HAC 2016 ABSTRACT for Oral Presentations

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Project title

Preliminary result of a multi-centre randomized control trial on Abridged Illness Management and Recovery program (AIMR) for patient with schizophrenia.

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Introduction

The evidence-based Illness Management and Recovery (IMR) program of the Substance Abuse and Mental Health Services Administration (SAMHSA) has been widely used in the world to promote the recovery of patients with mental illness. However, the program is in English and is too lengthy. Thus a task group under OTCOC has developed an abridged and Chinese version (AIMR) program for use in HK. A multi-center randomized control trial was conducted to investigate the effectiveness of the AIMR program.

Objectives

To investigate the effectiveness of the AIMR for individuals with schizophrenia spectrum disorders in HK.

Methodology

A sample of 88 individuals with schizophrenia or schizoaffective disorder was recruited from psychiatric day hospitals of 7 clusters of the Hospital Authority and randomized into either the experimental or the control group. In the control group, 41 subjects went through traditional occupational therapy programs. In the experimental group, 47 subjects went through an-additional 10-sessions program of AIMR which aims at building abilities in self-management, personal goal setting, social support, appropriate use of medication, relapse prevention, and coping with persistent symptoms. Each individual was measured at baseline and completion of the AIMR program. Measures include the expanded version of the Brief Psychiatric Rating Scale (BPRS-E), the client version of the Illness Management and Recovery Scale (IMRS), the Snyder Hope Scale, the Social and Occupational and Occupational Functioning Assessment Scale (SOFAS), the WHO Quality of Life Scale (WHOQOL-BREF), and the Chinese Version of the Short Warwick-Edinburgh Mental Well-Being Scale (C-SWEMWBS).

Result

Both experimental and control groups have comparable socio-demographic, and baseline clinical and functional characteristics. Repeated measure ANOVA shows that the experimental group has significantly higher clinical and functional outcomes including IMRS (p < 0.005), SOFAS (p = 0.005), Hope Scale (p < 0.05), QOL question one (p < 0.05), and QOL psychological (p = 0.005). The preliminary results support the effectiveness of the AIMR program which would be important in the recovery oriented practices in psychiatry.