

Service Priorities and Programmes

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Social Functioning of Elderly with Cognitive Deterioration Using Remotivation Therapy

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Introduction

Remotivation Therapy was founded in 1949. It promotes the use of safe and comfortable environment for clients to feel the climate of acceptance and promotes communication in a non-judgmental way. Upon the establishment of local certification training and completion of several field trials (Ng, et al., 2009, 2010), standardizations of the training protocol and inclusion of more validated outcome measures were piloted.

Objectives

Evaluation of the sensitivity of five selected standardized outcome measurements, i.e. Social and Occupational Functioning Scale (SOFAS), 12-Item Short Form Survey (SF-12), Assessment of Communication and Interaction Skills (ACIS), WHO-Five Well-being Index (WHO-5), Remotivation Therapy Outcome (RTO), to detect changes in functional domains of elderly was piloted. The study aims to select the most appropriate evaluative outcome measures that are sensitive to detect changes and promote documentation of treatment progress.

Methodology

Cohort comparison of 28 elderly with social and cognitive deteriorations in in-patient and community settings was conducted. Participants were divided among four groups to receive 12 sessions of Remotivation Therapy and comparison using the above selected outcome measures.

<u>Result</u>

The participants consisted of 16 female and 12 male with 15 in-patients and 13 community clients with functional deficits in social and cognitive aspects due to dementia, chronic schizophrenia and stroke. Their mean age was 79.25 with SD of 5.14. Pre and post comparison of the five outcome measures demonstrated that only RTO and ACIS were shown to be sensitive enough to detect changes in Participation, Eye-contact, Orientation, Postures, Engages, Express, Share, Sustain and Conform with statistical significant (p < .05). Though the functional areas as measured by SOFAS, WHO-5 and SF-12 were unable to detect significant changes, the overall functioning as measured by SOFAS were found to correlate with speech (r=.733) and orientation (r=.704). The correlation indicated that those participants with better orientation and communication skills showed to have better social and occupational functioning. Happiness of WHO-5 was correlated with Feeling Positive of WHO-5 (r=.592) and Articulation of ACIS (r=.528). Age was correlated with orientation (r=.694), which reflected cognitive deterioration because of the aging process. The project offered suggestions on selection of outcome measures in program evaluation of Remotivation Therapy and minimized redundancy. Communication Domain including Eye Contact, Posture and Information Exchange under ACIS was found to be the most appropriate evaluative measures for Remotivation Therapy.