Psy07
The Relationship Between Supported Education Program and Return to Work for People With Mental Illness: A Case Illustration

RPL Lee, EFY Yau
Phoenix Clubhouse, David Trench Rehabilitation Centre, Hong Kong SAR, China.

Background: In view of the point that people with mental illness have sometimes interrupted their education, which was reviewed as one of the contributing factors towards their successfulness of return to work, because of their illness. Therefore, our Clubhouse has set up the Supported Education Program since 2003 which aims at assisting members in obtaining and maintaining employment instead of providing a variety of widely practiced vocational rehabilitation strategies such as vocational assessment or training. Methods: The Supported Education Program aimed at upgrading the clubhouse members' educational level or acquiring them with some technical skills, which are essential to raise their competitive power among workforce, thus helping them to return to work and enjoy a community life. The content of the Supported Education Program includes: (a) supporting clubhouse members in reaching out to the educational or community resources; (b) providing Educational Fund to subsidize the tuition fees; (c) inviting volunteers, staff or clubhouse members to provide individual or group tutoring; (d) organizing educational talks on study and education; (e) providing self-learning computer software like Chinese typing and Microsoft application. Results: Fourteen members who had successfully returned to work under this Supported Education Program will be illustrated. Their successfulness was mainly because they could acquire specific work skills and knowledge, thus increasing their self-confidence in employment. Conclusion: Supported Education Program might be an inspired idea to be included in Vocational Rehabilitation because it helps the clubhouse members to return to work. Further study supported with data to indicate the effectiveness of Supported Education Program to the successfulness of return to work of people with mental illness will be recommended in future.

Psy08
Promoting Healthy Lifestyle for People With Mental Illness

BKT Chu, EFY Yau
Phoenix Clubhouse, David Trench Rehabilitation Centre, Hong Kong SAR, China.

Background: Clubhouse programme concerns the health status of clubhouse members, who are people recovering from mental illness. A series of wellness programmes was implemented to promote healthy lifestyle. Methods: Clubhouse members were empowered to lead the programme with staff by setting up a health ambassador committee. The Wellness programme was incorporated into Clubhouse workday and provided affordable and accessible means for initiating healthy lifestyle. Three themes were introduced. Firstly, education on health awareness was launched with educational forums to enrich members' knowledge on health concepts. Free health check-ups were provided on body mass index, blood pressure, and heart rate, etc. Secondly, regular exercises were encouraged to build a lifestyle. Fitness equipments classes, yoga, Ba Duan Jin and healthy walking were promoted. Wellness activities, such as, hiking, ball games were regularly arranged in the social activities during evening and weekend programmes. Thirdly, healthy diet was recommended. “Healthy Chef Competition” was held with health themes. Results: Members were improved in terms of health concepts, knowledge, awareness on their health condition and habits of regular exercise. They were more aware on balanced diet, doing exercise at leisure time and regular body checking. Menus in the Food Services Unit were changed based on health principles. All soft drinks and candies were replaced with healthy snacks and beverages. Conclusion: To maintain and further improve the quality and the quantity of the wellness programmes, continuous efforts on educating members on health concepts and introducing innovative health activities will be crucial.

Psy09
A Strong Transitional Employment System and Its Impact to People With Mental Illnesses and the Business Community

EFY Yau
Phoenix Clubhouse, David Trench Rehabilitation Centre, Hong Kong SAR, China.

Background: Clubhouse programme assists clubhouse members in obtaining and maintaining employment through transitional employment, supported employment and independent employment. Transitional employment (TE) is the mode of employment providing most support to the members. Methods: Every Clubhouse member has a right to join the TE programme and work on a job placement in the community. A TE system was developed by establishing partnerships with prestigious employers. The Clubhouse made persistent efforts to nurture a long-term relationship with the employers. A standard of placement management practices is the top priority of the clubhouse. Clubhouse guarantees coverage for all placements during member absences. The desire to work was the single most important factor in determining placement opportunity regardless of success or failure in previous placements. TE placements were drawn from a wide variety of job opportunities; part-time and time-limited. Clubhouse staff selected, trained members to take up the duties and did regular on-site follow-up. Results: An exceptional TE system was developed with large corporations; over 50% of the employers were international and had been working with the Clubhouse for over five years. In 2008, the Clubhouse maintained 16 TE jobs representing 34% of the Clubhouse’s average work-ordered day attendance. The total wages earned for TE placements were HKD 600,000 and the average hourly wage was HKD 45. Clubhouse members gained satisfaction including income and social relationship with the colleagues. Their work skills and confidence are much improved. Conclusion: A strong TE system is a win-win collaboration between the business and rehabilitation community.

Psy10
Incorporating Solution-focused Approach in OT Interventions for a Patient With Atypical Psychosis: A Case Report

GLH Wong
Tai Po Hospital, Hong Kong SAR, China.

Background: Henry (anonymous) was suffered from atypical psychosis. He had idiopathic dizziness and was referred for OT interventions in an acute psychiatric unit. He presented with catastrophic reaction and visual hallucination, and was afraid that his symptoms would be aggravated by postural changes. Consequently, he restricted himself from daily activities. He was obsessed about finding explanations for his symptom but in vain. Methods: Instead of in-depth investigation on his “problem”, therapist guided Henry to look for possible solutions. Therapist firstly queried Henry whether there were occasions that he felt less dizzy. After detailed exploration of what happened in those exceptional occasions, Henry was convinced that he actually had “some” control over his condition. Therapist used the “miracle question” to motivate Henry and to identify possible goals for him. Henry imagined that if he had no dizziness, he would take shower every morning, resume morning exercise, go shopping, and play basketball. By using activity analysis and gradation, therapist supported Henry to try out these activities with ongoing monitor of symptoms. Henry was convinced that he actually had “some” control over his condition. Therapist used the “miracle question” to motivate Henry and to identify possible goals for him. Henry imagined that if he had no dizziness, he would take shower every morning, resume morning exercise, go shopping, and play basketball. By using activity analysis and gradation, therapist supported Henry to try out these activities with ongoing monitor of symptoms. Therapist worked as Henry’s coach to “keep the snow ball rolling”. Results: Although Henry still persistently felt dizzy, his acceptance toward the symptoms was significantly improved. He resumed bathing and gradually tried out different leisure activities in ward, his attendance in rehabilitation activities was continuously improving, and he even attempted a short “outing trip” with his therapist before his discharge. Conclusion: Although there were empirical limitations, significant changes in Henry's perception and behaviours were noted after adopting the solution-focused approach. Incorporating this approach in conventional OT interventions would show various possibilities in long-term professional development.