| **Title** | Evidence-based psychosocial service for people with chronic illness & their families: outcomes on mental health & wellness |
| **Author(s)** | Kwok, AYY; Chau, PWP; Leung, PPy; Wong, DFK |
| **Citation** | The HKEC Symposium on Community Engagement 5: Family - The Key to a Healthy Community, Hong Kong, 15 May 2010. |
| **Issued Date** | 2010 |
| **URL** | http://hdl.handle.net/10722/124268 |
| **Rights** | This work is licensed under a Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. |
Presentation Topic:
Evidence-based Psychosocial Service for People with Chronic Illness & their Families: Outcomes on Mental Health & Wellness
Contents

1. CRN Psychosocial Service
2. Outcomes
3. Recommendations
Co–Authors

Ms. Anna KWOK
Centre Manager, Kornhill Centre, Community Rehabilitation Network,
The Hong Kong Society for Rehabilitation

Ms. Phyllis CHAU
Senior Manager, Community Rehabilitation Network,
The Hong Kong Society for Rehabilitation

Dr. Pamela LEUNG
Assistant Professor, Department of Social Work & Social Administration,
The University of Hong Kong

Dr. Daniel WONG
Associate Professor, Department of Social Work & Social Administration,
The University of Hong Kong
Family – The Key to a Healthy Community
Psychosocial Needs of Patients & Caregivers

Emotion Management

Enhancing Interpersonal Relationship & Communication

Life Meaning Reconstruction & Death Preparation
Significance of Psychosocial Intervention

Medical Treatment and Rehabilitation

Psychosocial Intervention
CRN Psychosocial Service: Characteristics

- Theoretical-based
- Groupwork approach & “Taster” Workshop
- Develop with academic institutes or professional organizations
- Group leaders: CRN Registered Social Workers, with in-service training
Theoretical-based

Emotion Management & Positive Living

I: Beck’s Cognitive Therapy
II: Art Therapy

Family & Interpersonal Relationship

Satir Model

Life Meaning Reconstruction & Death Preparation

Life Celebration & Empowerment Approach
CRN Psychosocial Service: Service Flow

- Internal Referral
- External Referral
- Self Approach

Entry Assessment

Emotion Management & Positive Living

Family & Interpersonal Relationship

Life Meaning Reconstruction & Death Preparation

Exit Assessment
Emotion Management & Positive Living - 1

Objectives:
- Identify idiosyncratic negative automatic thought patterns;
- Understand how dysfunctional rules & lifestyles are affecting emotions;
- Develop strategies to deal with negative thoughts & dysfunctional rules.

Contents:
- Scaling, dysfunctional & functional record worksheet, thought-stopping, cue card, alternative thinking, dysfunctional rules worksheet, self-reward exercise, life change game

Session / Duration:
- 8 sessions / 2.5 hours per session
Emotion Management & Positive Living – 1

Objectives:
- Understand the importance of one’s thoughts on emotion management;
- Learn strategies to increase positive emotions.

Contents:
- short lecture, experiential game, group exercise and discussion.

Session / Duration:
- 1 session / 2.5 hours
Emotion Management & Positive Living - 2

**Objectives:**
- To facilitate emotional relief & attain inner peace;
- To improve overall emotional health.

**Contents:**
- Creation of art products (e.g. drawing, clay), self-exploration exercise, sharing and discussion.

**Session / Duration:**
- 10 sessions / 2 hours per session

---

**Objectives:**
- To learn more about themselves, how to appreciate own lives & the nature; in which gaining more joy, hope & direction.

**Contents:**
- Creation of art products, experiential game.

**Session / Duration:**
- 1 session / 2.5 hours
Family & Interpersonal Relationship

Objectives:
- Strengthen participants’ personal capacity like self-esteem, mental health & community skills;
- Improve interpersonal relationship, establish support network.

Contents:
- Iceberg: understanding “inner needs” behind one’s behavior, Coping stances: four usual communication patterns, Mandala: internal resources, Temperature reading.

Session / Duration:
- 6 sessions / 2.5 hours
Life Meaning Reconstruction & Death Preparation

**Objectives:**
- Increase awareness of own death avoidance;
- Being more open to death preparation.

**Contents:**
- Experiential games, group discussion

**Session / Duration:**
- 1 session / 2 hours

**Objectives:**
- Reduce fear of death & death avoidance;
- Increase motivation & develop positive attitude towards death, make more concrete preparation for it;
- To be more appreciative of life.

**Contents:**
- Didactic education, experiential activities, reflective exercise, life review activities.

**Session / Duration:**
- 5 sessions / 2 hours
Outcomes (1) 「心情新角度」情緒管理課程

Methodology

- In 2004-2005
- Comparison group, pre-and-post test approach
- Pre-group, Post-group, 3-month-follow-up assessment
- Structured questionnaires:
  - General Health Questionnaire-12
  - Automatic Thought Questionnaire
  - Coping Skills Questionnaire
  - Positive and Negative Emotions Checklist
  - Demographic characteristics
Outcomes (1) 「心情新角度」情緒管理課程

Results

- n=78 (experimental group=40; control group=38)
- Mean age: 50.2 / Male: 19, Female: 59
- 64.1% had not completed secondary education
- One-fourth: full-time or part-time employment
- Members of experimental group:
  - Significant improvement in mental health;
  - Fewer negative thoughts, more positive emotions & fewer negative emotions;
  - Effects maintained at 3-month follow-up assessment;
  - No statistical difference on coping skills between experimental & control groups.
Outcomes (2) 「真心愛生命」探索小組

Methodology

- In 2009
- Quasi-experimental design (pre-and-post test)
- Pre-group & Post-group assessment
- Structured questionnaires:
  - The Chinese Death Attitude Profile – revised
  - Body-mind-spirit Well-being Inventory – Spiritual Well-being Sub-scale
  - Death Competence Scale
  - Gratitude Questionnaire – Six-Item Form
  - The Centre for Epidemiological Studies Depression
Outcomes (2) 「真心愛生命」探索小組

Results

- n=169 (experimental group=86; control group=83)
- Mean age: 56.78 / Male: 56, Female: 113
- Members of experimental group:
  - Significant changes in fear of death, death avoidance, death preparation, life appreciation.
- Other findings:
  - Death preparation is correlated with the results;
  - Provide chances to reveal concerns on death preparation in ‘natural & relaxed’ atmosphere;
  - Participants are ready to talk about death;
  - Initial focus: practical arrangement ➔ reviewing life experience (Valuable Journey)
Outcomes (3) 人际關係自學課程

Methodology

- In 2009
- Randomized control trial (Single-blind) + focus group
- Pre-group (baseline) & Post-group (6th week), one-month (10th week) follow-up assessment
- Structured questionnaires:
  - Chinese Affect Scale
  - Rosenberg Self-Esteem Scale
  - Chinese Courtauld Emotional Control Scale
  - Yale Social Support Scale
  - SF-12 Health Survey
  - Chinese Hospital Anxiety & Depression Scale
  - Body-mind-spirit Well-being Inventory – Spiritual Well-being Sub-Scale
  - CRN Self-Other Communication Scale
Outcomes (3) 人際關係自學課程

Results

n=74 (experimental group=31; control group=43)
Mean age: 54.13 / Male: 9, Female: 74
Members of experimental group:
- Significant improvement in self-other relation, communication congruence, wishing to know more friends, self-esteem, resilience, and mental health.

Limitations:
- Relatively small sample size
- Dual role of group leaders & researchers
- Only a few studies on Satir Model are available for reference
Presentation, Training & Journal Publication

- World Congress of Behavioral & Cognitive Therapies (2005)
- International Conference on Promoting Chronic Care: Towards a Community-based Chronic Care Model for Asia (2010)
- 2010 Joint World Conference on Social Work & Social Development (2010)
- 2010 Satir World Conference (2010)
- Guest lectures for local universities’ study programs
- CNE training program of Association of Hong Kong Nursing Staff
**Recommendations on Future Development**

- **Targets:**
  
  Chronic patients & caregivers with emotional disturbances or at risk of depression (assessment such as PHQ-9)

- Early intervention, Preventive nature

- Professional-and-Peer-led

- Further enhance effectiveness of referral system