 12, General Self Efficacy Scale and Knowledge questions related to mental illness were filled in by the patients in the 1st (T1), 6th(T2) and 10th (T3) week after they joined the programme.

Practicing exercises

Introducing community recourses

Preliminary Results

- Preliminary data of the first two groups of participants (N=18) who have more than 80% attendance revealed that there is a trend of positive change in PHQ 9, SF 12-PCS and MCS, Self Happiness Scale, General Self Efficacy Scale , Satisfaction with Life Scale, as well as Knowledge on 'Depression Prevention and Problem Solving Treatment' in T1 to T3. Among these, participants have also significant changes in Satisfaction with Life Scale, and Knowledge on 'Depression Prevention and Problem Solving Treatment' (p<0.5)

- Participants also have statistically significant changes from T1 to T2 in the Satisfaction with Life Scale ,SF 12-PCS, General Self Efficacy Scale, and Knowledge on 'Depression Prevention and Problem Solving Treatment'(p<0.5).

Fig 1: Highlights of core outcome measures from T1 to T2

	T1 (Week 1)	T2 (Week 6)	p-value
PHQ 9	9.13	7.67	.250
Satisfaction with Life Scale	3.19	3.76	.002*
General Self Efficacy Scale	2.33	2.63	.035*
SF 12-Physical Component Scale	35.87	41.11	.001*
SF 12-Mental Component Scale	40.71	42.32	.586

Remarks: *Significant change from T1 To T2 (P<.05)

Conclusion

- Despite the small sample size in the pilot stage, the initiative suggests that close hospital and community collaboration on mental health programme is effective and serves as positive resources in preventing depression among the patients especially those borderline cases.

- It is also important to minimize co-morbidity of mental health among people with chronic illness to reduce disease burden.

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