



Service Priorities and Programmes
Electronic Presentations

Convention ID: 374

Submitting author: Mr KING YIN WAN

Post title: Occupational Therapist II, Kwai Chung Hospital, KWC

A Pilot Holistic Occupational Therapy Program – Incorporating Spirituality elements to formulate Mental Health Recovery

Wan KY(1), Sung HF(1), Ip YC(1), Yeung SF(1)

(1)Occupational Therapy Department, Kwai Chung Hospital

Keywords:

Spirituality

Recovery

Religion

Mental Health

Occupational Therapy

Psychiatry

Introduction

Recovery is a central theme for health and social care. The holistic recovery of the person includes the psychological, physical and spiritual being (Jennifer Flynn, 2007). Respecting one's spirituality is central to the recovery approach. It is about the recovery of hope, without which it may not be possible to recover (Royal College of Psychiatrist, social care institute for excellence, 2007). Aspects of religious and spiritual involvement are associated with desirable mental health outcomes (Mickley et al. 1995). Spirituality is an important aspect of mental health (Indian J. Psychiatry, 2008) and religion plays a central role in the processes of reconstructing the sense of self & recovery, especially in schizophrenia (Spirituality Strategy, Sussex, Partnership, NHS, 2008).

Objectives

To provide opportunity for adult psychiatric patients to express and fulfill their spiritual needs. To learn how to achieve better relationship, basic fraternity life, gratitude and forgiveness through mutual support group, role-play, sharing of life experience, prayer and assignments. To induce hope to overcome the difficulties resulting from their illness and get along to their recovery road.

Methodology

A five-session spirituality group designed with the theme Hope, Love, Gratitude, Forgiving and Inter-relationship. The group was run one hour and thirty minutes per session and once per week. Eight in, day and out patients were recruited and two Occupational Therapists and a pastoral care worker involved. The group was based on the religion of Christ (i.e., Catholic and Christian). It included various activities like praying, sharing of bible scripts, life and death video discussion, bible story reading, role playing, life events sharing and Taize praying.

Result

Brief Psychiatric Rating Scale (Overall, J. E., & Gorham, D. R., 1972) and HOPES Spiritual Assessment (NHS, 2008) were administered to screen for the mental state and religion background for those referred participants. Pre and Post assessment of WHO-5 Well Being Index (WHO, 2005), the Chinese Short Warwick-Edinburgh Mental Well-being Scale (Ng Serena, 2013) and evaluation form were administered to determine if there would be any changes of subjective mental wellbeing after the group. Six out of eight participants completed the program. Favorable feedback from participants and obvious improvement in positive attitude and work motivation were noted. A mean of satisfactory level 8.5 out of 10 from participants was collected as well. The Program should be further implemented for more participants to confirm the positive outcomes.