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Development of Treatment Program to Enhance the Effectiveness of Assertiveness Training in Psychiatric In-patient Occupational Therapy (OT) Service

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Introduction

Assertiveness training is one of the important domains in social skills training for psychiatric patients. It aims at increasing self-understanding, building confidence and improving social interaction abilities (Hou et al 2004). It is delivered based on cognitive behavioral and psychoeducational approach. The aims of the program are to 1) facilitate patients to increase the awareness of own communication styles and 2) develop assertive communication skills in daily living. A treatment package is developed to improve the efficiency of service delivery in informal psychiatric ward setting in Shatin Hospital (SH). It includes a triage system, weekly group or self-learning video, homework and interactive computerized software.

Objectives

- (1) Enhance social skills of psychiatric in-patient in terms of reducing social anxiety, improving self-understanding and assertiveness
- (2) Increase effectiveness of service delivery

Methodology

Psychiatric in-patients in SH aged 18-60 with assertiveness problem were recruited in the program. Consecutive sampling was applied. Patients with inadequate assertiveness skills were referred for the program and were screened by mini mental state examination (MMSE). The program consisted of 3 components including 1) group, self-learn or mixed (group & self-learn) treatment, 2) interactive assertive game and 3) homework. Patients were assigned to either group, self-learn or mixed treatment based on patients' mental state, discharge plan and personal preferences.

Pre and post outcome measures included Rathus Assertiveness Scale(RAS), Liebowitz Social Anxiety Scale(LSAS) and Rosenberg Self Esteem Scale (RSES) were adopted.

Result

A total of 78 patients (61.5% female, mean age: 34.8) had completed the program during Apr 2015- Dec 2016. Among the subjects, 38 patients (48.8%) were diagnosed schizophrenia, 37 (47.5%) were mood disorder, 3 (3.7%) were others. 56 (41.8%) patients dropped out due to short average length of hospital stay. In group program (N=38), there were 43.1%, 10.8% and 2.8% of improvement in RAS, LSAS and RSES respectively ($p < 0.05$, paired t-test). The data of self-learn and mixed programs (N= 40) were analyzed together due to small sample size. There were 37.4%, 11.8% and 4% of improvement in RAS, LSAS and RSES respectively ($p < 0.05$, paired t-test).