Canadian
Association of
Occupational
Therapists

Canadian Association of Occupational Therapists
CAOT · ACE

Canadian
Association of
Occupational
Therapists

Canadian
Association of
Occupational
Therapists

ian Association of C
iation canadienne

Canadian Association of Occupational Therapists
Canadian Association of Occupational

EXIT

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT · ACE

Canadian
Association of
Occupational
Therapists

thePersonal

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT - ACE
www.caot
Canadian Association of Occupational Therapists

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT - ACE
www.caot
Canadian Association of Occupational Therapists
#CAOT2023

thePersonal
bms.

DEBRA
BEACH
DUCHARME
External Member
PAULETTE
GUITARD
WFOT Member
(Interim)
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT · ACE
Canadian
Association
Occupation
Therapist

Canadian Association of Occupational Therapists
CAOT - ACE
www.cao

CAOT · ACE

CAOT - ACE
www.caot.ca

Canadian Association of Occupational Therapists
www.caot.ca

www.caot.ca

thePersonal

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT - ACE
Occupational Therapy – Solutions that Work! • www.caot.ca
LAST NAME | PRENOM
M-Z
GUEST WIFI
WIFI NAME : TCU GUEST
WIFI PASSWORD
Welcome2018
LAST NAME | PRENOM
A-L

Salon

LIFT 2 GO
MAKE YOUR LOCATION
WHEELCHAIR ACCESSIBLE
IN MINUTES!
We've Gotcare
Everywhere.

UNIVERSITY OF ALBERTA
FACULTY OF REHABILITATION MEDICINE

BEMIS Independence
4.5" Raised Toilet Seat
with Dual Lock Security
PERSONAL WASH BIDET
thePersonal

MOTION™
Make life accessible.
Mobility Solutions
Home Accessibility
Daily Living
Personal Care
ncares.ca
Make life accessibl
Mobility Solutions
Home Accessibility
Daily Living
Personal Care
motioncares.ca
TRAVEL BUGGY

MARCH OF DIMES CANADA
LA MARCHE DES DIX SOUS DU CANADA

IMS
Bracing • Athletic Therapy • Compression
• Aids for Daily Living • Physiotherapy •
Mobility Aids
ASCENDER
BREG
ICARUS

ome for the JOB.

HEALTH™
Global leader in rehab,
ecovery and sports performance
rolyan
2022
PRODUCT
CATALOG
THERABAND
Product catalog
days
THERABAND
CLX
PERFORMANCE

PARTMENT OF
CCUPATIONAL
HERAPY
OCCUPATIONA
THERAPY
thePersonal

OCCUPATIONAL
THERAPY
UNIVERSITY OF ALBERTA
FACULTY OF REHABILITATION MEDICINE
Department of Occupational Therapy

IMS
Innovative Medical
Supplies

CarFit
Today
MUSTER
POINT

We've Gotcare
Everywhere.
Gotcare
Community Giveback Item!
Don à la communauté!

JOIN OUR TEAM!
Saskatchewan Health Authority
Colby McClelland
Saskatchewan Health Authority

Assistive Technology and Ergo
Workplace Assessments
Training and Technical Sup
quiresolutions.
Neil Squir
I am having trouble breathing
Neil
Squire

bms.
CADT Conference
Congrès de l'ACDE

QAP

OT HomeFX
Functional and
Home Modifcations
Assessment Tool
OT HomeFX

The Four Elements of Our Treatment

Activity is Medicine
ASSISTEP

Collaboratively
creating an accessible
and inclusive world
Training
Tools
Consultation
incluzia.com
Functional and
Home Modifications
Assessment Tool
DRAW:
550

Saskatchewan
Health Authority
Colby McClelland

OCCUPATIONAL
THERAPY
UNIVERSITY OF ALBERTA
FACULTY OF REHABILITATION MEDICINE
Department of Occupational Therapy

We've Gotcare
Everywhere.
Gotcare
Community Giveback Item!
Don à la communauté!

NMEDA
www.nmedacanada.ca
CAOT Conference
Congrès de l'ACE

TCU Place
GUEST WIFI
WIFI NAME - TCU GUEST
WIFI PASSWORD
Welcome202#
thePersonal

WESTECH
HEALTH CARE LTD.
Pearson
PearsonClinical.ca
Testing motor skills is as easy as MABC
Accurate tools to assess developmental delays in children one to 42 months old.
www.PearsonClinical.ca

FACULTY OF REHABILITATION MEDICINE
BEAR WITNESS DAY
JOURNÉE DE L'OURSON TÉMOIN
I ♥ OT

TRAINING
SOLUTIONS
Functional & Cognitive Capacity Evaluations
Cost of Care or Life Care Plan
Q'STRAINT
SURE-LOK

Home Instead
To us, it's personal
Care Professionals supporting families by ensuring their loved one's safety, dignity and comfo
HomeInstead.ca

Independence
Safety
NMEDA
NATIONAL MOBILITY
EQUIPMENT DEALER
ASSOCIATION
NMEDACANADA.CA
ANCEM
ASSOCIATION NATIONALE
QAP
Accessibility
Independence
Safety
NMEDA
CANADA.CA

WESTECH
HEALTH CARE LTD.
"Helping Canadians of all ages live independently with dignity and respect by offering innovative health care products."
VELA chairs for children
• Children can "grow with the chair" by changing the seat and backrest
• Safety and stability via central brake
VELA Tango 100S
with accessories
VELA Hip Hop 100
with accessories
WESTECH
HEALTH CARE LTD.
"Helping Canadians of all ages live independently with dignity and respect by offering innovativ health care products."
• Integrity
• Trust
Testing motor s
is as easy as MA
Suspect a motor coordinat
MABC is a quick and reliable to
by OTs and other professionals
interventions are timely and ef
over time.
With MABC, you can:
• Identify delay or impairment in m
development
more, please visit
techhe

lifemark
lifemark
lifemark
thePersonal
thePersonal

People First
PrairieHeart
MOBILITY
People First

Guardian

BEAR WITNESS DAY
JOURNÉE DE L'OURSON TÉMOIN

Vancouver
CoastalHealth
careers.vch.ca

MUSIC
THEATRE
COFFEE
CONSPIRACY
NOW
OPE
thePersonal

CAOT - ACE
CAOT CONFERENCE 2023 CONGRÈS DE L'ACE
CAOT MEMBER TOWN HALL
Canadian Association of Occupational Therapists

CAOT · ACE
Canadian Association of Occupational Therapists
Canadian Association of Occupational Therapists

CAOT - ACE
Canadian Association of Occupational Therapists
CONFERENCE 2023 CONGRÈS DE L'AC
ADVOCACY/DÉFENSE DES
Ensuring a Strong Canadian Health

EXIT

CAOT CONFERENCE 2023 CONGRES DE L'ACE
MEMBERSHIP/ADHESION
Member Portal Redesign & Website Design
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT - ACE

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT · ACE
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT · ACE

thePersonal
thePersonal
thePersonal

thePersonal
thePersonal
Merrilea
Ohio

YOUR VOICE MATTERS
Canadian Association of Occupational Therapists
CAOT - ACE
Association canadienne
CAOT - ACE

thePersonal

Ergonomic Distribution
Evoluent
contour
KINESIS
Goldtouch
ergocanada
thePersonal

thePersonal
thePersonal

thePersonal

bms.
bms.

TCU
PLACE

Gallery
thePersonal
thePersonal
thePersonal

TCU
PLACE

thePersonal
thePersonal

Small group discussion questions
What stood out for you when hearing about the COTIPP?
How would applying the COTIPP change occupational therapy in your practice setting?
TCU PLACE

thePersonal
Parneet
thePersonal

CAOT · ACE
thePersonal

thePersonal
thePersonal

CAOT - ACE
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
www.caot.ca

thePersonal
thePersonal
thePersonal

CAOT · ACE
Award of Merit
2023
Patricia Mortenson
Canadian Association of Occupational Therapists
Award of Merit
2023
Cyd E. Courchesne, MD
Canadian Association of Occupational Therapists
CAOT · ACE
Award of Merit
2023
Kimberly Bitz
Canadian Association of Occupational Therapists
CAOT · ACE
Award of Merit
2023
Maureen Blight
OT Reg. (Sask.)
Canadian Association of Occupational Therapists

Canadian Association of Occupat
Association canadienne des erg
Canadian
Association of
Occupational
Therapists

ists
es
www.caot.ca
CAOT · ACE
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes

CAOT CONFERENCE 2023 CONGRÈS DE L'ACE
CAOT Student Awards
Prix étudiant de l'ACE
University of British Columbia – ELISABETH GROSS
University of Alberta – KRISTYN SMART
University of Manitoba – TIANNA FLETT
University of Toronto – IQRA SHAH
Western University – ABIGAIL GARTLAND
McMaster University – AISHA HUFNAGEL
Queen's University – KATHLEEN LEGASSICK
University of Ottawa – MELISSA BLACK
McGill University – MICHELLE DOYLE
Université de Montréal – JUSTINE LABOUROT
Université de Laval – GABRIELLE LÉTOURNEAU
Université du Sherbrooke – MEGAN ST-FRANÇOIS
Université du Québec à Trois-Rivières – CATHERINE GÉLINAS

ne des ergothérapeutes
Linda Miller
CAOT · ACE

www.caot.ca
CAOT · ACE
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes

anadian Association of Occupational Therapists
Associat anadienne des ergothérapeutes
thePersonal
thePersonal
thePersonal

Canadian Association of Occupation
Association canadienne des ergo
Canadian
Association of
Occupational
Therapists

es ergothérapeutes
www.caot.ca

Association canadienne des ergothérapeutes
www.caot.ca
thePersonal

tional Therapists
gothérapeutes
pational Therapists CAOT
es ergothérapeutes ACE
caot.ca

nadienne des
hérapeutes

Canadian
Association of
Occupational
Therapists
CAOT - ACE
CAOT - ACE
Association

ciation of Occupational Therapists
anadienne des ergothérapeutes
AOT · ACE

anadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT · ACE

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
OT · ACE
thePersonal
CAOT

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT - ACE

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
CAOT - ACE
Canadian Association of Occupational Therapists
CAOT - ACE
Association
canadienne

www.caot.ca

Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
Canadian Association of Occupational Therapists

Canadian
Association of
Occupational
Therapists

DAIANI
100%

Canadian Association of Occupational Therapists
Canadian Association of Occupational Thera
Association canadienne des ergothérapeu

on of Occupational Therapists
dienne des ergothérapeutes
thePersonal

Canadian Association of Occupational Therapists
Association canadienne d ergothérapeutes
CAOT - ACE
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes

Canadian Association of Occupational Therapists
CAOT · ACE

Canadian
Association of
Occupational
Therapists
thePersonal

Canadian Association of Occupational Therapists
CAOT - ACE

anadienne des ergothérapeutes
Canadian Association of Occupational Therapists
AOT Association canadienne des ergothérapeutes
ACE

Canadian Association of Occupational Therapists
CAOT · ACE

Association of Occupational Therapists
on canadienne des ergothérapeutes
CAOT · ACE

Canadian Association of Occupational Therapists
CAOT · ACE

Canadian Association of Occupational Therapists
Canadian Association of Occupational Therapists
thePersonal
thePersonal

Canadian Association
Association cana
T · ACE
des ergothérapeutes ACE
Occupational Therapists
thePersonal

ian Association of Occupational Therapists
ciation canadienne des ergothérapeutes
thePersonal
thePersonal
CAOT · ACE

Canadian Association of Occupational
Association canadienne des ergothé
Canadian
Association of
Occupational
Therapists

Occupational Therapists
e des ergothérapeutes
ation of Occupational Therapists CAOT
canadienne des ergothérapeutes ACE
Gayle Restall

CAOT CONFERENCE 2023 CONGRÈS DE L'ACE

Muriel Driver Lecture

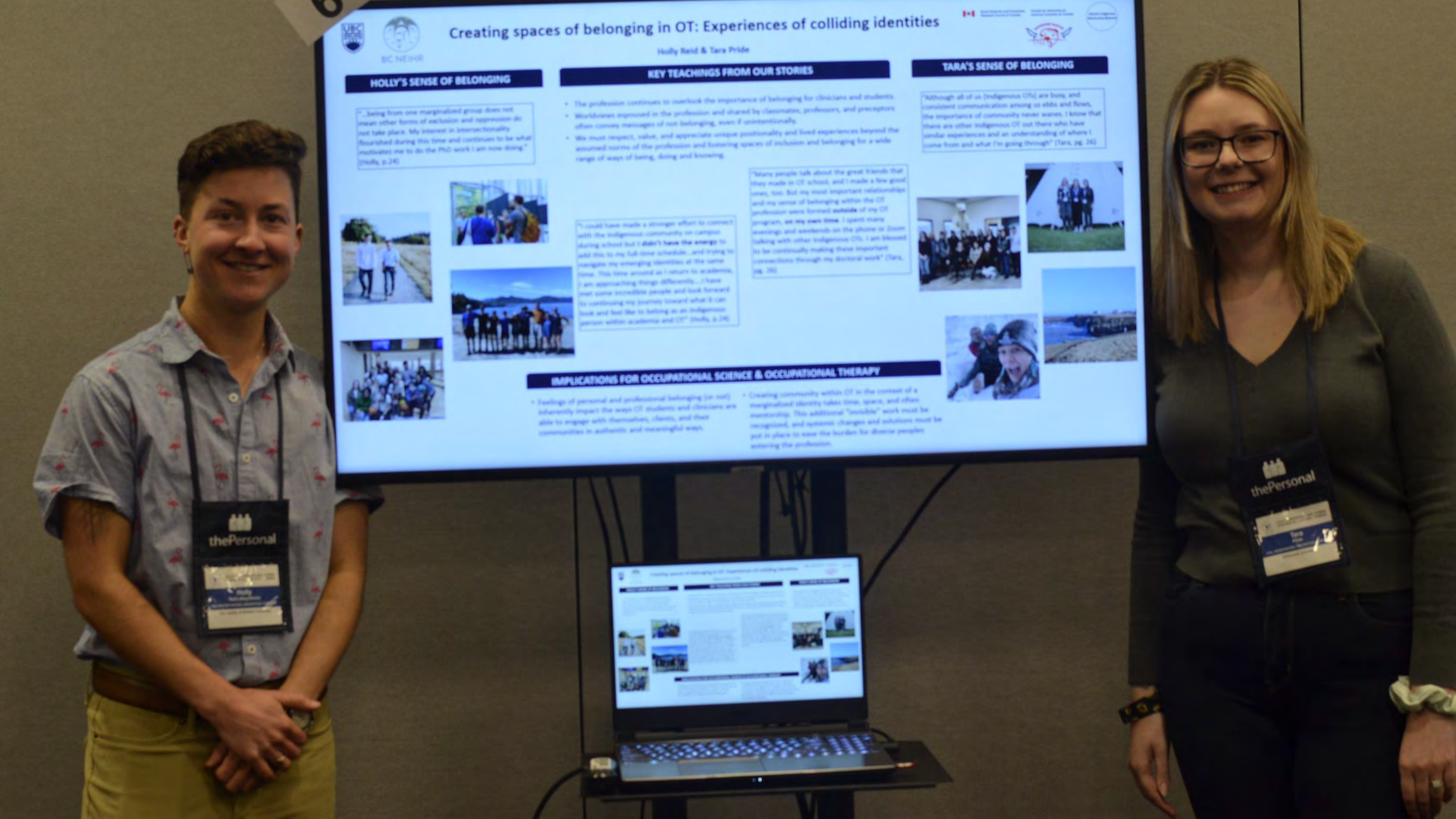
Prix du Discours commémoratif
Muriel Driver

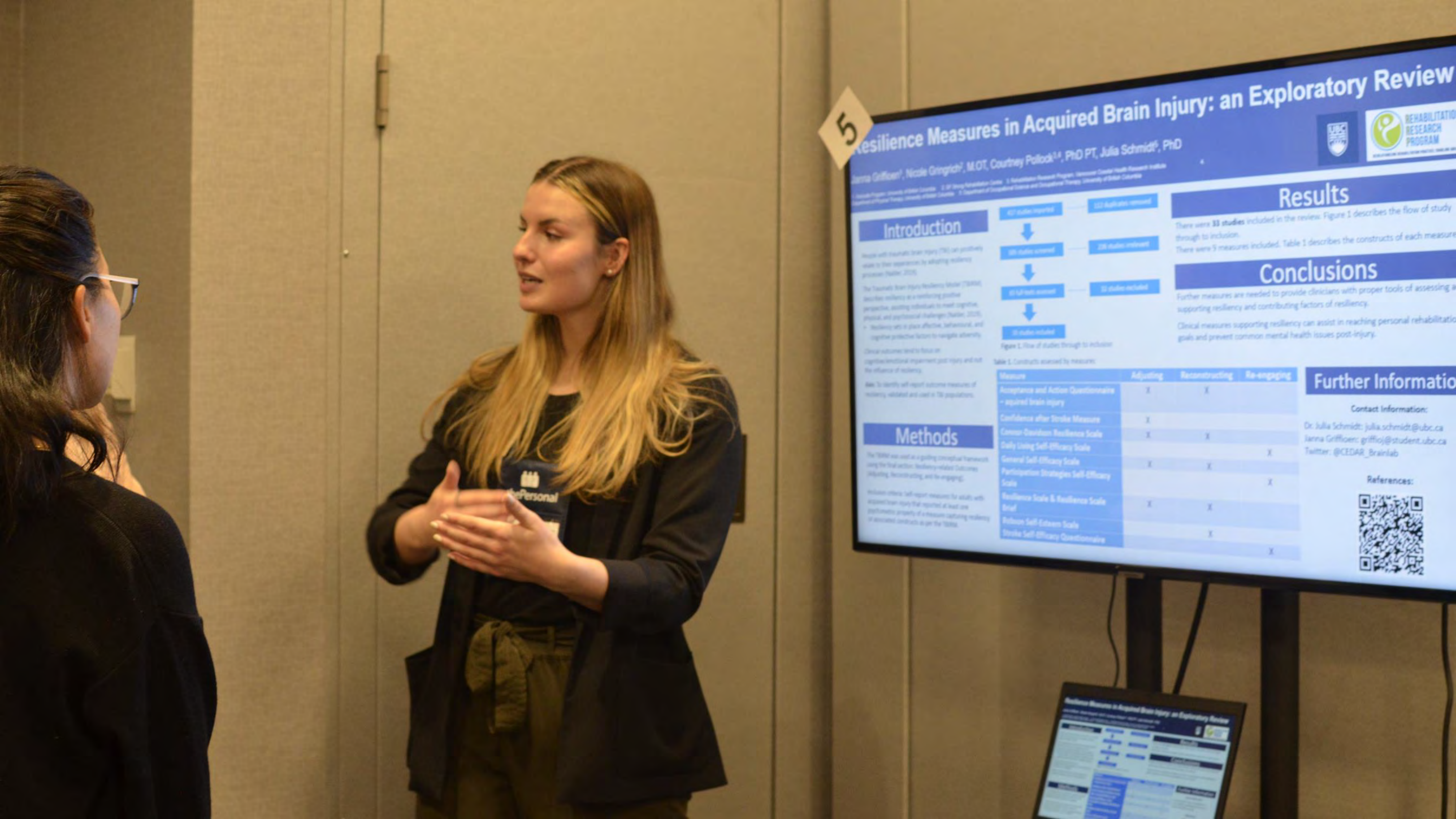
DR. GAYLE RESTALL

Canadian Association of Occupational Therapists

Association of Occupational Therapists
on canadienne des ergothéra es
Gayle Restall
CAOT · ACE

an Association of Occ tional Therapists
ciation canadienne d gothérapeutes


Creating spaces of belonging in OT: Experiences of colliding identities
Holly Reid & Tara Pride
BC NEIHR
HOLLY'S SENSE OF BELONGING
"...being from one marginalized group does not mean other forms of exclusion and oppression do not take place. My interest in intersectionality flourished during this time and continues to be what motivates me to do the PhD work I am now doing." (Holly, p.24)
KEY TEACHINGS FROM OUR STORIES
The profession continues to overlook the importance of belonging for clinicians and students.
Worldviews espoused in the profession and shared by classmates, professors, and preceptors often convey messages of not belonging, even if unintentionally.
We must respect, value, and appreciate unique positionality and lived experiences beyond the assumed norms of the profession and fostering spaces of inclusion and belonging for a wide range of ways of being, doing and knowing.
"I could have made a stronger effort to connect with the Indigenous community on campus during school but I didn't have the energy to add this to my full-time schedule...and trying to navigate my emerging identities at the same time. This time around as I return to academia, I am approaching things differently... I have met some incredible people and look forward to continuing my journey toward what it can look and feel like to belong as an Indigenous person within academia and OT" (Holly, p.24)
"Many people talk about the great friends that they made in OT school, and I made a few good ones, too. But my most important relationships and my sense of belonging within the OT profession were formed outside of my OT program, on my own time. I spent many evenings and weekends on the phone or Zoom talking with other Indigenous OTs. I am blessed to be continually making these important connections through my doctoral work" (Tara, pg. 26)
TARA'S SENSE OF BELONGING
"Although all of us [Indigenous OTs] are busy, and consistent communication among us ebbs and flows, the importance of community never wanes. I know that there are other Indigenous OT out there who have similar experiences and an understanding of where I come from and what I'm going through" (Tara, pg. 26)
IMPLICATIONS FOR OCCUPATIONAL SCIENCE & OCCUPATIONAL THERAPY
Feelings of personal and professional belonging (or not) inherently impact the ways OT students and clinicians are able to engage with themselves, clients, and their communities in authentic and meaningful ways.
Creating community within OT in the context of a marginalized identity takes time, space, and often mentorship. This additional "invisible" work must be recognized, and systemic changes and solutions must be put in place to ease the burden for diverse peoples entering the profession.
thePersonal
thePersonal


5
Resilience Measures in Acquired Brain Injury: an Exploratory Review
Introduction
Methods
Results
Conclusions
Further Information

5

Exercise as occupation: Comparing home vs community wheelchair-adapted rowing

Mine Celebi[1], Anika Cheng[1], Bonita Sawatzky[2,3], Johanne Mattie[4], Jaimie Borisoff[2,4], W. Ben Mortenson[1,2,5]

1. Department of Occupational Science and Occupational Therapy, University of British Columbia 2. International Collaboration on Repair Discoveries 3. Department of Orthopedics, University of British Columbia 4. MAKE+, British Columbia Institute of Technology 5. Rehabilitation Research Program, Vancouver Coastal Health Research Institute

Introduction

Aerobic exercise is an important occupation acting as both an activity and as a means for enhancing cardiometabolic and mental health[1]. Wheelchair users experience barriers in engaging in this occupation due to the affordability and accessibility of exercise equipment[2].

Wheelchair-adapted rowing machines (aROWs) were developed to create accessible aerobic exercise options for wheelchair users[3]. This is among the first studies comparing wheelchair-adapted exercise equipment for home and community use.

Objectives

To determine:

1. Wheelchair users' preferences, perspectives, facilitators, and barriers to using the home-based versus the gym-based aROW
2. Usability of the home-based and the gym-based aROWs
3. Recommendations to further adapt the aROW for home and community use

Methods

- Mixed methods: Semi-structured interviews and device usability measurement using the System Usability Scale (SUS) questionnaire
- Categories were identified using conventional content analysis[4]
- SUS data were analyzed using the Wilcoxon signed-rank test, and effect size was calculated using Pearson's *r* based on Cohen's criteria[4]

Session #1	Rowing at home (1 month)	Session #2	Rowing at gym (1 month)	Session #3
Orientation to study		Interview & SUS		Interview & SUS

Results

Participant Demographics (n=3)

Age (avg)	47
Sex (% female)	33%
Tetraplegia	1
Paraplegia	2

System Usability Scale (SUS) Score

	Mean	Adjective Rating[4]	p-value	Pearson's *r*
Home aROW	92	Best imaginable	0.1	0.65
Gym aROW	66	Good		

	Home aROW	Gym aROW	Both aROWs
What worked well	• Convenient • Easy to set-up • Flexibility to make individualized adaptations	• Able to socialize with others • Gyms were easy to navigate and accessible • Rowing machine was higher quality • Gym environment was motivating • Access to other adapted gym equipment	• Easy to use • Good exercise quality and intensity • Users felt secure and well-supported by the chest and thigh pads
Barriers to using the aROW	• Requires space in home	• Commute • Weather • Scheduling • Financial	• Motivation • Adaptations required for those with limited hand function
What could be improved	• Prevent chain rubbing • Durability • Wider range of resistance • Dial stiffness	• Having universally designed handles to include those with limited hand function	• Easier access to handle • Better alternative mounting method • More adjustability of thigh and chest pad positions • Access to controls
Important considerations	• Having enough space • Chest pad position • One upfront cost	• Needing to ask for set-up help • Placement of rower in gym • Monthly payments	

Figure 1. Gym aROW

Figure 2a & 2b. Home aROW

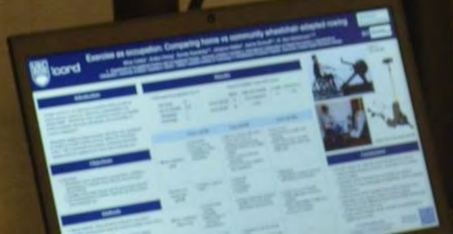
Conclusions

- Overall, rowing was enjoyable and participants were able to achieve positive physical outcomes, particularly in the muscles used for pulling
- Having the aROW at home was convenient and allowed participants to make individualized adaptations, which facilitated independence
- Using the gym aROW enabled more social connection and integration, and a greater variety of exercise options
- There was a large difference in perceived usability between the aROWS based on effect size
- Future aROW designs should consider accommodating for limited hand function

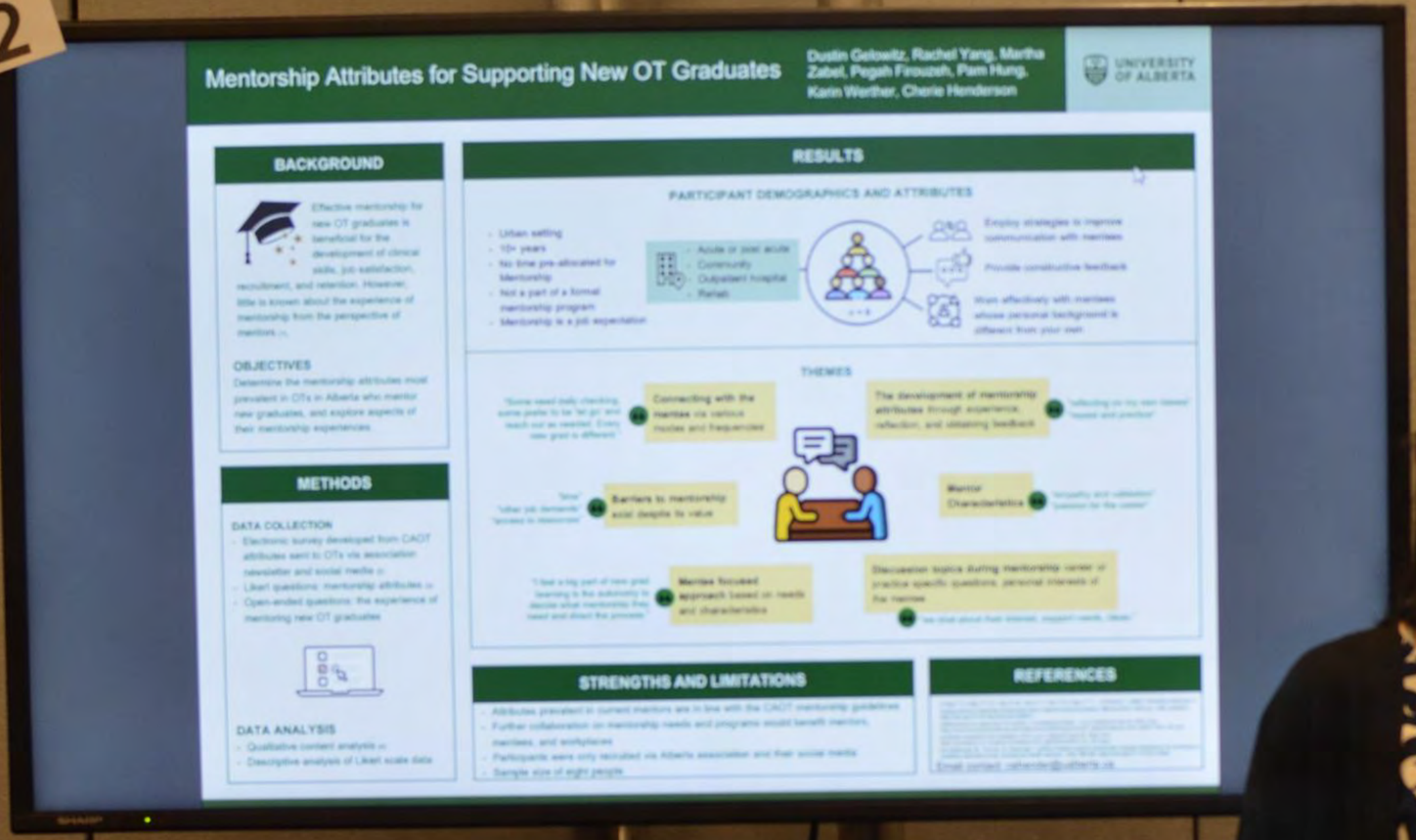
Acknowledgements

This study was funded by the Rick Hansen Foundation via an ICORD seed grant.

References & Contacts



2


Mentorship Attributes for Supporting New OT Graduates
Dustin Gelowitz, Rachel Yang, Martha Zabel, Pegah Firouzeh, Pam Hung, Karin Werther, Cherie Henderson
UNIVERSITY OF ALBERTA
BACKGROUND
Effective mentorship for new OT graduates is beneficial for the development of clinical skills, job satisfaction, recruitment, and retention. However, little is known about the experience of mentorship from the perspective of mentors.
OBJECTIVES
Determine the mentorship attributes most prevalent in OTs in Alberta who mentor new graduates, and explore aspects of their mentorship experiences.
METHODS
DATA COLLECTION
Electronic survey developed from CAOT attributes sent to OTs via association newsletter and social media
Likert questions: mentorship attributes
Open-ended questions: the experience of mentoring new OT graduates
DATA ANALYSIS
Qualitative content analysis
Descriptive analysis of Likert scale data
RESULTS
PARTICIPANT DEMOGRAPHICS AND ATTRIBUTES
Urban setting
10+ years
No time pre-allocated for Mentorship
Not a part of a formal mentorship program
Mentorship is a job expectation
Acute or post acute
Community
Outpatient hospital
Rehab
Employ strategies to improve communication with mentees
Provide constructive feedback
Work effectively with mentees whose personal background is different from your own
THEMES
Connecting with the mentee via various modes and frequencies
The development of mentorship attributes through experience, reflection, and obtaining feedback
Barriers to mentorship exist despite its value
Mentor Characteristics
Mentee focused approach based on needs and characteristics
Discussion topics during mentorship center on practice specific questions, personal interests of the mentee
STRENGTHS AND LIMITATIONS
Attributes prevalent in current mentors are in line with the CAOT mentorship guidelines
Further collaboration on mentorship needs and programs would benefit mentors, mentees, and workplaces
Participants were only recruited via Alberta association and their social media
Sample size of eight people
REFERENCES

thePersonal
thePersonal
thePersonal

An international occupational therapist's reflections on evidence-based practice

Swati Das, MOT and Aliki Thomas, PhD, OT (c), erg.
School of Physical and Occupational Therapy, McGill University
Contact information: swati.das@mail.mcgill.ca

1. Background and objective

- Occupational therapy in India is a relatively young profession.
- Occupational therapists in India are currently facing challenges in practice. [1]
- Evidence based practice is an approach to clinical decision making that aims to reduce inefficiencies and improve practice. [2]
- Applying scientific evidence to inform clinical decisions, however, can be challenging in the local context.

The objective of this presentation is to highlight some of these challenges using a clinical encounter from my practice experience.

2. Context of the clinical encounter

Occupational therapist	Patient
OT practicing in India	Hemant, a 20-year-old university student
Clinician and educator	Acquired Brain Injury following a motorbike accident
Worked at an acute and outpatient neurosurgical unit	Family – parents, older sister, grandparents
Experienced challenges in applying research evidence in practice	Chose to pursue engineering against his father's wishes
Currently pursing PhD (year 2) in Canada	Enjoys travelling, exploring new places, and socializing with friends

3. My dilemmas

Assessment
- Challenges with using evidence-supported assessment tools such as the Canadian Occupational Performance Measure (COPM) [3]
- Will administering the COPM with the caregiver (in place of Hemant) yield similar outcomes?

Goal setting
- Mismatch between the goals of the family and the OT
- What is a realistic goal?

Intervention approach
- Challenges with using an occupation-focused model [4] that prioritizes independence vs. patient and family values
- Family values – barrier or strength?

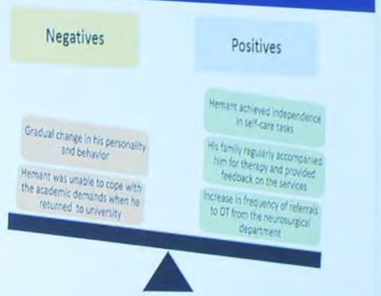
4. My reflections

Why was it challenging to use the COPM?
- Language
- Value assigned to autonomous decision making

Why was it difficult to set goals ?
- Multiple interpretations of what is a realistic goal
- Contextual barriers influenced my ability to consider the family's prioritized goals

Why was it difficult to apply Toglia's Multicontext Approach?
- Conflict between values of the family and the intervention approach
- Challenges in integrating family values during intervention planning

5. Outcomes



6. Implications for OT practice

Diverse ways of valuing and interpreting independence	Limited availability of contextually relevant resources to inform practice in local context	Adapting or modifying evidence-based tools for the local context is challenging
Integrating "other" ways of knowing can facilitate clinical decision making	A sound understanding of the local context is important when applying evidence in practice	Consider clients as experts with lived experiences which they bring to the clinical encounter [5]

References: 1. Murthi, K.M. (2019). Evolution of occupational therapy practice in India: An overview of the historical foundation and current practice. Annals of International Occupational Therapy 2 (3), 141- 148 **2.** Sackett et al. (1996). Evidence based medicine: What it is and not. *BMJ*. 312 (7023), 71-72 **3.** The COPM with an Alternate Respondent https:// www.thecopm.ca/advanced/the-copm-with-an-alternate-respondent/ 4. Toglia, J.P. (1991. Generalizations of Treatment: A multicontext Approach to Cognitive Perceptual Impairment in Adult Injury. The American Journal of Occupational Therapy, 45 (6), 505-516 5. Buchanan, H. (2017). Evidence-based practice and practice-based evidence. In S.A. Dsouza, R. Galvan, E, Ramugondo (Eds.), *Concepts in occupational therapy: Understanding southern perspectives* (pp.

The efficacy of remotivation protocol for people with chronic schizophrenia

Wan Ching Peng[12], Chieh Lee[1], Ay woan Pan[2]

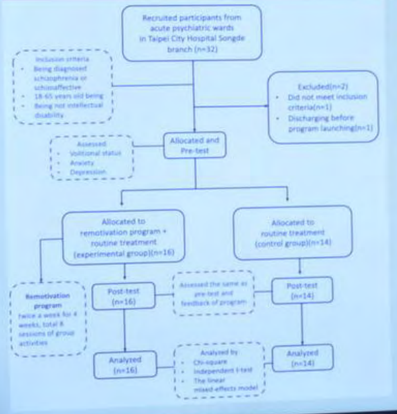
Taipei City Hospital, Taipei, Taiwan[1], National Taiwan University, Taiwan[2]

Introduction

Motivational deficits are common problems for persons with schizophrenia. Recent research identified that the lack of motivation would affect global and social function, decrease goal-directed behaviors and participation of occupations of patients with schizophrenia. Therefore, it is important to enhance the motivational status of persons with schizophrenia.

We adapted strategies and principles suggested by remotivation process which was developed based on the model of human occupation and developed a new program focusing on activities and case management to improve the motivation of people with schizophrenia. Therefore, the purposes of the study is to investigate the efficacy of the newly developed remotivation program on with chronic schizophrenia.

Methods



Results

The demographic data of participants were in table1. The results of the study showed that the improvement of the volitional status of the subjects in the both groups were significant(see figure1), but there were not significant difference between the groups. The degree of anxiety and depression in the control group significantly increased after treatment, but they remained stable for the experimental group (see figure2). There was significant improvement in the depression of the subjects in the experiment group than those in the control group(see figure3). The results of the feedback questionnaire showed that subjects attending experimental group felt positive about the program and engaged in the interactive group activities increasingly.

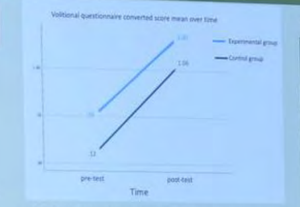


Fig. 1. Volitional questionnaire converted score mean over time

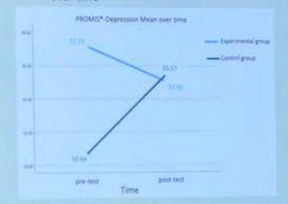


Fig. 2. Patient Reported Outcomes Measurement Information System® - Depression mean over time

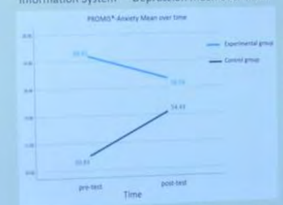


Fig. 3. Patient Reported Outcomes Measurement Information System® - Anxiety mean over time

Table 1. Participant Demographics

	Experimental group (n=16)	Control group(n=14)
	Mean(SD)	Mean(SD)
Age	51.25(8.67)	49.29(9.30)
Length of onset(year)	29.31(7.48)	20.43(9.03)
Times of admission	5.56(3.20)	5.14(4.09)
Days of admission	2172.44(1816.75)	2070.36(2808.25)
Gender(%male)	50%	50%
Schizophrenia(%)	87.50%	92.90%
Volition questionnaire *	0.59(0.90)	0.12(0.99)
PROMIS®-Depression*	57.21(10.99)	50.64(8.280
PROMIS®-Anxiety*	58.43(10.41)	50.93(9.20)

*The data is converted score

Conclusion

The newly developed remotivation program produce positive effect on reducing level of depression and enhancing volitional status of the participants. The program is feasible and welcomed by the participants. We also suggested that a larger sample size can be implemented in the future study.

Acknowledgment

We sincerely thank the participants, staff ,and sponsor from the Taipei City Hospital for supporting this researc

thePersonal
thePersonal

thePersonal
thePersonal
Sarabjeet
Charchun (she/her/hers)
FULL REGISTRATION | INSCRIPTION COMPLÈTE
Surrey Memorial Hospital- Fraserhealth

ePersonal
Melina
Mercier
University of Alberta

thePersonal
SPEAKER
CONFÉRENCIER(ÈRE)

thePersonal
thePersonal
Guardian

MABC-3
Testing motor skills is as easy as MABC
Pearson
PearsonClinical.ca
McGill
School of Physical and Occupational
WESTECH
HEALTH CARE LTD.
www.westechhealth.com

Canadian Association of Occupational Therapists
CAOT • ACE
CAOT • ACE

Canadian Association of Occupational Therapists
CAOT · ACE

Racism and Colonial
in the Helping Professions
AMANDA GERHARD SHEELAH MCLEAN
DISCUSSION PLENIÈRE
Canadian Association of Occupational Therapists
CAOT · ACE

Canadian
Association of
Occupational
Canadian
Association of
Occupational
Therapists

Canadian Association of Occupational Therapists
CAOT · ACE
Association canadienne des ergothérapeutes

WESTERN DEVELOPMENT
WESTERN DEVELOPMENT MUSEUM

EXIT
Mary

permobil
Christine

SHOP
SHOE REPAIR
VERY & FEED STABLE

thePersonal
Anna
DIXIE

thePersonal

FCE

DIXIE

CAOT - ACE
Canadian Association of Occupational Therapists
Association canadienne des ergothérapeutes
Occupational Therapy – Solutions that Work! • www.caot.ca
CAOT - ACE
Canadian Association of Occupationa
Association canadienne des ergothe