

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

長庚大學職能治療學系 30 週年系慶活動

『共融視野：職能治療推動高齡科技與健康福祉國際學術研討會』

**Taiwan Occupational Therapy Association 2024 Annual Meeting and
International Conference**

**30th Anniversary Celebration of the Department of Occupational Therapy
at Chang Gung University**

**Conference theme: Inclusive Horizons: Occupational Therapy Advancing
Gerontechnology and Health Well-being International Conference**

主辦單位：社團法人臺灣職能治療學會、長庚大學職能治療學系

林口長庚紀念醫院復健科、桃園市職能治療師公會

指導單位：國家科學及技術委員會、教育部

會場地點：林口長庚永慶科學園區研究大樓一樓 國際會議廳

會場地址：桃園市龜山區文化一路 15 號（地圖請見後方）

會議日期：2024 年 12 月 06 日（五）至 12 月 08 日（日）

聯絡方式：職能治療學會秘書處 02-2382-0103 或 tota@ot.org.tw

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大會主席歡迎詞



吳菁宜特聘教授

社團法人臺灣職能治療學會理事長/長庚大學醫學院副院長
社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會
大會主席

各位親愛的貴賓、與會者：

誠摯歡迎您蒞臨本次由社團法人臺灣職能治療學會與長庚大學職能治療學系共同主辦的 2024 年國際研討會——「共融視野：職能治療推動高齡科技與健康福祉國際學術研討會」。本屆會議精心籌劃了充實而緊湊的議程，匯集了多元豐富的主題，期盼各位能在這場知識盛宴中積極交流，共同擴展專業視野，收穫豐厚的學術知識。

社團法人臺灣職能治療學會是由臺灣職能治療學界與實務界專業人士共同組成的學術團體，致力於促進本地職能治療的發展，培育專業人才，提升學術水準，並探索創新服務模式。本會不僅推動國內職能治療專業的成長，還積極協助政府制定相關法規和政策，為職能治療專業在臺灣的權利與權益發聲，引領職能治療專業教育與服務發展的責任。此外，本會作為臺灣職能治療領域之代表，積極拓展國際空間，參與各大國際醫療組織及職能治療專業會議，提升本國職能治療專業在國際的能見度與影響力，並每三年舉辦一次國際研討會，以促進臺灣與國際之間的學術交流與合作，與國際趨勢接軌。

本次為期三天的研討會精彩絕倫，我們很榮幸能邀請五位國際知名學者，分享他們在神經復健、兒童感覺統合、高齡產業、心理職能治療及電競等領域的豐富經驗與研究成果，為參會者提供該領域的最新觀點。會議期間亦有多場口頭發表報告及多達 150 篇的海報展示，涵蓋生理、兒童、心理與社區等主流領域，以及各新興領域的研究趨勢，滿足不同領域專家學者的需求，呈現職能治療領域近年來蓬勃多元的發展成果。

謹再次歡迎各位專業同道蒞臨本次盛會，誠摯邀請您於本會中積極參與交流討論，增進彼此間的深度合作，開啟未來合作契機。讓我們攜手創造豐碩的學術成果，並開拓職能治療專業的新紀元！

大會主席歡迎詞



李冠逸教授

長庚大學職能治療學系主任

社團法人職能治療學會理事兼研究發展委員會主委

大會主席

各位與會者好，

誠摯歡迎各位參加此次的國際研討會，很高興長庚大學職能治療學系的 30 週年系慶活動，能與社團法人臺灣職能治療學會、長庚醫療財團法人林口長庚紀念醫院、桃園市職能治療師公會，共同主辦這場學術盛會，大會主題為『共融視野：職能治療推動高齡科技與健康福祉國際學術研討會』，我們邀請五位國際知名學者分享最新的觀點，議程內容包含豐富多元的口頭報告，以及近 150 篇的海報發表，充分展現出職能治療蓬勃發展又豐富多元的研究能量與成果。

長庚大學職能治療學系從成立至今已 30 年，致力於培養職能治療專業人才，而全體教師們於研究、教學、產創及國際交流等面向，成果豐碩並屢獲大獎肯定，這些卓越表現也同步反映在這幾年大學部及研究所的教學特色，在課程設計、微學程建置、課後活動的規劃等，全力提升學生的跨域學習，並鼓勵學生從事長短期國際交流、參與學研競賽，及組隊角逐國內外產創獎項。面對醫療產業的快速變動，臺灣人口社會的變化，及人工智慧的浪潮來臨，在職能治療人才的養成教育中，長庚大學職能治療學系將全力為學生做好準備，持續培養優秀的職能治療專業人才。期許能與職能治療的夥伴們攜手共創下一個 30 年。

籌備委員會

大會主席

- 吳菁宜
- 李冠逸

大會副主席

- 陳秋文

社團法人臺灣職能治療學會研究發展委員會主委

- 李冠逸

社團法人臺灣職能治療學會政策法規委員會主委

- 紀焯宙

社團法人臺灣職能治療學會專案管理委員會主委

- 吳菁宜

社團法人臺灣職能治療學會專業教育委員會主委

- 周映君

社團法人臺灣職能治療學會專業品質委員會主委

- 吳益芳

社團法人臺灣職能治療學會財務管理委員會主委

- 柯瑋婷

社團法人臺灣職能治療學會國際事務委員會主委

- 張家好

社團法人臺灣職能治療學會專業推廣委員會主委

- 陳德群

秘書處

- 林睿騏、張婉嫻、黃上育、黃千瑀、謝好葳、陳柏仔

場地組

- 陳秋文、廖珮鈞、鄒雅倫、謝佳汝

國際講者邀請接待暨工作坊組

- 黃湘涵、楊婕凌、詹佩穎

準職能治療師論壇

- 莊宜靜

主持人

- 鄭嘉雄

長庚永慶尖端科學園區-研究大樓國際會議廳



一、搭乘桃園機場捷運：長庚醫院站(A8)

搭乘至長庚醫院站 A8 站，右轉文明路，步行約 3 分鐘，左轉研究大樓(沿途將有學生志工引導)。

二、搭乘公車至「林口長庚醫院站」下車，步行約 7-8 分鐘

三、桃園機場至會議廳

搭乘桃園機場捷運「機場第一航廈站(A12)」或「機場第二航廈站(A13)」至「長庚醫院站(A8)」下車，步行約 3 分鐘。

四、桃園高鐵站至中心

搭乘桃園機場捷運「高鐵桃園站(A18)」至「長庚醫院站(A8)」下車，步行約 3 分鐘。

五、開車路線：

北上：至林口交流道右轉，至光明路（過中油加油站）再左轉，即準備進入停車場停車。

南下：至林口交流道左轉，至光明路（過中油加油站）再左轉，即準備進入停車場停車。

周邊停車場 (恕不提供停車優待，敬請見諒)

名稱	位置	費率	說明
長庚醫院質子停車場	龜山區文化一路質子中心大樓	每小時 30 元	小型車 86 台
長庚醫院病理停車場	龜山區復興一路靠近長庚醫院病理大樓	每小時 40 元；	小型車 588 台
長庚醫院復健停車場	龜山區文化一路長庚醫院復健大樓前	每小時 40 元	小型車 704 台

六、會議廳無專屬機車停車場，建議停放在 A8 環球購物中心之地下停車場，或復興北路巷內（星巴克龜山復興門市旁的巷子）的收費停車場

與會者須知

報到時間

- 會議期間皆可報到，簽到時間為早上 08:30-10:00 及下午 12:30-14:00

註冊費用

- 請上臺灣職能治療學會官網查詢 <https://www.ot.org.tw/?action=physical-course-detail&id=118>

餐食

- 本次會議不提供午晚餐，與會者可步行 7 分鐘至 Global Mall 桃園 A8 (A8 環球購物中心) 用餐，或至復興北路的餐飲店用餐 (星巴克龜山復興門市旁的巷子)，或於會場使用外送服務點餐，會場備有外送桌供取餐，用餐時請注意環境整潔，並於餐後將廚餘及垃圾放至公共區域收集處。

口頭發表注意事項

- 請主持人提早到場地，主持人請於口頭報告前，先說明發表時間及規定，並負責各組會場秩序與時間控制。
- 論文發表者請提早到場地進行測試，並掌握報告時間為 10 分鐘的發表及 2 分鐘的問答。

海報發表注意事項

- 發表語言：繁體中文或英文，依投稿時所選擇語言。
- 發表格式：海報輸出格式為直式，寬 85cm、高 120cm。
- 張貼時間：12/7(六)上午 10:00 前完成，下午 16:30 回收。
- 作者群需有人報名研討會。
- 需自行輸出並派員張貼海報與回收。

與會證明、發表證明

- 一律於會後以電子檔寄至 email 信箱

計程車

- 若需搭乘計程車，建議至桃園機場捷運 A8 站搭乘排班計程車或叫車。

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

長庚大學職能治療學系 30 週年系慶活動

『共融視野：職能治療推動高齡科技與健康福祉國際學術研討會』

Inclusive Horizons: Occupational Therapy Advancing Gerontechnology and Health Well-being International Conference

主辦單位：社團法人臺灣職能治療學會、長庚大學職能治療學系、林口長庚紀念醫院復健科、桃園市職能治療師公會

指導單位：國家科學及技術委員會、教育部

會場地點：林口長庚永慶科學園區研究大樓 國際會議廳

會場地址：桃園市龜山區文化一路 15 號

會議日期：2024 年 12 月 06 日（五）至 12 月 08 日（日）

聯絡方式：秘書處 02-2382-0103 或 tota@ot.org.tw

工作坊-1			工作坊-2		
TOPIC : Refining Clinical Reasoning in Pediatric Practice by Sensory Integration Theory with Other Approaches SPEAKER : ERNA BLANCHE, PHD, OTR/L, FAOTA Professor of Clinical Occupational Therapy, University of Southern California, USA			TOPIC : Improving arm use: neuroplasticity, measurement and treatment SPEAKER : JANICE ENG, PHD, PT Professor, Department of Physical Therapy, University of British Columbia, Canada		
12月6日	時間	會議廳 A	12月6日	時間	會議廳 C
星期五 全日	09:00-09:30	報到	星期五 下午	13:00-13:30	報到
	09:30-12:30	Refining Clinical Reasoning in Pediatric Practice by Sensory Integration Theory with Other Approaches-(I)		13:30-16:30	Improving arm use: neuroplasticity, measurement and treatment
	12:30-13:45	午休			
	13:45-16:45	Refining Clinical Reasoning in Pediatric Practice by Sensory Integration Theory with Other Approaches-(II)			

時間	活動內容				走廊	
08:30-09:30	報到、會員簽到(08:30-11:45)				國際研討會海報展示	
09:30-10:00	開幕典禮，主席致詞 長官與貴賓致詞					
10:00-11:00	Keynote Speech I: Prof. Janice Eng Topic: Wearable sensors to enhance Rehabilitation outcomes 主持人 (Moderator) : 楊婕凌老師(Chieh-Ling Yang)					
11:00-11:15	休息					
11:15-11:45	黃曼聰紀念講座暨頒獎 受獎人：吳玉琴 理事長 主持人：吳理事長菁宜					
場地	會議廳 B+C		簡報室二	會議廳 A		
11:45-12:15	會	11:45-11:55	理事長報告	吳理事長菁宜		口頭論文發表 (全英文發表場次) Oral presentation (English session) A1-A6
	員	11:55-12:00	各委員會報告、會務報告	林秘書長睿騏		
	大	12:00-12:05	監察報告	沈監事明德		
	會	12:05-12:15	提案討論與臨時動議	吳理事長菁宜		
12:15-13:30	會議廳 B+C		(簡報室一)			
	準職能治療師論壇 (12:15-13:30)		理監事會議			
午餐、開放下午簽到(12:30-14:00)						
13:30-14:30	Keynote Speech II: Prof. Erna Blanche Topic: Time and Space synchronicity in development and daily life 主持人 (Moderator) : Prof. Megan Chang, 黃湘涵老師 (Hsiang-Han Huang)					
14:30-14:40	休息					
場地	會議廳 A	會議廳 C	簡報室一	簡報室二		
14:40-15:00	優良論文報告	X	優良論文報告	優良論文報告		
15:00-15:15	休息					
15:15-16:15	口頭論文發表 Oral presentation D1-D5	口頭論文發表 Oral presentation E1-E5	口頭論文發表 (生物力學場次) Oral presentation (Biomechanics Session) B1-B4	口頭論文發表 (全英文發表場次) Oral presentation (English session) C1-C4		

日期	時間	活動內容			
12月8日 星期日	08:00	報到(08:00-09:30)			
	場地	會議廳 A	簡報室一	簡報室二	走廊
	09:00-09:36	口頭論文發表 Oral presentation G1-G3	口頭論文發表 Oral presentation F1-F5	eSports exhibition match 電競示範賽 (09:30-11:30)	Assistive Technology Competition 輔具競賽 (09:30-11:30)
	09:40-10:00	黃曼聰女士紀念論文獎報告			
	09:50-10:00	休息			
	10:00-11:00	主會場			
		Keynote Speech III: Prof. Chung-Liang Chien 錢宗良教授 Topic: 臺灣高齡健康產業發展趨勢 主持人 (Moderator) : 吳菁宜理事長 (Ching-Yi Wu)			
	11:00-11:45	主會場			
		Invited Talk II: Prof. Choi Eun Kyoung 崔銀敬教授 Topic: Application of inclusive esports to promote leisure activities and enhance the quality of life for special groups 主持人 (Moderator) : 黃燦珣老師(Tsan-Hsun Huang)			
	11:45-12:00	主會場 閉幕式暨頒獎			

社團法人臺灣職能治療學會2024年會員大會暨國際學術研討會

長庚大學職能治療學系30週年系慶活動

共融視野：職能治療推動高齡科技與健康 福祉國際學術研討會

INCLUSIVE HORIZONS: OCCUPATIONAL THERAPY ADVANCING GERONTECHNOLOGY AND HEALTH WELL- BEING INTERNATIONAL CONFERENCE

日期：
Dec. 6th~Dec. 8th 2024

地點：
林口長庚永慶科學園區研究大樓國際會議廳（機捷A8站步行10分鐘）

Keynote Speakers

12/7



ERNA BLANCHE, PHD, OTR/L, FAOTA

Professor of Clinical Occupational Therapy, University of Southern California, USA

Topic: Time/Space Synchronicity in Development and Daily Life

12/7



JANICE ENG, PHD, PT

Professor, Department of Physical Therapy, University of British Columbia, Canada

Topic: Wearable sensors to enhance rehabilitation outcomes

12/8



錢宗良教授

國立臺灣大學醫學院解剖學暨生理學/基因體暨蛋白質醫學研究所 (合聘)

社團法人國家生技醫療產業策進會執行長

主題：台灣高齡健康產業發展趨勢

Invited Speaker

12/8

崔銀敬(CHOI EUN KYOUNG)教授

韓國韓信大學(HANSHIN UNIVERSITY)融合電競研究所所長(主任教授)

**Topic: application of inclusive esports to promote leisure activities
and enhance the quality of life for special groups**



指導單位：



主辦單位：



社團法人臺灣職能治療學會
TAIWAN OCCUPATIONAL THERAPY ASSOCIATION

社團法人臺灣職能治療學會2024年會員大會暨國際學術研討會 長庚大學職能治療學系30週年系慶活動

Taiwan Occupational Therapy Association 2024 Annual Meeting and International Conference
30th Anniversary Celebration of the Department of Occupational Therapy at
Chang Gung University

共融視野：職能治療推動高齡科技與健康福祉國際學術研討會

Inclusive Horizons: Occupational Therapy Advancing Gerontechnology and Health Well-being
International Conference

WORKSHOPS 工作坊

工作坊主題

Refining Clinical Reasoning in Pediatric Practice by Sensory Integration Theory with Other Approaches



工作坊講者

Erna Blanche, PhD, OTR/L, FAOTA

Professor of Clinical Occupational Therapy, University of Southern California, USA

工作坊主持人

Megan Chang, 美國州立聖荷西大學職能治療學系教授；黃湘涵 長庚大學職能治療學系副教授

工作坊敘述

本工作坊著重於將感覺統合理論與其他治療方法結合，以全面處理發展障礙兒童的複雜問題。透過影片案例分析、分組討論以及專題講座，運用系統性的臨床推理，協助治療師辨識可能影響兒童職能表現的潛在障礙、活動限制及參與受限，進而影響他們在家庭和社區中的生活品質。工作坊將提供支持不同結果測量工具與介入方法的實證資料，幫助治療師在實務中更有效地選擇和運用介入策略

收費標準

!!!繼續教育積分申請中!!!

	早鳥報名 Early Bird Registration	早鳥報名價格 Early Bird Registration Price	一般報名 Regular Registration	一般報名價格 Regular Registration price	現場報名 On-site Registration	現場報名價格 On-site Registration price
	日期	6 Hours	日期	6 Hours	日期	6 Hours
台灣職能治療學會會員 TAOT member	2024/09/01~ 2024/09/30	1800	2024/10/01~ 2024/11/30	2000	2024/12/06	2200
非會員 non-member		2100		2500		3000

** 本工作坊的講師、機票及住宿費用由國科會及長庚大學經費補助

The expenses for workshops, including instructors, airfare, and accommodation, are supported by funding from the National Science and Technology Council and Chang Gung University in Taiwan.

2024, Dec. 6th (Friday), 9:30-12:30 & 13:45-16:45 (6 hours)

林口長庚永慶科學園區研究大樓國際會議廳 (機捷A8站步行10分鐘)

Venue: Conference Hall at Chang Gung Medical Research Building

(A 10-minute walk from the Taoyuan Metro A8 Chang Gung Memorial Hospital Station)

指導單位：



主辦單位：



社團法人臺灣職能治療學會
TAIWAN OCCUPATIONAL THERAPY ASSOCIATION

工作坊時間/地點

社團法人臺灣職能治療學會2024年會員大會暨國際學術研討會

長庚大學職能治療學系30週年系慶活動

Taiwan Occupational Therapy Association 2024 Annual Meeting and International Conference
30th Anniversary Celebration of the Department of Occupational Therapy at
Chang Gung University

共融視野：職能治療推動高齡科技與健康福祉國際學術研討會

Inclusive Horizons: Occupational Therapy Advancing Gerontechnology and Health Well-being
International Conference

WORKSHOPS 工作坊

工作坊主題

Improving Arm Use: Neuroplasticity, Measurement and Treatment

工作坊講者

Janice Eng, PhD, PT

Professor, Department of Physical Therapy, University of British Columbia, Canada



工作坊主持人

楊婕凌 長庚大學職能治療學系助理教授

工作坊敘述

本次工作坊將深入探討提升中風患者上肢動作恢復及上肢使用的最新研究與文獻。我們將分享與介紹最新發展出的個案自填式的上肢功能評估量表、遠距上肢動作評估和穿戴式科技於功能性上肢動作的應用成果。此外，您還將了解到增進上肢復健劑量的創新治療方法，包括行為改變策略。敬請參加，共同探索中風後上肢復健的新前景！

收費標準

!!!繼續教育積分申請中!!!

	早鳥報名 Early Bird Registration	早鳥報名價格 Early Bird Registration Price	一般報名 Regular Registration	一般報名價格 Regular Registration price	現場報名 On-site Registration	現場報名價格 On-site Registration price
	日期	3 Hours	日期	3 Hours	日期	3 Hours
台灣職能治療學會會員 TAOT member	2024/09/01~ 2024/09/30	1000	2024/10/01~ 2024/11/30	1100	2024/12/06	1200
非會員 non-member		1100		1300		1500

** 本工作坊的講師、機票及住宿費用由國科會及長庚大學經費補助

The expenses for workshops, including instructors, airfare, and accommodation, are supported by funding from the National Science and Technology Council and Chang Gung University in Taiwan.

2024, Dec. 6th (Friday), 13:30-16:30 (3 hours)

林口長庚永慶科學園區研究大樓國際會議廳（機捷A8站步行10分鐘）

Venue: Conference Hall at Chang Gung Medical Research Building

(A 10-minute walk from the Taoyuan Metro A8 Chang Gung Memorial Hospital Station)

工作坊時間/地點

指導單位：



主辦單位：



社團法人臺灣職能治療學會
TAIWAN OCCUPATIONAL THERAPY ASSOCIATION

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

長庚大學職能治療學系 30 週年系慶活動

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Conference theme: Inclusive Horizons: Occupational Therapy Advancing Gerontechnology and Health Well-being International Conference

優良研究論文報告議程/Outstanding research papers presentation agenda

時間/Time：2024/12/7(Sat.) 14:40~15:00/Dec. 7th, 2024 (Sat)

15:40~16:00 地點/Venue：林口長庚永慶科學園區研究大樓 國際會議

廳 Conference Hall at Chang Gung Medical Research Building

地點/Room	題目/Topic
會議廳 A Conference Hall A	The Movement Assessment Battery for Children Second Edition in Ages 3 to 6 Years: A Cross-Cultural Comparison for Children in Taiwan 台灣 3 到 6 歲兒童於動作測驗之表現:跨文化比較 發表者：黃千瑤
簡報室一 (Briefing Room 1)	Reablement of Instrumental Activities of Daily Living for Patients With Stroke: A Randomized Crossover Trial 中風患者工具性日常生活活動之復能成效 發表者：邱恩琦
簡報室二 (Briefing Room 2)	The Correlates and Reference Values for the 6-minute Walk Distance in Taiwanese Adults with Schizophrenia 臺灣成年思覺失調患者六分鐘步行距離的相關因素與參考值 發表者：黃婉茹

*每位發表者報告 20 分鐘，含問答時間為 3 分鐘。

* Each presenter will have 20 minutes for their report, including a 3-minute Q&A session.

優良研究論文摘要

發表者：黃千瑀

論文題目：台灣 3 到 6 歲兒童於動作測驗之表現：跨文化比較

時間：2024/12/7(Sat.) 14:40~15:00

地點：會議廳 A

論文引用：

Huang, C. Y., Huang, T. Y., Koh, C. L., Yu, Y. T., & Chen, K. L. (2024). The Movement Assessment Battery for Children Second Edition in Ages 3 to 6 Years: A Cross-Cultural Comparison for Children in Taiwan. *Physical therapy, 104*(1), pzad146. <https://doi.org/10.1093/ptj/pzad146>

Objective: The Movement Assessment Battery for Children-2 (MABC-2) is a popular assessment of children's motor skills in both Western and Eastern countries. Since children's motor skills are strongly influenced by the sociocultural context, it is essential to specifically examine the applicability of the MABC-2 in different cultures. The performance on the MABC-2 age band 1 of children in Taiwan was compared with the standardized sample from the United Kingdom. The sex differences in the performance on the MABC-2 were also investigated.

Methods: Children aged 3 to 6 years were recruited and categorized into 4 age groups. The researchers assessed the children with the MABC-2 age band 1, containing 8 tasks categorized into 3 components: manual dexterity, aiming and catching, and balance. Z tests and effect sizes were used to examine the cultural differences in the 3 components and in the total scale of the MABC-2. Independent t tests were used to check for sex differences in the MABC-2.

Results: Data on 615 children with a mean age of 4.95 years ($SD = 0.97$) were collected. Clinically significant differences (effect size > 0.5) were found in 2 components and the total scale of the MABC-2 across most age groups. Children in Taiwan performed better on manual dexterity, balance, and the total scale. Marginally clinically significant differences (absolute effect size > 0.4) were found in the aiming and catching component for the children aged 3 and 6 years old; children in Taiwan scored lower on aiming and catching than did children in the United Kingdom. Girls had significantly higher scores on manual dexterity, balance, and the total scale, while boys had significantly higher scores on aiming and catching.

Conclusion: Cultural and sex differences exist in the MABC-2. Constructing a norm for children in Taiwan of different sex and modification of the items are suggested for application of the MABC-2 in Taiwan.

Keywords: Children; Cultural Comparison; Movement Assessment Battery for Children-2 (MABC-2).

發表者：邱恩琦

論文題目：中風患者工具性日常生活活動之復能成效

時間：2024/12/7(Sat.) 14:40~15:00

地點：簡報室一

論文引用：

Chen, P. T., & Chiu, E. C. (2024). Reablement of Instrumental Activities of Daily Living for Patients With Stroke: A Randomized Crossover Trial. *American journal of occupational therapy*, 78(2), 7802180160. <https://doi.org/10.5014/ajot.2024.050288>

Importance: Reablement is a person-centered and goal-oriented rehabilitative intervention to optimize people's chances to live independently.

Objective: To investigate the effects of a reablement intervention on performance of instrumental activities of daily living (IADLs) in three aspects (i.e., actual performance, ability, and self-perceived difficulty) for patients with stroke.

Design: A single-blinded, randomized crossover study.

Setting: Participants' home and community.

Participants: Twenty-seven patients with stroke.

Interventions: Each participant received two interventions (IADL reablement and health education). Each intervention was administered for 6 wk. All participants were randomly assigned to one intervention and then received the other intervention after a 4-wk washout period.

Outcomes and measures: Outcomes of actual performance and self-perceived difficulty were derived from the Frenchay Activities Index (FAI) and the difficulty dimension of the Participation Measure-3 Domains, 4 Dimensions (PM-3D4D), respectively. Outcomes of ability were measured with the Lawton Instrumental Activities of Daily Living Scale (LIADL) and the Canadian Occupational Performance Measure Performance score (COPM Performance).

Results: No statistically significant differences were found in the three aspects between the IADL reablement and health education ($p = .148-.570$). Compared with the health education, the IADL reablement showed better improvements on the FAI, LIADL, COPM Performance, and difficulty dimension of the PM-3D4D with trivial to small effect sizes ($d = 0.17-0.45$).

Conclusions and relevance: Our results reveal that the IADL reablement has the potential to increase the frequency of IADL administration, enhancing the capability to perform IADLs and reducing the self-perceived difficulty of carrying out IADLs. Plain-Language Summary: The results of this study showed positive outcomes for a reablement intervention that focuses on goal-oriented instrumental activities of daily living for patients with stroke. An IADL reablement intervention may be useful for improving the ability to carry out IADL tasks at home and in the community.

發表者：黃婉茹

論文題目：臺灣成年思覺失調患者六分鐘步行距離的相關因素與參考值

時間：2024/12/7(Sat.) 14:40~15:00

地點：簡報室二

論文引用：

Huang, W. J., Pellegrini, C. A., Chen, M. D., Huang, W. Y., Kao, T., Lee, C. F., & Chien, Y. C. (2023). The correlates and reference values for the 6-minute walk distance in Taiwanese adults with schizophrenia. *Disability and rehabilitation*, 45(21), 3567–3572.
<https://doi.org/10.1080/09638288.2022.2125592>

Purpose: The study aimed to identify the factors associated with the 6-min walk distance (6MWD) and to provide reference values for the 6MWD in individuals with schizophrenia (SCZ) in Taiwan.

Methods: A proportional stratified sampling method was utilized based on distribution of gender, age and body mass index (BMI) at the study hospital. The 6-minute walk test was conducted according to the American Thoracic Society protocol.

Results: A total of 237 patients with SCZ completed the 6-minute walk test. The 6MWD was significantly associated with age, height, weight, and length of the onset of SCZ. Stepwise linear regression revealed that height and age were significant determinants of 6MWD. The reference values for males and females at different age groups were determined. Notably, females over 60 walked substantially shorter than the age younger than 60.

Conclusions: Height and age were the main predictors for 6MWD among people with SCZ in Taiwan. The established reference values can be used to identify those at risk of poor cardiorespiratory fitness and as a target outcome during exercise programs in psychiatric rehabilitation. Our results highlight that older females with SCZ may be a priority group to target with exercise interventions to mitigate the faster decline in cardiorespiratory fitness.

IMPLICATIONS FOR REHABILITATION: Height and age were predictors of 6-min walk distance (6MWD) in schizophrenia (SCZ). The established age- and gender reference values for the 6MWD can be used to identify those at risk of poor cardiorespiratory fitness. Females with SCZ over age 60 may be a priority group to target with exercise interventions to mitigate the faster decline in cardiorespiratory fitness.

Keywords: 6-Minute walk test; cardiorespiratory fitness; functional performance; psychiatric; schizophrenia.

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會
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**Taiwan Occupational Therapy Association 2024 Annual Meeting and
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**Conference theme: Inclusive Horizons: Occupational Therapy Advancing
Gerontechnology and Health Well-being International Conference**

黃曼聰女士紀念論文獎報告

時間/Time：2024/12/8(Sun.) 09:40~10:00/Dec. 8th, 2024 (Sun.) 09:40~10:00

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

地點/Room	題目/Topic
會議廳 A Conference Hall A	Efficacy of Motor Interventions on Functional Performance Among Preschool Children With Autism Spectrum Disorder: A Pilot Randomized Controlled Trial 職能治療動作介入(MOTION-ASD)於學齡前自閉症類群障礙兒童功能性表現的成效研究：前導型隨機對照試驗 發表者：金禹汝

*報告時間 20 分鐘，含問答時間為 3 分鐘。

* Each presenter will have 20 minutes for their report, including a 3-minute Q&A session.

黃曼聰女士紀念論文摘要

發表者：金禹汝

論文題目：職能治療動作介入(MOTION-ASD)於學齡前自閉症類群障礙兒童功能性表現的成效研究：前導型隨機對照試驗

時間：2024/12/8(Sun.) 09:40~10:00

地點：會議廳 A

論文引用：

Jin, Y. R., Sung, Y. S., Koh, C. L., Chu, S. Y., Yang, H. C., & Lin, L. Y. (2023). Efficacy of Motor Interventions on Functional Performance Among Preschool Children With Autism Spectrum Disorder: A Pilot Randomized Controlled Trial. *American journal of occupational therapy*, 77(6), 7706205020. <https://doi.org/10.5014/ajot.2023.050283>

Importance: Motor ability plays an important role in overall developmental profiles. Preschool children with autism spectrum disorder (ASD) are at risk of motor skills deficits and delays. However, evidence of the efficacy of different motor interventions for the identification of optimal treatment types is lacking, especially for preschool children with ASD.

Objective: To examine the efficacy of the Motor Skill Occupational Therapy Intervention ON ASD (MOTION-ASD) and Cognitive Orientation Exercise (CO-EXC) programs to improve motor skills performance, self-care performance, and adaptive behaviors among preschool children with ASD.

Design: Randomized controlled trial, two-group, triple-blinded, repeated-measures design Setting: University laboratory.

Participants: Thirteen preschool children with ASD (M age = 4.91 yr).

Outcomes and measures: The Bruininks-Oseretsky Test of Motor Proficiency-Second Edition, Brief Form, Assessment of Motor and Process Skills, and Vineland Adaptive Behavior Scales-Third Edition.

Results: Children in the MOTION-ASD group showed significantly greater improvements in manual coordination and overall gross and fine manual skills than those in the CO-EXC group immediately after the intervention. Significant improvements in fine manual control, body coordination, overall motor skills, and self-care performance were made throughout both interventions and were retained at the posttest and the 4-wk follow-up.

Conclusions and relevance: These findings provide supporting evidence that motor skills interventions involving fundamental skills and cognitive training may be a viable therapeutic option for treating children with ASD. The results also suggest that practitioners may consider providing structured and strategic motor skills interventions for preschool children with ASD. What This Article Adds: This study's rigorous tests of motor skills interventions support ways to manage motor difficulties in children with autism spectrum disorder (ASD). An intervention based on motor learning theory could benefit preschool children with ASD, especially in terms of manual coordination ability and overall gross and fine motor skills.

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

長庚大學職能治療學系 30 週年系慶活動

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Gerontechnology and Health Well-being International Conference**

工作坊議程/Workshop agenda

時間/ Time：2024/12/7(Sat.) 11:50~13:10/Dec. 7th, 2024 (Sat) 11:50~13:10

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

地點/Room：會議廳 A (Conference Room A)

時間/ Time	場次	題目/Topic
11:50~12:10	A1	職能治療如何參與校園自殺防治 How occupational therapy could be involved in suicide prevention in the school context 黃意婷、鄭淑心、張婉嫻、游荃安、吳沛蓉、劉浩瑄
12:10~12:30	A2	搭起適應體育合作的橋樑：職能治療在校園中的角色與功能 Building a bridge to adapted physical education cooperation: The role and function of occupational therapist in school. 劉浩瑄、張婉嫻、鄭淑心、黃意婷、游荃安、吳沛蓉
12:30~12:50	A3	以符合實證職能科學，並以職能為基礎的介入，提升過動傾向兒童、青少年的 職能表現與生活適應 彭靖庭、賴迎盈、徐再偉
12:50~13:10	A4	以職能正義探索臨床困境的縫隙 馬慧英、謝筑恩

*每位發表者報告 15 分鐘，問答時間為 5 分鐘。

*Each presenter will have 15 minutes for their presentation, followed by 5 minutes for Q&A.

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

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口頭發表議程/Oral presentation agenda

時間/Time：2024/12/7(Sat.) 12:00~13:12/Dec. 7th, 2024 (Sat) 12:00~13:12

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

場次/Session：口頭報告場次 A (全英文發表場次) /Oral Session A (English session)

地點/Room：簡報室二 (Briefing Room 2)

主持人/Chair：胡貽霖/Yi-Ling Hu

長庚大學職能治療學系 / Department of Occupational Therapy and

Graduate Institute of Behavioral Sciences, Chang Gung University

時間/Time	場次	題目/Topic
12:00~12:12	A1	柏格平衡量表應用於嚴重精神病患之信度與效度 Reliability and validity of the berg balance scale in patients with severe mental illness 王三平、李書齊、簡子芸、李沛綺、陳淑媚、謝清麟
12:12~12:24	A2	正念日曆於失智症個案照顧者之使用初探 Utilization of a “mindfulness” calendar: in caregivers of individuals with dementia Yen-Chen Chang, Jui-Yu Chien, Ya-Yun Chen, Kai-Jie Liang, Pei-Ying S Chan
12:24~12:36	A3	Exploring the Relationship between Cognition and Frailty Among Individuals with Mental Illness 廖于萱、許宜珊、黃義雄
12:36~12:48	A4	Impact of Work Training on Walking Speed of Inpatients with Mental Illness: A One-Year Follow-Up Study 廖于萱、張正昇
12:48~13:00	A5	Mediators in the association between long COVID symptoms and quality of life among Taiwanese people with mental illness 張耿嘉、林宗瑩
13:00~13:12	A6	Evaluating Students’s Experience in Applying Model of Human Occupation in Acute Care Settings through Actor-Based Case Simulations Tiffany T. Lin, Homa Zahedi

*每位發表者報告 10 分鐘，問答時間為 2 分鐘。

*Each presenter will have 10 minutes for their presentation, followed by 2 minutes for Q&A.

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

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口頭發表議程/Oral presentation agenda

時間/Time：2024/12/7(Sat.) 15:15~16:03/Dec. 7th, 2024 (Sat) 16:00~17:00

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

場次/Session：生物力學場次/**Biomechanics Session**

地點/Room：簡報室一 (Briefing Room 1)

主持人/Chairs：陳顥齡/**Hao-Ling Chen**

臺灣大學職能治療學系/School of Occupational Therapy, National Taiwan University

郭立杰/**Li-Chieh Kuo**

成功大學職能治療學系/Department of Occupational Therapy, National Cheng Kung University

時間/Time	場次	題目/Topic
15:15~15:27	B1	有無跌倒經驗老年人在擾動下的姿勢控制差異 Postural Control Differences in the Elderly with and without Fall Experience under a Continuous and Unexpected Perturbation 蔡依菁、楊世偉
15:27~15:39	B2	疲勞對於書寫力學以及手指捏力的影響 The Impact of Fatigue on Handwriting Mechanics and Finger Pinch Strength 林宥岑、許絜翔、程子恩、Selina Ashley Chen、徐秀雲、郭立杰
15:39~15:51	B3	學齡孩童書寫困難之風險預測 Risk of handwriting difficulties in school-aged children 黃文豐、王湑妮、陳顥齡
15:51~16:03	B4	Characterizing intensity of upper extremity rehabilitation after stroke using a novel wearable wrist sensor Ya-Yuan Cheng, Janice J Eng, Chu-Hsu Lin, Chieh-ling Yang
		生物力學場次競賽結果公布暨頒獎

*每位發表者報告 10 分鐘，問答時間為 2 分鐘。

*Each presenter will have 10 minutes for their presentation, followed by 2 minutes for Q&A.

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會

長庚大學職能治療學系 30 週年系慶活動

『共融視野：職能治療推動高齡科技與健康福祉國際學術研討會』

Taiwan Occupational Therapy Association 2024 Annual Meeting and International Conference

30th Anniversary Celebration of the Department of Occupational Therapy at Chang Gung University

Conference theme: Inclusive Horizons: Occupational Therapy Advancing Gerontechnology and Health Well-being International Conference

口頭發表議程/Oral presentation agenda

時間/Time：2024/12/7(Sat.) 15:15~16:03/Dec. 7th, 2024 (Sat) 16:00~16:48

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

場次/Session：口頭報告場次 C (全英文發表場次) /Oral Session C (English session)

地點/Room：簡報室二/Briefing Room 2

主持人/Chair：馬慧英/Hui-Ing Ma

成功大學職能治療學系/Department of Occupational Therapy, National Cheng Kung University

時間/Time	場次	題目/Topic
15:15~15:27	C1	運用設計思考改善外科病房副木製作時間 Application of the Design Thinking for Improving the Splinting Fabrication Time of Surgical Ward 衛廣遠、林芯宇、張辰、林妤芳、李彥儒
15:27~15:39	C2	Effects of Impairment- and Task-Based Mirror Therapy in Stroke Rehabilitation: A Comparative (Literature) Review Yi-chun Li, Sheng-shiung Chen, I-ping Yeh, Keh-chung Lin
15:39~15:51	C3	Mirror Therapy Priming of Kinetic Exergaming in Stroke: A Randomized Controlled Trial 林克忠、林家蓉、郭智捷、劉曉凝、林芷榆、章品宸
15:51~16:03	C4	Development and Application of a novel, environmental friendly material (Biodegradable Clay) in Rehabilitation: an alternative to traditional polycaprolactone CHAN Chung Wa, CHAN Lok Lok, CHEUNG Yan Ling, LAU Wui Man, Benson, LAU Chung Man, Joy, CHAN Chi Chung, Sam

*每位發表者報告 10 分鐘，問答時間為 2 分鐘。

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場次/Session：口頭報告場次 D/Oral Session D

地點/Room：會議廳 A (Conference Room A)

主持人/Chair：張雁晴/Yen-Ching Chang

成功大學職能治療學系/Department of Occupational Therapy, National Cheng Kung University

時間/Time	場次	題目/Topic
15:15~15:27	D1	精神病人日常生活功能評量表第四版之研究 A Study of the Activities of Daily Living Rating Scale-IV for Psychiatric Patients 李慧玲、褚增輝、蔡佳瑜、陳淑美、沈郁敏
15:27~15:39	D2	某精神專科醫院慢性住院病人下肢肌力肌耐力與動靜態平衡改變情形之 5 年世代研究 A cohort study on morbidity rate of lower-extremity muscular endurance and balance in chronic psychiatric patients of a psychiatric hospital 李慧玲、劉欣盈、吳聖良
15:39~15:51	D3	探討聲光療介入憂鬱症患者憂鬱情緒、心率變異與生活品質之成效 楊尚育、林品瑄
15:51~16:03	D4	探討居家復能中專業人員與照顧者有效合作策略：質性研究 The HOWs and WHATs of effective collaborative strategies between professionals and caregivers in home-based reablement: A qualitative study 蔡明吟、蔡宜蓉、毛慧芬、黃意婷、張玲慧
16:03~16:15	D5	工具使用對健康成人上肢本體覺表現的影響 The impact of using tools on the upper limb proprioception performance in healthy adults 葉淨維、廖苡妘、王浣妮、陳顥齡

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時間/Time：2024/12/7(Sat.) 15:15~16:03/Dec. 7th, 2024 (Sat) 16:00~16:48

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

場次/Session：口頭報告場次 E/ Oral Session E

地點/Room：會議廳 C (Conference Room C)

主持人/Chair：王湑妮/Tien-Ni Wang

臺灣大學職能治療學系/School of Occupational Therapy, National Taiwan
University

時間/Time	場次	題目/Topic
15:15~15:27	E1	弦樂團國小學生之工作記憶表現探討 Exploring Working Memory Performance in Elementary School Students Participating in String Orchestra 楊晏禎、黃以珊、蔡喻安、王心慧、陳顥齡
15:27~15:39	E2	Cognitive and Motor Profiles of Young Children with Autism Spectrum Disorder and Other Developmental Disabilities 金禹汝、黃意婷、許嘉芬、杜伊芳、林玲伊
15:39~15:51	E3	遠距早療經驗及線上家長教練模式可行性研究 Research of remote early childhood intervention experience and feasibility of online parent coaching model 李冠璇、康琳茹、黃湘涵、傅中珮
15:51~16:03	E4	早期社交溝通量表之評分者間信度與效度驗證 Inter-scorer Reliability and Validity of the Early Social Communication Scales 呂佳壘、游昕瑋、蕭小菁、侯鈞賀、蔡麗婷

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口頭發表議程/Oral presentation agenda

時間/Time：2024/12/8(Sun.) 9:00~10:00/Dec. 8th, 2024 (Sun.) 9:00~10:00

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

場次/Session：口頭報告場次 F/Oral Session F

地點/Room：簡報室一 (Briefing Room 1)

主持人/Chair：李士捷/Shih-Chieh Lee

臺灣大學職能治療學系/School of Occupational Therapy, National Taiwan University

時間/Time	場次	題目/Topic
09:00~09:12	F1	Effects of Cognitive Reserve and Different types of Cognitive Interventions on Cognitive Outcomes in Healthy Elderly Populations 認知儲備與不同類型認知活動對健康長者認知成效的影響 彭晞童、朱慧婕、朱宇擎、李凱嵐、毛慧芬、吳建德
09:12~09:24	F2	在失智症光譜疾患中腦電圖振盪與工具性日常生活功能缺失之相關性研究 陳柏仔、吳菁宜、莊宜靜、徐榮隆、黃俞華、Sietske A.M Sikkes
09:24~09:36	F3	探討阿茲海默症、輕度認知障礙與健康長者執行中文抄寫之運動學表現 Kinematic analysis of Chinese handwriting tasks among patients with mild cognitive impairment, Alzheimer's disease, and healthy controls 郭孟蓁、施采瑜、劉建良、王湑妮、陳顥齡
09:36~09:48	F4	發展失智友善居家環境策略檢核表：前導研究 Developing a strategy checklist for a dementia-friendly home: A pilot study 謝奇伶、王淑怡、范聖育
09:48~10:00	F5	以遠距醫療提供乳癌術後運動介入對上肢功能與復工之成效探討 Investigating the Effectiveness of Telehealth-Delivered Postoperative Exercise Interventions on Upper Limb Function and Return to Work in Clients with Breast Cancer 梁語恬、吳姿誼

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口頭發表議程/Oral presentation agenda

時間/Time：2024/12/8(Sun.) 9:00~9:36/Dec. 8th, 2024 (Sun.) 9:00~9:36

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

場次/Session：口頭報告場次 G/ Oral Session G

地點/Room：會議廳 A (Conference Room A)

主持人/Chair：陳韻玲/Yun-Ling Chen

中山大學職能治療學系/Department of Occupational Therapy, Chung Shan Medical University,

時間/Time	場次	題目/Topic
09:00~09:12	G1	職能導向的遠距大學課程可提升職能平衡 Occupation-based online college course improves occupational balance 葉心淳、張玲慧
09:12~09:24	G2	職能治療臨床教師與實習學生對臨床實習表現的期待比較 The Expectations of Clinical Performance in Internships: A Comparison Between Occupational Therapy Clinical Educators and Intern Students 何敏萱、吳姿誼
09:24~09:36	G3	深呼吸、好好眠：比較正念冥想與心跳變異生理回饋對降低醫學院學生焦慮之影響 Deep Breathing and Better Sleep: Comparing the Effects of Mindfulness Meditation and Heart Rate Variability Biofeedback on Reducing Anxiety in Medical Students 林沂璇、陳柏仔

*每位發表者報告 10 分鐘，問答時間為 2 分鐘。

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海報發表議程：中文場次/Poster presentation agenda (Chinese session)

時間/Time：2024/12/7(Sat.) 10:00~16:30/Dec. 7th, 2024 (Sat) 10:00~16:30

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

地點/Room：一樓大廳 (Main Hall)

中文發表場次(Chinese presentation session)			
兒童與青少年(Topic: Children and Adolescents)			
發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP001	1130014	學齡前兒童視覺動作整合發展趨勢初探 The preliminary investigation of the development of visual-motor integration in Taiwanese preschooler children 黃千瑀、羅幼如	專業組
C_OTP002	1130034	孩童與青少年自閉症類群障礙之情緒調節訓練：敘述性回顧 Emotion-Regulation Training in Children and Adolescents with ASD: A Narrative Review 賴貞菱、陳昱伶	專業組
C_OTP003	1130115	自然職能治療對神經多樣性兒青的效益：文獻回顧 Effectiveness of Nature-based Occupational Therapy in Neurodivergent Children and Adolescents: A Literature Review 陳亭羽	專業組
C_OTP004	1130139	童年逆境經驗與創傷知情在職能治療中的應用：個案報告 蔡佩伶	專業組
C_OTP005	1130032	探討專業人員以家庭為中心之衛教內容-以自閉症家長為例 Exploring the Delivery of Family-Centered Health Education Content by Professionals: A Case Study of Parents of Children with Autism 蕭瑋婷、余佳真	專業組

中文發表場次(Chinese presentation session)

兒童與青少年(Topic: Children and Adolescents)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP006	1130050	職能治療在新生兒加護病房對於基因異常孩童的介入：個案報告 Occupational therapy intervention for genetically abnormal children in the neonatal intensive care unit: a case report 徐儷庭、張煒笛、黃慶凱	專業組
C_OTP007	1130146	運用虛擬實境改善自閉症兒童社交技巧的成效：文獻回顧 The effectiveness of using Virtual Reality to improve social skills of Children with autism spectrum disorder : system review 張志龍、林詩苓、陳柏宏	專業組
C_OTP008	1130192	中文書寫障礙評估與介入之文獻回顧 黃佩珍	專業組
C_OTP009	1130045	漂泊與蓄勢待發-拒學青少年經驗探究 Drifting and Gathering Momentum : Exploring the Experiences of Adolescents with School Refusal 吳姿吟、鳳華	專業組
C_OTP010	1130187	青少年族群網路使用成癮行為與精神健康之關聯性 連雅如、柯瑋婷	專業組
C_OTS001	1130037	學齡前兒童視動整合訓練系統可行性探究 Exploring the Feasibility of Visual-Motor Integration Training System in Preschool Children 周沛潔、林玲伊	學生組
C_OTS002	1130104	注意力不足過動症兒童之執行功能障礙及其對於職能表現的影響：文獻回顧 Executive dysfunction in children with attention deficit hyperactivity disorder (ADHD) and its impacts on occupational performance: A literature review 黃詩雯、古佳苓、陳官琳	學生組
C_OTS003	1130101	視多障兒童訓練小屋感官偏好問卷之開發應用 Development and Application of Caregiver-Reported Sensory Preferences in Little Room for Children with Visual Impairment: A Preliminary Study 楊楚妍、林源鴻、劉若萱、蔡麗婷	學生組
C_OTS004	1130108	自閉症學齡前兒童動作發展 林以欣	學生組

中文發表場次(Chinese presentation session)

兒童與青少年(Topic: Children and Adolescents)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTSO05	1130110	<p style="text-align: center;">心智理論為基礎的介入於自閉症類群障礙症兒童的有效劑量：文獻回顧</p> <p style="text-align: center;">The effective dosage of theory of mind-based interventions for children with autism spectrum disorder: a literature review</p> <p style="text-align: center;">許席濤、王妍霓、陳官琳</p>	學生組
C_OTSO06	1130137	<p style="text-align: center;">視覺復健對合併視覺問題自閉症兒童之成效</p> <p style="text-align: center;">The effects of visual rehabilitation on children with autism spectrum disorders and visual disorders</p> <p style="text-align: center;">呂佳璦、游昕瑋、陳虹貴、蔡麗婷</p>	學生組

生理領域 (Physical Dysfunction)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP011	1130001	<p style="text-align: center;">腦中風居家 PAC 個案下轉西基診所執行成效</p> <p style="text-align: center;">Effects of the Client with Stroke of Home-based Post-acute Care Intervention Applied by the Clinic</p> <p style="text-align: center;">衛廣遠、林芯宇、張辰、林妤芳、李彥儒、廖予璿</p>	專業組
C_OTP012	1130003	<p style="text-align: center;">腦部腫瘤合併左側偏癱個案之職能治療介入</p> <p style="text-align: center;">Occupational Therapy Intervention for the Left Hemiplegic Client with Brain Tumor</p> <p style="text-align: center;">衛廣遠、林芯宇、張辰、林妤芳、李彥儒</p>	專業組
C_OTP013	1130005	<p style="text-align: center;">遠端橈骨骨折個案之日常生活功能介入成效</p> <p style="text-align: center;">Effects of the Activity of Daily Living Intervention for the Client with Distal Radius Fracture</p> <p style="text-align: center;">張辰、衛廣遠、林芯宇、林妤芳、李彥儒</p>	專業組
C_OTP014	1130009	<p style="text-align: center;">複合式副木介入促進腦中風個案工作表現</p> <p style="text-align: center;">Combined Splint Intervention for the Working Performance of the Client with Stroke</p> <p style="text-align: center;">吳佳憲、衛廣遠、賴姿廷</p>	專業組
C_OTP015	1130016	<p style="text-align: center;">沉浸式虛擬實境鏡像手系統於中風個案之臨床適用性和可行性</p> <p style="text-align: center;">Clinical usability and feasibility of an immersive VR mirrored-hand system for stroke survivors</p> <p style="text-align: center;">陳郁如、謝妤葳</p>	專業組
C_OTP016	1130081	<p style="text-align: center;">具振動觸覺提示之穿戴式步態訓練裝置於中風個案的應用</p> <p style="text-align: center;">Effect of Portable Ambulation Training Devices with Vibrotactile Cues for Stroke Patients</p> <p style="text-align: center;">張介瀚</p>	專業組

中文發表場次(Chinese presentation session)

生理領域 (Physical Dysfunction)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP017	1130083	發展及驗證電腦化空間記憶測驗於中風病人之心理計量特性 Development and Validation of a Visuospatial Working Memory Test in persons with stroke 陳聖雄、林庭佑、李士捷、謝清麟	專業組
C_OTP018	1130103	使用 AI 建構偵測中風患者上肢正確動作模板之個案研究 Using AI to construct a template for detecting correct movements of the upper limbs of stroke patients - case study 劉郁伶、謝協君	專業組
C_OTP019	1130095	偏癱患者使用簡易內衣輔具之成效:個案報告 The Effects of a Simple Bra Dressing Aid to a Patient with hemiplegia: Case Report 宋恩宜、黃靜怡、塗子萱	專業組
C_OTP020	1130035	駕駛模擬器訓練對腦中風個案的影響 Effect of driving simulator training for stroke patients 張哲璋、余佳真	專業組
C_OTP021	1130036	中風個案行走能力與認知動作雙重任務訓練介入的成效 Effects of Cognitive Motor Dual-task Training on walking ability in patients 沈芸嫻、余佳真	專業組
C_OTP022	1130042	Wolf's 上肢運動計畫合併神經肌肉電刺激預防中風患者肩部半脫位成效性：案例研究 The Effectiveness of Wolf's Upper Extremity Exercise Program Combined Neuromuscular Electrical Stimulation to Prevent Shoulder Sub-luxation for Patient with Stroke: A Case Study 閔傳心、賴辰鎬、張妤綸、李欣桐、李佳璋、蔣孟軒	專業組
C_OTP023	1130057	短版伯格平衡量表於亞急性中風之反應性初探 Responsiveness of the Machine Learning-based Short-form of the Berg Balance Scale in Patients with Subacute Stroke: A pilot study. 黃翊寧、李士捷、謝清麟、陳柏廷	專業組
C_OTP024	1130063	驗證家屬代寫之原版與 16 題版中風衝擊量表的因素效度 Factorial validity of proxy-reported Stroke Impact Scale and 16-item short-form in persons with stroke 侯傑議、吳佩錡、李士捷	專業組
C_OTP025	1130064	以機械學習探索影響中風個案自覺改變之影響因素 Investigations of factors of self-perceived changes in persons with stroke 吳宏嘉、許家禎、李士捷	專業組

中文發表場次(Chinese presentation session)

生理領域 (Physical Dysfunction)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP026	1130070	以羅序模型檢驗世界衛生組織障礙評估手冊 A Rasch analysis of the World Health Organization Disability Assessment Schedule II 吳珮綺、侯傑議、李士捷、謝清麟	專業組
C_OTP027	1130078	中風患者上肢動作改善對日常生活品質之影響 蘇子涵、江柏樺	專業組
C_OTP028	1130086	早期帕金森氏症個案介入方案的可行性探討 Feasibility study of an intervention program for people with early stage Parkinson's disease 陳綺瑄、李冠逸	專業組
C_OTP029	1130142	動力型手部外骨骼應用於慢性腦中風患者手部功能恢復之滿意度調查 Satisfaction survey of powered hand exoskeleton designed for hand recovery in chronic stroke patients 葉珊如、王翊全、趙若潔、楊敏如、邱韋慈、楊育昇	專業組
C_OTS007	1130056	互動式音樂手套結合上肢姿勢控制於腦中風之手功能訓練 Hand Rehabilitation of Combined Interactive MusicGlove and Postural Control for Individuals with Stroke 劉倩秀、黃彥傑、吳宇凡、邱冠閔、邱恩力、區芷瑜	學生組
C_OTS008	1130065	手部機器輔助訓練應用於中風患者上肢遠端動作功能復原成效之綜論 A Review of the effect of Hand-Assisted Robotic Training on the Recovery of Distal Upper Limb Function in Stroke Patients 洪語若、簡瑞妤、彭兆嫻、張芷綺、吳菁宜	學生組
C_OTS009	1130071	反覆性誘發療法(川平法)及其合併療法運用於中風上肢動作復健：文獻回顧 Efficacy of repetitive facilitative exercise (RFE) and its combined therapies in upper limb motor rehabilitation post-stroke: A review of literature 陳雅云、謝妤葳、游怡萱、賴品儒、謝佩紋	學生組
C_OTS010	1130093	感覺動作治療對中風上肢功能療效：個案報告 The Effect of Somatosensory-Motor Training on Upper Limb Function after Stroke: A Case Report 耿逸涵、黃怡靜、陳志昊	學生組
C_OTS011	1130018	虛擬實境對慢性中風患者上肢動作功能之成效 The effectiveness of virtual reality on upper limb motor function in patients with chronic stroke 陳姿妤、陳侶均、洪珮瑄	學生組

中文發表場次(Chinese presentation session)

生理領域 (Physical Dysfunction)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTSO12	1130028	雙側上肢動作訓練於中風感覺動作功能之成效 郭映彤、徐百儀、耿逸涵、黃怡靜、薛漪平、陳志昊	學生組
C_OTSO13	1130080	機器輔助於脊髓損傷患者上肢功能之成效回顧 Effects of Robotic-Assisted Interventions on the Upper Limb Function of the SCI Survivors: A Literature Review. 林羿葳、尤菟蒼	學生組
C_OTSO14	1130114	遠距醫療對中風患者平衡訓練之文獻回顧 Systematic Review of Telehealth Balance Training for Stroke Patients 張芮甄、吳佳窈	學生組
C_OTSO15	1130171	使用外骨骼輔助行走訓練對中風個案的介入成效文獻回顧 The effectiveness of intervention in stroke cases using exoskeleton-assisted walking training 黃瑜婕、吳姿誼	學生組

心理健康 (Mental Health)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP030	1130121	手工藝治療性團體介入於精神障礙患者之成效探討 The Effectiveness the Handcraft Activities Group with Mental Illness. 施冠妤、蕭涵憶、陳芝吟	專業組
C_OTP031	1130148	以精神病人為對象的門診復健團體治療方案—個案報告 歐欣怡	專業組
C_OTP032	1130160	應用人類職能模式設計之枯山水團體於慢性精神病患者減低社交焦慮 增進自我效能和提升生活品質之成效初探 Does participate in Zen Garden group Reduce Social Anxiety, Improve Self-Efficacy and Quality of Life? Applying model of human occupation to the treatment group suffering chronic mental illness · 葉俞佐	專業組
C_OTP033	1130191	中強度負重運動團體於慢性住院精神病友之成效 Effects of moderate-intensity and weight-bearing Exercise group on patients with Chronic Psychiatric Disorders (CPD) 許浣淇、鄭宇劭、郭芳君、李慧玲	專業組
C_OTP034	1130015	中高齡者日常活動與心理健康狀況之關聯性分析 郭思妤、莊玉如	專業組
C_OTP035	1130029	人類職能模式運用於急性住院個案之成效 Applying Model of Human Occupation to a Acute Hospitalization Client 連俐珺、王齡瑩、蕭涵憶	專業組

中文發表場次(Chinese presentation session)

心理健康 (Mental Health)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP036	1130089	降低慢性精神病人自我照顧能力缺失率 Decrease self-care impairment rate of chronic psychotic patients 向奕馨、林文珠、王涵文	專業組
C_OTP037	1130098	從模仿到勝任：角色模範在職能復健中的成效 From Imitation to Competence: The Effectiveness of Role Modeling in Occupational Rehabilitation 黃子育、蔡佩君、郭于瑄、黃郁如、張麗珍、羅月雲	專業組
C_OTP038	1130164	應用情緒儀表於身心病房治療團體之結果初探 Preliminary Findings on the Use of Mood Meter in Occupational Therapy Group in Neurosis Ward 蔡函恩	專業組
C_OTS016	1130033	音樂偏好對於心理健康的影響：系統性文獻回顧 The influence of music preference on mental health:A systematic review 江庭激、陳韻玲	學生組
C_OTS017	1130074	是獅子或老虎？影響認知障礙症患者 MoCA-T 量表命名項目作答的可能因素 Is it a Lion or a Tiger? Potential Factors Influencing Responses to the Naming Items on the MoCA-T Scale in Patients with Cognitive Impairment 陳品妘、洪佳慧	學生組
C_OTS018	1130147	身體活動生活型態再設計方案應用於精神社區復健中心之經驗與反思 許恩承、陳星佑、林好庭、陳明德	學生組
C_OTS019	1130161	以批判理論途徑審視艾倫認知障礙模式的障礙觀 Revisiting the Disability Construct in the Allen Cognitive Disability Model : Insights from Critical Theory 劉光興	學生組
C_OTS020	1130163	憂鬱症的運動、職能平衡與生活品質研究計畫 The Study Protocol of Exercise, Occupational Balance, and Quality of Life in People with Depression 黃筱歲、陳韻玲	學生組
C_OTS021	1130008	空巢媽媽的博物館處方箋執行指引之研究 Tips for Implementing Museum Prescriptions: Supporting Empty Nest Mothers 蘇沛蕙、洪佳慧	學生組

中文發表場次(Chinese presentation session)

心理健康 (Mental Health)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTSO22	1130068	精神病患對污名圖像量表的感受與經驗投射：以質性研究探究量表使用之合適性 李佳潔、洪佳慧、施冠妤	學生組
C_OTSO23	1130128	從訪談看生活：影響精神障礙者職能平衡的因素 Seeing Life Through Interviews: Factors Affecting Occupational Balance in Individuals with Mental Disorders 林沛儀、陳韻玲、洪佳慧	學生組
C_OTSO24	1130181	認知矯治對思覺失調症認知功能之成效：後設分析與臨床應用 Efficacy of Cognitive Remediation on Cognitive Function in Schizophrenia: A Meta-Analysis and Clinical Application 簡語柔、潘芊瑞、陳姿廷、吳虹霏	學生組

老年照護 (Geriatric Care)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP039	1130118	三種失智症照顧者負荷量表隨機測量誤差比較 邱恩琦、尤菟蒼、莊方寧、李淑君	專業組
C_OTP040	1130023	居家模式治療對急性後期衰弱高齡的探討 The Effect of Home-based Post-Acute Care in Patients with Frailty 林雁飛、黃晨維	專業組
C_OTP041	1130092	長照專業服務需求分析-以桃市某 A 單位為例 The Analysis of Long-term Care Professional services- - Using Unit A in Taoyuan City as an Example 游捷翔、邱曉婷、杜建廣、羅惠郁、洪琬齡	專業組
C_OTSO25	1130099	複合式認知預防和延緩認知失能介入對中部社區據點的長者的效果 The effect of a multi-component preventing and delaying cognitive disability program for community dwelling elders in central Taiwan 謝旻伶、張茹惠、蔡昀蓉、鄧雅凌	學生組
C_OTSO26	1130127	電腦化日常認知功能測驗於主觀認知衰退個案之心理計量特性驗證 Psychometric Properties and Validation of the Computerized Everyday Cognitive Function Assessment for Individuals With Subjective Cognitive Decline 朱慧婕、毛慧芬、黃晨茵、呂東武	學生組
C_OTSO27	1130022	各國活動分類圖卡之發展與差異：文獻回顧 周縞昕、張雁晴	學生組

中文發表場次(Chinese presentation session)

高齡科技 (Gerontechnology)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP042	1130052	虛擬實境介入於老年長者平衡能力、跌倒預防復健之應用 郭玟伶、陳偉樂	專業組

社區服務 (Community Services)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP043	1130155	以事件關聯電位探討動手樂活動與桌遊活動之認知彈性效益 朱宇擎、彭晞童、吳建德、毛慧芬、朱慧婕、李凱嵐	專業組
C_OTP044	1130049	社區精神病友邁向復元服務效果分析 傅慈嫻、李慧玲	專業組
C_OTS028	1130140	社區肌少症功能性運動介入應用於社區精神個案之可行性探究：案例研究 許品蓁、吳菁宜、謝佩玲、潘錡蒂、黃麟嫻、胡貽霖	學生組
C_OTS029	1130024	以減少環境危害因子來預防社區老人跌倒:利益相關者之觀點 Constructing a Virtual Reality-Assisted Activity Context Training System to Enhance Experiential Learning Effectiveness 劉淇暄、趙一平、吳菁宜、凌怡婷、李建興、胡貽霖	學生組

多元共融 (Diversity and Inclusion)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP045	1130169	職能治療主動營造醫院台語環境之經驗分享 林尚樺、蔡念倫	專業組

健康福祉 (Health and Well-being)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP046	1130125	2023 年新成立之職災勞工職能復健專責醫院推動經驗探討-以高雄醫學大學附設醫院為例 Exploring the Implementation Experience of Newly Established Occupational Rehabilitation Institutions for Workers in 2023: A Case Study of Kaohsiung Medical University Chung-Ho Memorial Hospital 林妤庭、李佳玲、陳惠媚	專業組
C_OTP047	1130106	包容性生活優化服務模式：遠距健康平台的設計與實施 吳珮菁、黃璨珣、林寧	專業組
C_OTP048	1130112	北部某綜合醫院精神科日間照護中心病人之健康體適能結果分析 吳念潔、廖吟鳳、張景瑞	專業組
C_OTP049	1130122	TRX 懸吊訓練於思覺失調肥胖者健康促進及肌力改善之初探 謝佩君、張自強、簡位先	專業組
C_OTS030	1130058	皮拉提斯於改善慢性非特異性下背痛之疼痛的緩解成效:文獻回顧 涂好安、李雅珍	學生組

中文發表場次(Chinese presentation session)

健康福祉 (Health and Well-being)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTSO31	1130129	阻力性運動介入應用於老年肌少症之文獻回顧 A Literature Review on the Application of Resistance Exercise Interventions for Sarcopenia in the Elderly 謝佩玲、潘綺蒂、黃麟媛、胡貽霖	學生組

職能治療教育 (Education in Occupational Therapy)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP050	1130025	兒童職能治療介入可信賴專業活動之評核頻率初探研究 謝明潔、彭苓幘、莊孟宜、劉燕、楊子萱、毛薰瑩	專業組
C_OTP051	1130062	初步探討職能治療師之同理能力與其臨床效能 Investigation of empathic skills in occupational therapists and its impact on clinical efficacy 曾怡真、賴彥君、陳琪萱、李士捷、謝清麟	專業組
C_OTP052	1130069	職能治療臨床副木教學之整合式線上學習平台 Integrated Online Learning Platform for Occupational Therapy Clinical Splinting Education 羅安琪、蔡沛潔	專業組
C_OTP053	1130100	運用勝任能力導向的醫學教育為教學架構，落實新進職能治療師之教學訓練 Implementing Competency-Based Medical Education as a Teaching Framework to Enhance the Training of Occupational Therapists 蔡沛潔、黃佩珍	專業組
C_OTP054	1130179	驗證職能治療實習生溝通技巧訓練成效 Effectiveness of communication skills training for occupational therapy fieldwork student 黃小玲、王怡晴、謝清麟	專業組
C_OTSO32	1130088	從評估中尋找實習生參與共同決策的線索 Seeking clues of fieldwork students' participation in shared decision-making from assessments 李仔芳、黃小玲	學生組

核心能力導向醫學教育 (Competence-based Medical Education (CBME))

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP055	1130002	社區職能治療可信賴專業活動建置與實務操作 Establishment and Practice of Entrustable Professional Activities about the Community-based Occupational Therapy 衛廣遠	專業組

中文發表場次(Chinese presentation session)

核心能力導向醫學教育 (Competence-based Medical Education (CBME))

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTSO33	1130067	體驗式活動促進醫學院學生同理心之成效探討 黃煒綸、曾詒倫、黃瑄韻、歐陽妤亭、鄭喜云、周佳燁	學生組
C_OTSO34	1130132	建構虛擬實境輔助活動情境訓練系統提升體驗式學習成效 Constructing a Virtual Reality-Assisted Activity Context Training System to Enhance Experiential Learning Effectiveness 張立昌、蕭禧鈞、陳芝萍	學生組

創新技術應用 (Application of Innovative Technology)

發表編號	發表編號	中/英文標題/作者群	組別
C_OTP056	1130044	3D 列印應用在斷指之功能型義肢-案例報告 3D printing applied to functional prostheses for fingers amputation 梁文隆、蔡伊純	專業組
C_OTP057	1130117	分析一般貼布及動態貼布用於狹窄性肌腱滑膜炎之成效比較 Analyze the comparison of the effectiveness of Kinesio[®] and dynamic taping for De Quervain's tenosynovitis. 徐慈郎、許智瑋	專業組
C_OTP058	1130135	結合人工智慧科技於司法精神病人社交技巧訓練之應用 The application of Artificial Intelligence in Occupational Therapy Activities about Social Skill Training for Inpatients in Forensic Psychiatric Setting 陳姿聿	專業組
C_OTSO35	1130072	Efficacy of High-Definition Transcranial Electrical Stimulation on Upper-Extremity Motor Function in Patients with Subacute Stroke: Study Protocol for an RCT 徐百儀、黃怡靜、林孟廷、陳家進	學生組
C_OTSO36	1130131	虛擬實境對中風患者姿勢控制療效之回顧 周加恩、吳佳怡、林得森、陳姿安、藍宇彤、易子云、廖容靚 王銓榛、王羿菱、薛人瑞	學生組

行銷、政策與行銷 (Administration, Policy, and Marketing)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP059	1130027	探究影響全人照護之職能治療品質-集體效能與病人增能量表之驗證 Investigation of Quality of Occupational Therapy in Holistic Health Care-Validation of Collective Efficacy and Patient Enablement Instrument 楊家麟、陳偉權	專業組

中文發表場次(Chinese presentation session)

職能理論與臨床實務 (Occupational Theory and Clinical Practice)

發表編號	發表編號	中/英文標題/作者群	組別
C_OTP060	1130102	以羅序模型解析中風個案能力、表現與自覺功能之關聯性 Mapping the relationships among ability, performance, and self-perceived difficulty of activities of daily living in persons with stroke 歐育如、饒珮慈	專業組
C_OTP061	1130157	人類職能模式介入對早發型思覺失調症個案之成效 Applying Model of Human Occupation to an Early-Onset Schizophrenia Client 王倫婷、陳瑜旋、蘇麗卿、沈正哲、施怡伶	專業組
C_OTS037	1130143	精神疾病診斷患者用於工作復健訓練之評估工具初探 蘇聖壹、陳芝萍	學生組

COVID-19 相關主題 (COVID-19 Related Topics)

發表編號	稿件編號	中/英文標題/作者群	組別
C_OTP062	1130030	新冠肺炎期間家長健康識能與焦慮情形 孫淨如、陳惠文、劉芳芸	專業組

其他 (請具體說明主題) (Other (please specify the theme))

發表編號	發表編號	中/英文標題/作者群	組別
C_OTP063	1130007	主題：醫療品質改善 病人使用手腳運動機導致受傷事件及後續改善 Adverse Events and Subsequent Improvement in Patients Utilizing Upper Limb Cycle Ergometer 涂巧薇、葉思婷、蔡雅雯、周湘芸	專業組
C_OTP064	1130053	主題：職災勞工工作強化 下肢骨折職災勞工於工作強化訓練成果與分析 The outcomes and analysis of work hardening training for occupational accident laborer with lower limb fracture 李瑋琦、呂主愛、蕭士翔、江柏樺、佟欣怡、陳品捷	專業組
C_OTS038	1130158	主題：Assessment 羅文斯坦職能治療認知評量視覺知覺與視覺動作組織次量表的信度分析及文化相關作答差異探討 Reliability Analysis and Cultural Response Differences in the Visual Perception and Visuomotor Organization Subscales of the Loewenstein Occupational Therapy Cognitive Assessment 洪琬儀、洪佳慧、范詩辰、邱曉萍、洪菱絮	學生組
C_OTS039	1130190	主題：芳香療法 芳香療法對乳癌個案不適症狀的介入療效文獻回顧 A Literature Review on the Effectiveness of Aromatherapy for Alleviating Symptoms in Clients with Breast Cancer 蘇祐萱、吳姿誼	學生組

社團法人臺灣職能治療學會 2024 年會員大會暨國際學術研討會
 長庚大學職能治療學系 30 週年系慶活動
 『共融視野：職能治療推動高齡科技與健康福祉國際學術研討會』
**Taiwan Occupational Therapy Association 2024 Annual Meeting and
 International Conference**
**30th Anniversary Celebration of the Department of Occupational Therapy
 at Chang Gung University**
**Conference theme: Inclusive Horizons: Occupational Therapy Advancing
 Gerontechnology and Health Well-being International Conference**
海報發表議程：英文場次/Poster presentation agenda: English session

時間/Time：2024/12/7(Sat.) 10:00~16:30/Dec. 7th, 2024 (Sat) 10:00~16:30

地點/Venue：林口長庚永慶科學園區研究大樓 國際會議廳

Conference Hall at Chang Gung Medical Research Building

地點/Room：一樓大廳 (Main Hall)

英文發表場次(English presentation session)

兒童與青少年 (Children and Adolescents)

發表編號 Presentation no.	稿件編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP001	1130048	自閉症類群障礙症家長執行情緒行為介入回顧 Parent-Implemented Emotional Regulation Interventions for Preschool Children with ASD: A Systematic Review Yu-Ling, Chen、Chen-Ling, Lai	專業組 Profession
E_OTP002	1130077	Development of the Autism Mealtime Behavior Questionnaire for Children with Autism Spetrum Disorder Tien-Ni Wang、Tzu-Min Lee、Ya-Lin Hsieh、Wen-Hsin Lai	專業組 Profession
E_OTP003	1130085	嬰幼兒按摩於早產兒及其照顧者之效益初探 Exploring the Benefits of Infant Massage for Preterm Infants and Their Caregivers: A Preliminary Study 吳宜臻、戴鳳琳、劉宜佳	專業組 Profession
E_OTP004	1130134	Facial Emotion Recognition in Children with Autism Spectrum Disorder: Perspectives from Weak Central Coherence Theory Cherng-I Chou、Chien-Te Wu、Hao-Ling Chen、Tien-Ni Wang	專業組 Profession
E_OTP005	1130152	腦性麻痺孩童觸覺功能與上肢動作品質之關聯 Relationship Between Tactile Function and Quality of Upper Limb Movement in Children with Cerebral Palsy Tien-Ni Wang、Ai-Rung Tsai、Kai-Jie Liang、Hao Ling Chen	專業組 Profession

海報發表議程/Poster presentation agenda

英文發表場次(English presentation session)			
兒童與青少年 (Children and Adolescents)			
發表編號 Presentation no.	稿件編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP006	1130166	The Impact of Home Environment Enrichment on Visual Function Development in Preterm Infants 石湘緹、黃湘涵、黃慶凱	專業組 Profession
E_OTP007	1130084	不同動作遲緩嚴重程度孩童於優化電動車訓練中之環境知覺訊息 Perceived Environmental Information during Optimal Ride-on Car Training in Children with Different Severity Levels of Motor Delays 蕭右欣、石湘緹、黃湘涵	專業組 Profession
E_OTP008	1130043	Investigating the association between maternal coping behaviors and early childhood development: A study protocol 黃柏菁、林宗瑩、張芸瑄、杜杏芬、陳昭縈	專業組 Profession
E_OTS001	1130079	探討學齡前自閉症兒童睡眠障礙、感覺處理與焦慮之關係 Relationship between Sleep Disturbances, Sensory Processing and Anxiety in Preschool Children with Autism Spectrum Disorder. 楊善竹、林玲伊	學生組 Student
E_OTS002	1130119	Chinese Handwriting Legibility and Character Processing Skills in Children with Autism Spectrum Disorder 翁芷琦、張鎔麒、王可青、陳顥齡、王活妮	學生組 Student
E_OTS003	1130107	Outcome in children with stroke: A population-based cross-sectional study. Chai Yin Charlie Fan	學生組 Student
E_OTS004	1130186	年輕成人握筆方式與手指捏力的初步研究 Handwriting Grip Patterns and Finger Pinch Strength in Young Adults: A Preliminary Study 林子馨、蘇湘晴、許絜翔、郭立杰、林宥岑	學生組 Student
生理領域 (Physical Dysfunction)			
發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP009	1130120	Caregiver-Assisted Rehabilitation with Strategy Training (CAR-ST) for Stroke Survivors with Functional Limitations: Protocol for A Multi-Center, Randomized Trial Shih-Pin Hsu, Tz-Ting Huang, Chi-Chen Chen, Feng-Hang Chang	專業組 Profession

英文發表場次(English presentation session)

生理領域 (Physical Dysfunction)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP010	1130182	Effect of Mirror Therapy Combined with Task- vs. Impairment-oriented Intervention in Patients with Stroke Sheng-shiung Chen、Keh-chung Lin、I-ping Yeh、Yi-chun Li	專業組 Profession
E_OTS005	1130094	Comparative Effects of Somatosensory-Motor and Somatosensory-Oriented Training on Somatosensory Function in patients with chronic stroke: Protocol for an RCT Yee-Han Keng、Yi-Jing Huang、Huey-Wen Liang、Jiann-Shing Jeng、I-Ping Hsueh	學生組 Student
E_OTS006	1130082	高齡駕駛在交通的視而不見現象：系統性回顧 The looked-but-failed-to-see errors in older drivers: A systematic review Chin-Yu Chang 1 Yu-Ting Chen 1	學生組 Student

心理健康 (Mental Health)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP011	1130046	不同工作訓練型態對慢性精神病人增強權能影響之初探 Preliminary Exploration of the Impact of Different Job Training Types on Empowerment of Patients with Chronic Mental Illness 呂家誌、李士捷	專業組 Profession
E_OTP012	1130047	運用情緒辨識策略及敘述性書寫對於慢性精神病人情緒調節效果之初探 A Preliminary Exploration of the Effects of Emotional Recognition Strategies and Narrative Writing on Emotion Regulation in Patients with Chronic Mental Illness 呂家誌、李士捷	專業組 Profession
E_OTP013	1130109	阻力性訓練於思覺失調症之介入成效—文獻回顧 The effects of resistance training in patients with schizophrenia: A literature review. 古芳瑜、王炫文	專業組 Profession
E_OTP014	1130010	Exploring the Impact of Lifestyle Interventions on Individuals with Mental Illness Yu Shiuan Liaw	專業組 Profession
E_OTP015	1130012	Effectiveness of Interventions Targeting Walking Speed in Individuals with Schizophrenia: A Systematic Review 廖于萱	專業組 Profession

英文發表場次(English presentation session)

心理健康 (Mental Health)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP016	1130013	Frailty and Walking Speed Interventions in Mental Illness 廖于萱	專業組 Profession
E_OTP017	1130021	Impact of Walking Activity on Walking Speed and Frailty Among Individuals with Mental Illness: A One-Year Follow-Up Study 廖于萱、李杰騰	專業組 Profession
E_OTP018	1130111	The Impact of Resistance Exercise on Mental Illness: A Systematic Review of Recent Randomized Controlled Trials 廖于萱	專業組 Profession
E_OTP019	1130144	Music rhythm reduced movement abnormalities in people with psychotic experiences: A randomized controlled trial Shu-Mei Wang、Ho-Yan Chan、Chung-Yan Chan、Lok-Yi Fong	專業組 Profession
E_OTP020	1130154	Effects of Resistance Exercise on Frailty in Individuals with Schizophrenia: A Randomized Controlled Trial 廖于萱	專業組 Profession
E_OTP021	1130167	Exploring the Relationship Between Burnout and Stigma in Psychiatric Occupational Therapy Practitioners in Taiwan Pei-Zhen Wu、Hui-Ing Ma	專業組 Profession
E_OTP022	1130038	Enhancing Recovery: A Journey in Psychiatric Hospital Care Zhao Zhenru、Clare Ang Kai Yee、Mavis Chia Xian Shu、Nawira Baig Bte Israr	專業組 Profession
E_OTP023	1130061	正向思考訓練對住院慢性精神病患者心理健康的成效 The Effectiveness of Positive Thinking Training on the Mental Health of Hospitalized Chronic Psychiatric Patients 黃文儀、鄭長欣、蕭涵憶	專業組 Profession
E_OTP024	1130087	園藝團體應用於慢性精神疾患個案之療效初探 The Effects of Horticultural Activities on Patients with Chronic Mental Disorders: A Pilot Study in Northern Taiwan 劉宜佳、戴鳳琳	專業組 Profession
E_OTP025	1130145	Relationships between sensory processing patterns and sleep quality in individuals with mental illness in Taiwan Ting Kao、Megan Chang、Chou-Fang Lee	專業組 Profession
E_OTS007	1130051	Validation and exploring the relationship between internet-related instruments among Ghanaian university students Yu-Ting Huang、Daniel Kwasi Ahorsu、Chung-Ying Lin	學生組 Student

英文發表場次(English presentation session)

老年照護 (Geriatric Care)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP026	1130041	Factors Influencing Caregiver Burden in Long-Term Care 2.0: Insights from the Long-Term Care Case-Mix System Ya-Chen Lee、En-Chi Chiu	專業組 Profession

高齡科技 (Gerontechnology)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP027	1130193	銀髮健身俱樂部第二年計畫於中部某精神專科醫院執行評價分析 Evaluation and Analysis of the Second Year Program of the Silver Fitness Club at a Psychiatric Hospital in Central Taiwan 許浣淇、郭芳君、鄭宇劭、黃品瑀、黃怡軒	專業組 Profession

社區服務 (Community Services)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP028	1130126	The Phenomenon of Repeated Participation in Vocational Training among Individuals with Mental Disorders Wan-Ju Huang、Ying-Chun Chien	專業組 Profession
E_OTP029	1130165	Exploring the Roles and Challenges of Occupational Therapists in Community Mental Health Centers in Taiwan Wan-Ju Huang	專業組 Profession

健康福祉 (Health and Well-being)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTS008	1130096	Impact of Aging Attitudes and Psychological Distress on the caregiving burden of Family Caregivers of Older Adults 陳怡蓉、劉立凡、劉建志、楊宜青、林宗瑩	學生組 Student

職能治療教育 (Education in Occupational Therapy)

發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP030	1130183	案例式教學、角色模擬與自我反思於職能治療系大一學生溝通能力之教學效果 Enhancing Clinical Communication Skills in First-Year Occupational Therapy Students through Case Method Teaching, Role-Playing and Self-reflection 楊哲魁 Yang, Je-Kuei; 謝清麟 Hsieh, Ching-Lin; 范詩辰 Fan,	專業組 Profession

		Shih-Chen	
英文發表場次(English presentation session)			
創新技術應用(Application of Innovative Technology)			
發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP031	1130054	Site effects of combining non-invasive brain stimulation with mirror therapy on motor functions post-stroke 吳菁宜、蘇耿賢、廖婉玢、林佳宜	專業組 Profession
E_OTP032	1130055	The therapeutic effects of mirror therapy sequentially combined with robot-assisted therapy on motor and daily function and self-efficacy in stroke 吳菁宜、陳彥維、蘇耿賢	專業組 Profession
E_OTP033	1130141	電子化旋轉後眼球震顫測驗設備開發與信效度建立 The reliability and validity study of motorized post-rotary nystagmus test Shao-Hsia Chang、Nan-Ying Yu、Rong-Ching Wu、Shang-Ting Su	專業組 Profession
E_OTP034	1130097	探索 BDNF 基因型對中風復健中大腦功能性連接性的影響： 一項前驅研究 Unravelling the Impact of BDNF Genotype on Functional Brain Connectivity in Stroke Rehabilitation: a pilot study Chia-Lun Liu、Wei-Hsien Chien、Ju Yen Huang、Ching-Yi Wu	專業組 Profession
職能理論與臨床實務 (Occupational Theory and Clinical Practice)			
發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTP035	1130156	探索成人的遊戲經驗 Do you play? Exploring Adult Play Experience Megan Chang 1、Erna Blanche、Diane Parham	專業組 Profession
E_OTS009	1130136	認知訓練對重度憂鬱症成人的有效性：統合分析 The Effectiveness of Cognitive Training in Adults with Major Depressive Disorder: A Meta-Analysis 利家蓉、李秉家、歐雅雯	學生組 Student
其他 (Others): OT in ICU			
發表編號 Presentation no.	發表編號 Submission no.	中/英文標題/作者群 Title/Author(s)	組別 Category
E_OTS010	1130188	腎臟損傷重症患者譫妄症之神經電生理特性:事件相關電位研究 Electrophysiological characteristics of delirium in critical care patients with renal dysfunction: An event-related potential study	學生組 Student

		陳怡倩、張懷仁、張靖玟、李佳玲、呂昕潔、鄭嘉雄	
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工 作 坊 摘 要

【工作坊 A1】

職能治療如何參與校園自殺防治

How occupational therapy could be involved in suicide prevention in the school context

作者群：

黃意婷¹ 鄭淑心² 張婉瑩³ 游荃安⁴ 吳沛蓉⁵ 劉浩瑄⁶

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⁴ 草本職能治療所

⁵ 高雄市立凱旋醫院

⁶ 學校系統特約職能治療師

一、標題：職能治療如何參與校園自殺防治

How occupational therapy could be involved in suicide prevention in the school context

二、簡介：

自殺是重大的公共衛生與心理健康議題，2023 年在臺灣台灣有 3,898 人自殺身亡，死因排名為第 11 位，其中 15-24 歲的年輕族群的自殺死亡率，自 2018 年起有逐年攀升的趨勢，顯見回應年輕族群心理健康需求的重要性與急迫性。臺灣目前的校園自殺防治工作，以教育部於 2022 年發布之「校園心理精神健康促進與自殺防治手冊」為準則，分成「以全體心理健康促進為目標之初級預防」、「以高關懷學生之早期發現與協助為目標之二級預防」，和「協助自殺企圖個案危機處理之三級預防」，並提出各層級之策略及行動方案。

目前已有許多證據指出校園中的自殺防治工作必須橫向連結各校內單位資源，也需要與校外資源與各專業連結，才能達到全面且完整的服務。在校園自殺防治的領域，職能治療師本於心理健康促進的專業知識與技能，可與各專業合作，並透過運用有意義的職能活動來促進學生參與學校生活、提升學生心理健康並降低發生自我傷害或自殺事件的可能性。

本工作坊將簡介自殺及自我傷害的基礎知識與常見迷思，並參考澳洲政府的指導方針說明職能治療師如何在校園中如何協助相關需求的學生，包含共同制定安全計畫、規劃重返校園的銜接過程、確認可提供支持的相關人員、對課業進行合理調整、持續追蹤並提供支持以及規劃相關支持人員的自我照顧。

三、主要學習目標：

1. 參與者可了解自殺及自我傷害的相關知識並釐清常見錯誤迷思

2. 參與者可了解職能治療師如何在校園中協助有自殺意念、自殺企圖或自我傷害行為之學生
3. 參與者可了解「安全計畫」的步驟與內容，並可實際應用於臨床服務，以減少學生之重複自我傷害行為

四、教學方式：

1. 講述法：講者將透過投影片建立參與者對自傷與自殺的基本了解並釐清常見的自殺迷思，並了解澳洲針對自殺企圖學生重返校園之處遇建議。
2. 角色演練：參與者將在工作坊演練如何運用安全計畫的步驟與指導語，並以個案討論的方式，規劃職能治療師如何採取行動來因應相關需求的學生。
3. 團體討論：參與者將在工作坊中與其他參與者進行團體討論，分享職能治療師在校園中參與自殺防治之優勢及可預見之困難。

五、實務運用意義：

校園自殺防治是一項重要的議題，職能治療師在臨床服務中有機會可以提供相關需求學生服務，以共同提升學生的心理健康，然而美國一項研究也指出職能治療師在自殺處遇面對一些障礙，包含缺乏相關訓練以及提供服務之信心。透過參與本工作坊，參與者可增加自殺及自我傷害議題的正確知識，並了解如何運用自身專業與校園中其他相關人員共同合作的具體方向，包含如何透過傾聽、同理並邀請學生共同參與制定安全計畫，以及如何協助校園相關人員共同規劃學生在校園中的合理調整。透過提升職能治療臨床人員的知識與信心，將有助於減少學生的自我傷害行為，並有助於促進其持續接受心理健康服務。

六、講者簡要自傳：

1. 講者（黃意婷）

美國波士頓大學復健科學博士班畢業，現任國立成功大學醫學院職能治療學系專任助理教授。講者自 2010 年起擔任職能治療師，曾在醫院、養護機構、診所及學校提供臨床服務，曾任國立台灣大學公衛學院健康行為與社區科學研究所博士後研究員(2020-2023)及國家實驗研究院科技政策研究與資訊中心專案助理研究員(2020)，並曾受邀至多所大專院校及臨床單位演講。

講者之研究領域聚焦於身心障礙者及照顧者之心理健康，透過質性研究深入探討障礙經驗、親職經驗及自我傷害及自殺經驗，並發展以實證為基礎之介入計畫。目前執行之研究計畫包含「自閉症者自我傷害經驗」、「透過共同設計發展簡短介入以減少重複自傷並評估可行性」以及「遲緩兒童家庭照顧者遠距心理健康介入照護」等。

2. 講者（鄭淑心）

台灣大學職能治療學系畢業，臺師大特殊教育研究所碩士，曾任台北市立療養院(現聯醫松德院區)精神科急性病房、兒童青少年日間病房「又一

村」、兒童精神科早療職能治療師。為台灣職能治療學會第一屆學校系統職能治療專業人員培訓結業，並於民國 91 年起專任台北市立啟聰學校學校系統職能治療師至今，期間持續兼任台北市高工、商職以及國中小、幼兒園等校特教相關專業巡迴職能治療師。民國 111 年參與編製「教育部校園心理精神健康促進與自殺防治手冊」教師篇第四章「校園中特殊需求學生之心理健康」、112 及 113 年教育部校園心理精神健康促進與自殺防治手冊推廣行動方案推廣工作計畫團隊，113 年參與國家衛生研究院「建構兒少自殺防治校園體制之行動綱領與方案」，多年來於心理疾病領域職能治療、學校系統、特殊教育、校園自殺防治心理健康領域持續投注心力。

現任臺灣職能治療學會兒童諮詢小組委員、自殺議題小組召集人、台灣憂鬱症防治協會教育推廣委員會委員以及公益廣播 Stars Radio「聽見你說愛我」製播人。

3. 講者（張婉嫻）

國立臺灣大學台灣大學職能治療學士畢業，國立臺灣大學職能治療學系暨研究所碩士。具高考職能治療師證書、臨床職能治療教師證書、甲類輔具評估人員、長期專業照護人員 level 1、2&3。

曾任台北市立仁愛醫院精神科職能治療師（86.09-86.12）、臺灣職能治療治療學會研究助理（85.06-86.08）、臺灣職能治療學會 監事/理事/副秘書長/第一屆 APOTS 財務委員會副主委/財務委員會主委/學術發展委員會委員、臺北縣職能治療師公會 會員服務委員會委員/資訊文宣委員會主任委員/常務理事及臺灣省職能治療師公會/理事。

現職為衛生福利部臺北醫院復健科技術長、臺灣職能治療學會副秘書長/專案管理委員會委員/新北市學校系統服務專案負責人/督導、臺灣視覺復健專業服務協會理事及新北市職能治療師公會常務監事

4. 講者（游荃安）

長庚大學職能治療學系畢業，現為草本職能治療所職能治療師兼負責人，同時服務於多個兒童與青少年社區領域：臺北市學校系統、臺北市家暴暨性侵害防治中心到宅親職賦能專業人員、臺北市自閉症家長協會生活自立方案生活輔導員。

5. 講者（吳沛蓉）

畢業於高雄醫學大學職能治療學系，現任職於高雄市立凱旋醫院職能治療師。講者自 2010 年起擔任職能治療師，曾在各醫學中心、精神專科醫院提供身心障礙者住院、居家或社區服務。

6. 講者（劉浩瑄）

畢業於長庚大學臨床行為科學研究所 行為科學與職能治療學組碩士班，現為新竹地區不同場域（主要服務於學校系統、日照中心、輔具中心等）之特約職能治療師，並擔任政府相關委員會委員、機構外聘督導以及自閉症協會顧問。講者為部定大學講師，曾多年於大學授課，亦曾任職於醫院、

發展中心、養護機構、治療所。講者實務經驗為協助校園中有需求之莘莘學子進行適應體育課程規劃、相關學習型輔具和運動輔具評估與建議、校園無障礙環境之規劃與建議，期待能透過跨專業團隊合作的模式，與普通教師、特殊教育教師和輔導教師合作，將專業團隊建議策略與各領域課程融合，解決教學現場面臨的困境，並齊心戮力推動校園心理健康。

關鍵詞：自殺、自我傷害、自殺防治、校園、安全計畫、心理健康

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【工作坊 A2】

搭起適應體育合作的橋樑：職能治療在校園中的角色與功能

Building a bridge to adapted physical education cooperation : The role and function of occupational therapist in school.

作者群：

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⁶ 高雄市立凱旋醫院

一、標題：搭起適應體育合作的橋樑：職能治療在校園中的角色與功能

Building a bridge to adapted physical education cooperation : The role and function of occupational therapist in school.

二、內容簡介：

校園中的體育課程是引導特殊需求學生建立運動習慣的最佳媒介，不但可以改善動作協調能力，更能降低身體活動量不足所帶來的肥胖與衍生的慢性病。由於特殊需求學生的在參與體能活動時，其本身的動作執行與認知能力表現的個別需求差異性大，無法安全及成功地參與一般體育活動中毫無限制之劇烈活動，為能達到身體活動與促進身心健康的需求，學校應視教育需求提供適應體育服務。

學校特教老師以及體育老師在提供適應體育服務時可以與職能治療師進行課程合作，透過跨專業團隊合作的模式，共同依照學生之體育需求以適性教學與個別化教育計畫兩個重要準則來設計課程內容，讓學生參與經合理調整、專為設計之體育課程，學習動作技能來達到身體和動作適能以滿足個體的獨特需求，進而促進身心方面的全人健康。

三、主要學習目標：

1. 參與者可以初步了解在進行適應體育課程之跨專業團隊合作時所扮演的

角色與功能。

2. 參與者可學習將適應體育設計基本概念與融入式建議應用於不同特殊需求之服務對象。

3. 參與者可初步了解在各個學習階段體育課程的處遇原則。

四、教學方式:

1. 直接教學法：講者將透過投影片呈現講授內容，建立參與者對於適應體育基本的概念和教學現場的處遇。

2. 小組討論：講者在課前研擬各種主題課程與教學內容以及教學目標，採目標導向的小組分組討論方式，以分享觀點或尋求共同意見為目標，引導參與者從討論中形成共識。

五、實務運用意義：

透過目標導向評估學生於體育課程參與的實際情況以了解特殊需求後，能與特教老師和體育老師共同擬定體育課程個別化的教育計畫，將職能治療服務融入教學中，分工合作執行教學活動，協助老師們能正確地執行這些活動，並隨時監控與彈性調整建議策略，最後能共同評量學生學習成效。

六、講者簡要自傳：

1. 劉浩瑄

現職：學校系統特約職能治療師

2. 張婉嫻

學歷：臺灣大學職能治療系碩士

現職：

(1) 衛生福利部臺北醫院復健科技術長

(2) 臺灣職能治療學會副秘書長

(3) 臺灣職能治療學會/專案管理委員會委員/新北市學校系統服務專案負責人/督導

(4) 臺灣視覺復健專業服務協會理事

(5) 醫院評鑑及教學醫院評鑑儲備評鑑委員

(6) 兒童職能治療 EPAs 撰寫專家及專家會議成員

3. 鄭淑心

現職：台北啟聰學校

4. 黃意婷

現職：國立成功大學職能治療學系

5. 游荃安

現職：草本職能治療所

6. 吳沛蓉

現職：高雄市立凱旋醫院

關鍵詞：適應體育、職能治療

通訊作者：劉浩瑄

【工作坊 A3】

以符合實證職能科學，並以職能為基礎的介入，提升過動傾向兒童、青少年的職能表現與生活適應

作者群：

彭靖庭¹ 賴迎盈¹ 徐再偉²

¹以撒兒童青少年中心

²得力生活有限公司

一、標題：以符合實證職能科學，並以職能為基礎的介入，提升過動傾向兒童、青少年的職能表現與生活適應

二、內容簡介：

2023年10月衛生福利部指出台灣ADHD盛行率為9.02%，僅只有1%的人接受完整介入，職能治療專業對此議題應積極回應，而在學校系統以及社區自費職能科學實務近20年的經驗中，深刻體認當以實證職能科學、運用以職能為基礎的介入（我使用了人類職能模式MOHO，參考架構是促進社會參與FOR），聚焦在孩子職能情境的參與，引導孩子表達真實的感受、想法、興趣，找出日常生活的意義與改變的動機後，職能治療師可以大幅提升孩子的職能參與並發展職能角色。例如在學校上課注意力無法集中，可以從環境考量，例如座位的安排、安裝窗簾減少可能的干擾物；或是運用多感官學習模式，例如玩橡皮擦、搖晃腳。

例如在發展人際關係中，先藉由有意義的使用自己，和孩子建構正向治療性關係後，使用遊戲團體，依據內在動機，提升職能技巧，例如模仿學習同儕，放鬆後自我察覺、情緒調節、人際互動技巧，並且在團體中經歷正向的經驗，促使在其他情境中使用所學技巧，提升在環境中的職能參與及表現，達成孩子對職能角色的期待。

三、教學方式：

(1) 案例教學

(2) 小組討論

四、實務運用意義：

在ADHD盛行率9.02%，而只有1%接受完整服務的台灣，職能治療師應積極回應，以符合實證職能科學並以職能為基礎的介入下，必能大幅改善孩子們的職能表現，進而提升孩子與家長的生活品質！期待有一天，各年齡層的ADHD國人，都能因職能治療師的介入，體認自己不僅擁有選擇各項職能生活的權利，並透過職能專業的輔助，亦可在各項職能生活中展現無限可能，落實職能正義，經歷平和、喜樂且富含意義的人生。

五、講者簡要自傳

1. 彭靖庭

學歷：中山醫學大學職能治療學系畢業

現職：

- (1) 以撒兒青中心職能治療督導
- (2) 學校巡迴輔導職能治療師
- (3) 仁愛基金會職能治療師

2. 賴迎盈

學歷：中山醫學大學職能治療系畢業

現職：

- (1) 以撒兒青中心職能治療專業部主任
- (2) 法務部矯正屬誠正中學職能治療師衛生福利部少年之家職能治療師
- (3) 新竹縣市學校系統職能治療師

3. 徐再偉

學歷：中山學大學職能治療學系畢業

現職：

- (1) 得力生活專業團隊推廣部主任
- (2) 清華大學特聘職能治療師
- (3) 職能治療社區指導教師
- (4) 學會認證最高級別職能治療師 OT4

關鍵詞：職能治療 兒童青少年 過動

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【工作坊 A4】

以職能正義探索臨床困境的縫隙

作者群：

馬慧英¹ 謝筑恩¹

¹ 國立成功大學職能治療系

一、標題：我的個案也有職能不正義嗎？從「無障礙特權」談起

二、內容簡介：職能正義的概念日益受到重視，是職能治療專業工作者關心的範疇之一。要理解職能正義，可以先從覺察「職能不正義」開始。本工作坊將藉由團體活動，讓參與者覺察己身所處社會中所享有的無障礙特權，進而反思身心障礙者與自己所遭受的職能不正義。最後經由分享與討論，探索發生職能不正義的可能原因，與嘗試思考如何改變或鬆動職能不正義的現象。

三、主要學習目標：

1. 瞭解職能權利/正義的意義以及職能不正義的類型
2. 從覺察己身特權，反思弱勢族群所遭受的職能不正義現象

3. 探索發生職能不正義的可能原因以思考職能正義為導向的可能介入方向
四、教學方式：

1. 講授
2. 小組活動討論、分享

五、實務運用意義：此工作坊將提供治療師以職能正義的角度重新審視自己的實務工作。除了根據醫療模式去致力於改善個案的缺損外，另外可從社會／人權模式而以社會環境、文化、制度的多元角度認識個案所遭遇的職能不正義現象，並進而思考以正義為導向的職能治療介入辦法。

六、講者簡要自傳：

1. 講者馬慧英為國立成功大學職能治療學系教授，美國職能治療研究院終身職院士(2019)。自 2021 年的國科會醫學教育計畫開始發展職能正義相關課程與工作坊。

七、備註：

1. 此工作坊為國科會醫教研究計畫之一部分，故會於課後進行問卷調查瞭解課程效益，作為日後改進依據。
2. 課程參與人數：至多 30 人

關鍵詞：多元平等與共融 (ED&I)、醫學教育、職能正義、障礙模式、健全主義

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口 頭 發 表 摘 要

口頭報告場次 A (全英文發表場次) / Oral Session A (English session)

【場次 A1】

柏格平衡量表應用於嚴重精神病患之信度與效度

Reliability and validity of the berg balance scale in patients with severe mental illness

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Objective: The Berg balance scale (BBS) has become a standard indicator to measure balance and fall risk in older adults. However, few studies explored the association among the BBS, falls and the patients with severe mental illness, especially in schizophrenia. This study aimed to validate the BBS for assessing balance abilities in patients with severe mental illness, focusing on its reliability (internal consistency) and validity (convergent validity and known-group validity).

Methods: Sixty-one patients with chronic schizophrenia in psychiatric hospital in Taiwan were recruited. The balance performances were assessed using three measures: the BBS, the Timed Up and Go test, and the Mini-Mental State Examination. The internal consistency and validity of the BBS were examined.

Results: The BBS demonstrated satisfactory internal consistency among patients with chronic schizophrenia (Cronbach's $\alpha = 0.72$). The BBS scores exhibited a moderate negative correlation with patient age ($r = -0.40$) and a strong moderate correlation with the Timed Up and Go test results ($r = -0.66$). Furthermore, the BBS scores effectively differentiated patients with a history of falls.

Conclusion: The finding of this study support the reliability and validity of the BBS in assessing balance abilities among patients with chronic schizophrenia, endorsing its potential utility in clinical practice.

關鍵詞： Berg Balance scale, internal consistency, convergent validity, known-groups validity

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【場次 A2】

正念日曆於失智症個案照顧者之使用初探

Utilization of a "mindfulness calendar" in caregivers of individuals with dementia

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Introduction: With the increasing number of dementia patients, the majority of patients' caregivers experienced emotional strain, physical exhaustion, and a lack of personal time. To address these challenges, we proposed the creation and use of a customized calendar for mindfulness-based practice. Mindfulness training, an evidence-based intervention, has been proven to be effective in reducing the issues faced by dementia caregivers. Our product aimed to offer daily mindfulness exercises with professional instructions, providing needed support to caregivers of individuals with dementia. The feasibility of our mindfulness calendar was assessed.

Methods: We custom-made a two-week online calendar with mindfulness-based education materials and practice. The practice video or audio clips were demonstrated or guided by certified mindfulness-based stress reduction program instructors, who were also healthcare professionals including an occupational therapist and a nurse. To maximize exposure, our study made use of a variety of platforms, including caregiver-focused Facebook groups and LINE chat groups. By filling out an online Google form, the participants agreed to receive information regarding our calendar via emails or social media groups and to use the calendar daily for at least two weeks. The participants engaged in daily mindfulness exercises by viewing instructional videos on YouTube. Individuals' feedback regarding usage and level of satisfaction was collected through online Google forms. The participants reported daily to our project team members whether they completed the practice materials. They were also invited to fill out a feedback form once a week online.

Results: Out of the 96 individuals who participated in our program, all of them showed high satisfaction with our program. The results showed that after engaging in the mindfulness program for 2 weeks, the participants reported that they "feel calmer," "more relaxed," "experienced reduced level of stress" and "increased level of self-awareness," as compared to their status before attending the program.

Discussion: In conclusion, it is feasible to provide mindfulness exercise to caregivers of individuals with dementia through our mindfulness calendar. Future work is encouraged to systematically examine the effect of our mindfulness calendar in improving caregivers' emotional wellbeing and stress levels. We also plan to promote the use of the mindfulness calendar among caregivers of clients with chronic diseases through online platforms.

關鍵詞： mindfulness calendar, caregivers, dementia

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【場次 A3】

Exploring the Relationship between Cognition and Frailty Among Individuals with Mental Illness

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Objective: Individuals with mental illness often experience physical frailty due to factors such as psychiatric symptoms, aging, and lifestyle. This can lead to an increased incidence of falls, impacting daily life functioning and quality of life. Past research has indicated that individuals with physical frailty tend to have higher rates of cognitive impairments and declining cognition, and vice versa. Therefore, the aim of this study is to explore the relationship between cognition and frailty among individuals with mental illness.

Methods: This study employed a cross-sectional research design and recruited participants from a

psychiatric hospital in northern Taiwan. Cognitive function was assessed using the Allen Cognitive Level Test (ACLS), while frailty was evaluated using the Fried Frailty Index. Frailty assessments included grip strength testing, the Time Up and Go test (TUG), administration of the Center for Epidemiologic Studies Depression Scale (CES-D), evaluation of physical activity levels, and assessment of unintentional weight loss over the past year. The relationships between variables were analyzed using chi-square tests and ANOVA.

Results: Data were collected in 2023, with a total of 390 cases analyzed. The average age was 48 years, with males comprising 50.3% of the sample. Schizophrenia was the most common diagnosis, accounting for approximately 92.4% of cases. Most participants (44%) scored at level 4 on the ACLS. Among them, 24% met frailty criteria, while 60% were classified as pre-frail. Moderate correlations were found between cognitive level and frailty ($r = 0.48, p < 0.05$), as well as between cognitive level and activity level ($r = 0.46, p < 0.05$), with significant differences. Grip strength and walking speed showed a small significant relationship with cognitive level ($F = 4.17; 3.07; p < 0.05$). However, weight loss and depression levels were not significantly correlated with cognitive function.

Conclusions: The results of this study provide valuable insights into the association between cognition and frailty among individuals with mental illness, particularly those diagnosed with schizophrenia. The moderate correlation observed suggests that a decline in cognition may increase the risk of frailty, indicating a potential interrelationship between these two domains. Additionally, cognitive level was significantly associated with grip strength, walking speed, and activity levels. However, weight loss and depression levels did not exhibit significant correlations with cognition. Furthermore, the findings underscore the prevalence of frailty among individuals with mental illness. These results emphasize the importance of comprehensive assessments and interventions targeting both cognitive and frailty domains to enhance outcomes and quality of life for individuals with mental illness. Further research is warranted to explore these relationships in greater depth and develop tailored interventions to address the complex interplay between cognition and frailty in this population.

關鍵詞： mental illness, schizophrenia, cognition, frailty

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【場次 A4】

Impact of Work Training on Walking Speed of Inpatients with Mental Illness: A One-Year Follow-Up Study

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Objective: Walking speed is one of the indicators of frailty. Individuals with mental illness often demonstrate reduced walking speed and are prone to early onset of frailty. The aim of this study is to track changes in walking speed among inpatients with mental illness participating in work training or occupational therapy (OT) activities over the course of one year.

Methods: Participants were recruited from a psychiatric hospital in northern Taiwan. The Time Up and Go test (TUG) was used to assess walking speed at pre-test (T1) and one year later at post-test (T2). A TUG score exceeding 10 seconds was considered indicative of frailty. Generalized estimating equations (GEE) were employed to analyze the change in walking speed.

Results: Fifty-six patients were enrolled in this study. Among them, 44 participants received OT (G1), 9 participants attended assembly and subcontracting (G2), and 3 participants underwent training for cart pushing (G3). According to the TUG score at T1, 2.3% of participants in G1 were classified as frail, while there were no frail participants in G2 and G3. After one year at T2, the percentage of frail participants increased to 9.1% in G1. However, there were still no frail participants in G2 and G3. The changes in frailty prevalence did not reach significant differences among the groups based on participant numbers. Nevertheless, a significant difference was observed at T2 in the TUG score between the G1 and G3 groups ($p = .003$).

Conclusions: This study aimed to monitor changes in walking speed among inpatients with mental illness engaging in work training or OT activities over a one-year period. While there was an observed increase in frailty prevalence in the G1 group, statistical analysis did not indicate significant differences compared to the other groups. This suggests that while participation in work training or OT activities may have some impact on walking speed among individuals with mental illness, this effect may be limited or influenced by other unaccounted factors. Further research is warranted to explore these factors and develop more effective interventions to enhance walking speed and function in individuals with mental illness.

關鍵詞： mental illness, work training, walking speed, frailty, one-year follow-up

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【場次 A5】

Mediators in the association between long COVID symptoms and quality of life among Taiwanese people with mental illness

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Background/objectives: Although it was announced that COVID-19 is not a pandemic by the World Health Organization in 2023, its impacts on health remain. One of the examples is the long COVID symptoms. Long COVID symptoms are experienced by people infected with COVID-19 and still experiencing its symptom(s) “three months” after infection. These symptoms have impacts on people’s health, including their quality of life (QoL). However, whether any factors could mediate the pathways between long COVID symptoms and QoL are not fully known, especially for vulnerable population (e.g., people with mental illness in the present study). Therefore, we aimed to examine if sleep quality, psychological distress, and self-stigma are potential mediators in the associations between long COVID symptoms and QoL.

Method: People with mental illness (PWMI) from one psychiatric center in southern Taiwan were the target participants, and 333 PWMI (204 [61.3%] males; mean age 48 years) agreed to participate by providing written informed consent. All the PWMI completed the following measures: Pittsburgh Sleep Quality Index (assessing sleep quality), Depression, Anxiety, Stress Scale-21 (assessing psychological distress), Self-Stigma Scale-Short (assessing self-stigma), and World Health Organization Quality of Life

Questionnaire-brief version (assessing QoL). PWMI completed these measures under the supervision of a well-trained research assistant in a quiet room without disturbance. Their long COVID symptoms were checked via their medical records with verification by a physician in the psychiatric center who is in charge of COVID-related diagnoses and treatments.

Results: PWMI who had long COVID symptoms did not have significantly different scores in self-stigma, social QoL, and environment QoL when comparing to their counterparts without long COVID symptoms. However, PWMI who had long COVID symptoms had significantly higher psychological distress (15.8 vs. 12.2; $p=0.03$), poorer physical QoL (12.9 vs. 13.8; $p=0.01$), and worse psychological QoL (11.8 vs. 12.8; $p=0.02$) than their counterparts without long COVID symptoms. Significant relationships were found between sleep quality, psychological distress, self-stigma, and QoL. Moreover, sleep quality and psychological distress were found to be significant mediators in the association between long COVID symptoms and QoL in this PWMI sample; however, self-stigma was not.

Conclusion: Because the present study found that sleep quality and psychological distress mediated the association between long COVID symptoms and QoL, healthcare providers may want to pay attention to sleep quality and psychological distress when a PWMI has long COVID symptoms. In other words, pathways between long COVID symptoms and QoL could be connected via sleep quality and psychological distress for PWMI. These findings suggest potential care programs for healthcare providers when taking care of PWMI with long COVID symptoms. That is, sleep improvement program or psychological distress intervention program could be implemented for PWMI who have long COVID symptoms.

關鍵詞： mental illness; long COVID; quality of life

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【場次 A6】

Evaluating Students' Experience in Applying Model of Human Occupation in Acute Care Settings through Actor-Based Case Simulations

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Occupational therapists in hospital settings play a crucial role in supporting patient rehabilitation and ensuring safe discharge. Research shows that occupational therapy in acute care reduces hospital readmissions and the incidence of hospital-acquired injuries like DVT and falls (Rogers et al., 2017 & Edelstein et al., 2022). Despite the benefits of occupation-based interventions (Wall et al., 2023; Clarke et al., 2018), novice therapists often resort to an impairment-based approach due to challenges in implementing occupation-based intervention. Many occupation-centered models, such as the Model of Human Occupation, can assist newly qualified occupational therapists in maintaining an occupation-focused and occupation-based approach (Kielhofner, 2008; Taylor et al., 2023). However, students and novice clinicians frequently struggle to apply theoretical models in clinical settings.

Simulation sessions with case studies have proven effective in enhancing students' learning and boosting their confidence during placements and clinical practice (Bennett et al., 2017; Walls et al., 2018). At London South Bank University, occupational therapy theory is introduced in the first year of the program.

To enhance students' confidence and knowledge, actor-based case simulation of acute care practical sessions was introduced. This study aims to explore occupational therapy students' experiences engaging in actor-based case simulations while applying the Model of Human Occupation in acute care settings. A mixed-method retrospective cohort design was utilized. Thirty students completed both the lecture and practical sessions, with twenty-four consenting to participate in this study by completing an anonymous online survey about their learning experiences. Results indicate that students had overall positive experiences with the actor-based case simulation sessions, reporting that the sessions enhanced their clinical skills for developing occupation-based interventions in acute care settings. The sessions also strengthened students' understanding of each component of the Model of Human Occupation and its application in occupation-based interventions. Additionally, students reported improvements in their confidence in communication and interpersonal skills with future patients during clinical placements and future practice.

The study results suggest that occupational therapy educators should consider incorporating practical-based theory in their program to create advanced learning opportunities. These courses can help students develop occupation-based interventions in acute care settings based on a theoretical foundation, while also enhancing their confidence in future clinical practice.

關鍵詞：Model of human occupation; acute care; education

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生物力學場次/Biomechanics Session

【場次 B1】

有無跌倒經驗老年人在擾動下的姿勢控制差異

Postural Control Differences in the Elderly with and without Fall Experience under a Continuous and Unexpected Perturbation

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Standing balance is crucial for daily activities, and its maintenance may decline with age, significantly impacting functional performance. Aging is a critical factor influencing daily life functions, and an inadequate motor control response to unexpected perturbations may lead to falls. Falls are increasingly common among the elderly, making it important to study their related issues to enhance quality of life and reduce healthcare costs. Many studies have used perturbation designs to investigate postural stability components, but most have focused on single movements of the support surface. To simulate real-life conditions, perturbations should be continuous and multidirectional. However, there is a lack of studies examining responses to this type of perturbation, especially for elderly individuals with or without a history of falls.

In this study, we designed a novel, continuous, and unexpected perturbation to simulate real-life scenarios, such as standing on a moving bus when it suddenly brakes. The study aimed to compare motor control responses between elderly non-fallers (without fall experience) and fallers (with fall experience) and to identify factors influencing these responses and bilateral symmetry patterns under perturbation. We

recruited 25 healthy community-dwelling volunteers, divided into two groups based on fall history. Pre-perturbation assessments included the Berg Balance Scale, Functional Reach Test, and isokinetic muscle strength testing.

The perturbation protocol involved four sequential intervals: slip forward, pitch downward, pitch upward, and re-stabilization, using a Stewart platform. Participants stood barefoot on the movable platform, with only the first perturbation analyzed to avoid habituation effects. Data collected included muscle activation, kinematic information of the center of mass (COM) trajectory, and joint rotation. Variables measured were EMG onset and offset times, muscle firing and shut-down sequences, EMG root-mean squared values, COM displacement in anteroposterior, mediolateral, and vertical directions, COM deviations at distinct points, and time-to-peak values for anteroposterior movement, joint angles at distinctive COM points, joint mean angular excursion, and peak rotation angles.

Results showed that both groups exhibited similar balance correction patterns, but the elderly fallers had larger sway amplitudes, especially during re-stabilization. Fallers displayed abnormal medial gastrocnemius activity, excessive ankle dorsiflexion, insufficient plantarflexion, increased hip and knee flexion, and excessive pelvic tilts. They also had delayed responses, weaker muscle power, and reduced torque resistance, affecting motor control. Fallers required more rectus femoris activation to generate larger hip flexion in response to perturbations, with asymmetry patterns observed in both groups. This novel perturbation design could offer a realistic simulation, identifying specific balance correction responses that differentiate motor control among community-dwelling individuals. The findings provided a valuable reference for designing interventions for daily activities, especially for elderly individuals with or without a history of falls.

關鍵詞： Postural Control, Elderly, Fall, Perturbation

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【場次 B2】

疲勞對於書寫力學以及手指捏力的影響

The Impact of Fatigue on Handwriting Mechanics and Finger Pinch Strength

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Purpose: This study aimed to explore the impact of fatigue on handwriting mechanics and finger strength.

Method: Ten participants (average age 26.0, SD = 4.1) were recruited. Fatigue was induced by a 15-minute task of copying traditional Chinese characters. Pre- and post-fatigue tests measured handwriting mechanics and finger strength using the Force Acquisition Pen for continuous writing of Arabic numerals and a B&L pinch gauge for various pinch strengths. The Wilcoxon signed-rank test analyzed differences before and after fatigue.

Results: Significant differences were observed in palmar pinch ($p = .047$) and tip pinch (thumb and

middle finger) ($p = .0017$). Tip pinch (thumb and middle finger) strength decreased by 11.2%, which is higher than the decrease in other pinch strengths (7.4%-9.7%). Handwriting tasks showed a general decrease in High Peak Force (HPF), Average Force (AF), and writing time, with an increase in the Force Ratio (pen tip force/total three-finger force). Variability in force and force fluctuation per second showed no significant trends. Force reductions varied across fingers: HPF_thumb (8.7%-19.0%), HPF_index (8.5%-19.3%), HPF_middle (15.7%-33.0%), HPF_pen tip (0.2%-7.8%), AF_thumb (10.6%-22.5%), AF_index (10.0%-23.7%), AF_middle (13.1%-31.5%), and AF_pen tip (0.2%-7.0%).

Conclusion: Following fatigue, there was a decrease in overall force and writing time, accompanied by an increase in the Force Ratio. Middle finger force reduction was notably higher, indicating a significant impact from prolonged writing on middle finger strength. Further research should focus on the middle finger's role in handwriting.

關鍵詞：Fatigue; Writing kinetics; pinch strength

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【場次 B3】

學齡孩童書寫困難之風險預測

Risk of handwriting difficulties in school-aged children

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前言:書寫困難對於學童的在校表現及心理社會功能有長期影響，故本研究開發平板電腦化中文書寫評估系統 (Tablet-based Evaluation of Chinese Handwriting, TECH)，探討書寫表現之歷程 (handwriting process) 及成品 (handwriting product) 作為書寫困難的預測因子。

方法:本研究共納入 116 位低年級普通班學童，以市售評估工具兒童寫字表現評量表 (Chinese Handwriting Evaluation Form, CHEF) 篩檢有無書寫困難。此外，受試者使用 TECH 系統進行近端抄寫。TECH 系統考量中文圖像特性，以影像處理技術計算字跡與模板間的差異，量化學童的字體工整度作為書寫成品的量測指標。TECH 系統同時紀錄觸控筆實際接觸平板時之表面動作與筆尖掠過空中時之空中動作，包含筆跡中斷時間、筆跡停滯時間、筆畫速度、空中動作相對表面動作耗時之比例，以及空中動作相對表面動作路徑長度之比例，作為書寫歷程量測指標。本研究以逐步邏輯迴歸 (Stepwise logistic regression) 建立書寫困難預測模式。

結果與討論:結果顯示，字體工整度與筆跡停滯時間為書寫困難的關鍵預測因子 ($p < .05$)。字體較不工整以及筆跡停滯時間較長可能增加 2~14 倍書寫困難風險。字體工整度反映學童抄寫時的字體結構問題；筆跡停滯時間則代表抄寫的動作流暢度，兩者共同影響書寫困難之風險。TECH 系統可客觀且多元地評估台灣學童的書寫表現，可助於補充臨床評估，篩檢書寫困難的學童。

關鍵詞：書寫、學齡兒童、預測因子

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【場次 B4】

Characterizing intensity of upper extremity rehabilitation after stroke using a novel wearable wrist sensor

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Background: Wrist-worn accelerometers have been used to measure the intensity of upper extremity practice, but their primary focus is on general arm usage, lacking the ability to capture reach and grasping of the hand that are relevant for rehabilitation.

Purpose: We aim to explore the potential of a novel wrist-worn sensor as a meaningful measure for characterizing the intensity of reach and grasping during a structured upper extremity exercise session for stroke.

Study Design: This was a cross-sectional study.

Methods: Fourteen individuals with stroke wore sensor devices (TENZR) on both wrists while performing a structured upper extremity exercise program comprising of 35 tasks. Counts recorded from observation (observed reach and grasp repetitions) and counts from the sensor device (sensor counts) were compared to quantify the intensity of functional hand activities.

Results: The participants performed 792 observed reach and grasp repetitions, with corresponding 711 and 465 sensor counts for the paretic hand and non-paretic hand, respectively over the hour practice session. The sensor device and the observational method might measure UE movement differently, as evidenced by a lack of relationship between observed repetitions and sensor counts in the paretic hand. Furthermore, the paretic hand sensor counts were significantly higher than the non-paretic hand sensor counts.

Conclusions: This study illustrated the feasibility of using the TENZR device to quantify reaching and grasping practice and characterize individual participation pattern for both paretic and non-paretic hands in stroke rehabilitation. In the future, this sensor device could expand to home-based rehabilitation and telehealth services, enabling objective monitoring and tracking of UE training progress.

關鍵詞： Stroke, upper extremity, rehabilitation, wearable sensor, grasp, TENZR

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口頭報告場次 C (全英文發表場次) / Oral Session C (English session)

【場次 C1】

運用設計思考改善外科病房副木製作時間

Application of the Design Thinking for Improving the Splinting Fabrication Time of Surgical Ward

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目的：副木為低溫熱塑性材質，職能治療師可依據個案不同的需求以及肢體狀態直接塑形，副木相較於石膏的優點是重量輕、穿脫方便、透氣性高，擁有良好支撐和保護效果。穿著副木目的為(1)保護或支撐關節與軟組織、(2)提供擺位，預防或矯正變形以及(3)協助或代替受損的肌肉的功能以執行活動。本實務分享透過設計思考擬定策略，改善外科病房副木製作所需時間，作為職能治療計畫參考。

方法：改善前數據收集時間自 112 年 8 月 1 日至 112 年 9 月 30 日止，收集外科病房轉介復健科副

木製作的所需時間，期間副木製作所需時間平均為 52.76 分鐘。分析副木製作所需時間長的原因為：(1)固定帶現場製作，(2)量測尺寸繪出紙型，(3)躺姿製作擺位不易，(4)修飾邊緣及不平整處，(5)其他。運用設計思考 5 步驟：(1)同理心，(2)定義問題，(3)創意發想，(4)製作原型，(5)測試驗證，擬定出(1)固定帶歸類擺放，(2)製作多種副木版型以及(3)圖像化說明卡策略。

結果：改善中自 112 年 10 月 1 日至 113 年 11 月 30 日間，副木製作所需時間平均為 50.42 分鐘；改善後自 112 年 12 月 1 日至 113 年 1 月 31 日間，平均為 46.28 分鐘。

結論：利用設計思考擬定的策略對於外科病房轉介副木製作時間具改善之成效，此發現值得未來研究進一步深入探討。

關鍵詞：設計思考、副木製作、職能治療

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【場次 C2】

Effects of Impairment- and Task-Based Mirror Therapy in Stroke Rehabilitation: A Comparative (Literature) Review

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Background: Mirror therapy, as demonstrated by Thieme et al. (2018), is a promising adjunct to routine therapy for stroke, offering potential in stroke rehabilitation. The different protocols, i.e., mirror therapy combined with the impairment- (MT-IOT) or task-oriented approaches (MT-TOT), may yield different effects for recovery (Morkisch et al., 2019).

Objectives: Review and summarize the clinical evidence of the two different mirror therapy protocols for recovery after stroke.

Methods: We searched Pubmed/MEDLINE, Cochrane, Embase, Physiotherapy Evidence Database (PEDro), and Google Scholar (last searched July 15, 2024). We also conducted hand searches for other relevant resources. This study included randomized controlled trials for people after stroke, comparing the MT-IOT and MT-TOT or the different MT-TOTs comparison.

Results: We included four studies (Bai et al., 2019; Corning & Hildebrand, 2022; Hambir & Satralkar; Lee et al., 2020) with 114 stroke participants. Mirror therapy in the three studies was provided for 30-40 min/day, five days/week, for four weeks (1 study did not report the duration and frequency). Compared to the MT-IOT, in quality-of-life recovery, the MT-TOT may have more positive outcomes (Corning & Hildebrand, 2022). However, regarding improving motor impairment, previous research findings have been inconsistent (Bai et al., 2019; Hambir & Satralkar). Lastly, in the comparison of different MT-TOTs, i.e., complex MT-TOT using multi-joint, such as in-hand manipulation with coins, versus simple MT-TOT, such as picking up a coin, the former MT-TOT may be more effective in restoring the upper limb and activity of daily functions (Lee et al., 2020).

Conclusions: While mirror therapy is widely used in many clinics, there is still a need for more extensive sample-size studies for optimal therapy protocols for implementing this technique.

關鍵詞：stroke, mirror therapy, task-oriented approach, impairment-oriented approach

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【場次 C3】

Mirror Therapy Priming of Kinetic Exergaming in Stroke: A Randomized Controlled Trial

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Background: Mirror therapy (MT) and kinetic exergaming (e.g. augmented reality, AR) have been implemented in stroke rehabilitation. MT utilizes mirror visual feedback to promote excitability of the motor areas of the brain. AR offers a virtual context of gamified rehabilitation for sensorimotor, mobility, and cognitive recovery. MT may complement AR to improve intervention outcomes. This research aims to study the effects of AR with and without the priming of MT, relative to control intervention (CI) in patients with stroke.

Method: Thirty-nine patients with unilateral stroke were recruited and randomized to receive one of three interventions: MT-primed AR, AR, and CI. Each treatment session was 90 minutes in duration, three times a week for six weeks. The MT-primed AR group received 40 minutes of MT, 40 minutes of AR, and 10 minutes of functional practice. The AR group received AR intervention for 80 minutes and functional practice for 10 minutes. The CI group received 80 minutes of occupational therapy and 10 minutes of functional practice. Home-based program involved functional practice of personally relevant tasks for 30 minutes. Pre-test, post-test, and 3-month follow-up assessment were administered. Primary treatment endpoint included the Fugl-Meyer Assessment-Upper Extremity (FMA-UE) and Berg Balance Scale (BBS). Additional outcome measures included revised Nottingham Sensory Assessment (rNSA), Chedoke Arm and Hand Activity Inventory (CAHAI), Motor Activity Log (MAL), and Stroke Impact Scale Version 3 (SIS). Adverse response was monitored using the visual analogue scale for pain and fatigue.

Results: The MT-primed AR group improved the FMA-UE and the tactile scale of the rNSA, relative to the AR and controlled interventions. The AR group improved in the BBS significantly. AR with and without MT priming improved quality of life better than the CI group. There was no serious adverse event during the study.

Conclusion: AR with and without MT priming increased upper-extremity motor, mobility, and stroke-specific quality of life. Of note, MT-primed AR improved upper motor and tactile impairments. AR was advantageous for improving postural balance. Future research is needed to validate the findings and identify the factors predictive of treatment success.

關鍵詞：Stroke rehabilitation, Mirror therapy, Augmented reality, Gamified rehabilitation,

Randomized clinical trial

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【場次 C4】

Development and Application of a novel, environmental friendly material (Biodegradable Clay) in Rehabilitation: an alternative to traditional polycaprolactone

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Background: Splinting is a custom-made treatment for musculoskeletal injuries, providing support to immobilize injured body parts. The commonly used splinting material in Hong Kong, polycaprolactone (PCL), has high production cost, limited recycling potential, and some undesirable physical properties. To address these concerns, we have developed a new thermoplastic splinting material, Biodegradable Clay (BDC). BDC is newly developed as a safe, customizable, and recyclable splinting option. It possesses essential properties to be a splinting material while offering an economical and environmentally friendly option. BDC has improved recyclability, which allows on-site recycling. However, human application of splintage made from BDC has yet to be studied.

Objectives: The study aims to examine and compare the general applicability of BDC as a splinting material to the conventional PCL. We aim to evaluate users experience of individuals wearing splints made of PCL or BDC materials respectively, and explore the potential advantages and disadvantages of BDC over PCL in splinting applications.

Methods: In this single-blinded, crossover pilot trial, 31 healthy adults without orthopedic conditions (11 males, 20 females; aged 18-55) were randomly assigned to receive a 1-week finger splint program of either BDC or PCL, and switched to the alternative material for another 1-week splinting. User experience was collected through questionnaires upon termination of each splinting program, with preference indicated at the trial end. Additionally, changes in physical properties, i.e. pre-post splint weight and thickness, were measured to evaluate durability. Stress stability of splints, including any observed breakage or deformations, was documented. DermaLab® Combo was used to detect potential adverse skin conditions arising from splinting.

Results: The user experience evaluation showed no significant difference between BDC and PCL splints. Both BDC (mean = 4.19) and PCL (mean = 4.25) shared high mean ratings in QUEST 2.0, implying BDC is capable of delivering a comparable level of satisfaction as PCL. 42% of subjects indicated a preference for using BDC as their splinting material, which was comparable to that of PCL(45%). This preference was primarily driven by major reasons: 1) attractive appearance, 2) comfortable material texture, 3) excellent conformity to body parts 4) improved breathability.

Regarding the physical properties, no significant differences were found in both weight changes ($p = .751$) and thickness changes ($p = .613$) between PCL and BDC splints, showing that BDC exhibits similar durability to PCL as a splinting material.

Furthermore, BDC demonstrated similar changes in skin conditions compared to PCL in terms of hydration($p = .513$), elasticity($p = .102$), pigmentation($p = .508$), and vascularity of skin color($p = .657$), implying BDC is as adaptable to human skin as PCL.

Conclusion: BDC is applicable in human splintage, which possesses common desirable features of PCL in durability, stress stability, and skin adaptability, with comparable participant satisfaction and preference with PCL, showing its potential to meet the requirements and expectations as a new splinting material. While this study was conducted with healthy adults, further investigation on BDC's clinical applicability and therapists feedback involved in splint fabrication, are necessary for future improvements

on BDC material.

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關鍵詞：Biodegradable Clay, Polycaprolactone, Splinting application, Rehabilitation, Environmental friendly, Recyclability

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口頭報告場次 D/Oral Session D

【場次 D1】

精神病人日常生活功能評量表第四版之研究

A Study of the Activities of Daily Living Rating Scale-IV for Psychiatric Patients

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目的：本研究建構「日常生活功能評量表」第四版(以下簡稱「ADLRS-IV」)，旨在更新第三版評量內容，以符合現代生活功能需求。為確認評量表具有信度與效度進行本研究。

方法：研究對象取自某精神科專科醫院及精神復健機構共計 182 名，一般正常人 60 名。效度分析：(1)專家內容效度：在實施收案之前，於 2022 年 7 月至 9 月先邀請精神科資深專家 16 人進行「ADLRS-IV」評量內容效度，包括五類專業人員，臨床年資 15 年以上，專家分別評量內容及建議。再重新修改內容至少達 90% 以上專家認同為止。(2)內容效度分析：內容須符合一般正常人的日常生活功能，其平均得分至少達 80% 通過難度考驗，才能達內容效度。(3)區別效度分析：

「ADLRS-IV」可以分辨精神病人的日常生活功能有減退狀況，以具有區別效度。(4)關聯效度分析：採用「ADLRS-III」做關聯效度。2. 信度分析：採用 Cronbach's Alpha 來測量工具穩定度，並分析再測信度達統計顯著意義。3. 分析人口學基本資料：各組基本資料之差異性。最後以常態分布推估量表的評量等級，作為評定日常生活功能狀況。

結果：量表再測信度($\gamma = .924$ 至 $.965$, $p < .001$)。量表內容經由 16 位資深專家評定符合內容效度，題目難度分析：正常人通過 70 分以上的難度考驗達 95%，顯示量表內容符合一般基本生活功能。精神病人通過 70 分以上的難度考驗僅有 43.4%，未通過 56.6%，顯示病人的生活功能有不同程度障礙。評量得分正常人比病人為好，顯示量表具有區別效度，可區辨病人生活功能呈現不同程度障礙。「ADLRS-IV」與第三版的相關係數達關聯效度 ($\gamma = .818$, $p < .001$)。日常生活功能表現受到教育、年齡、住院與社會隔離等因素之影響。本量表為了臨床使用鑑別力，將得分結果分為七個評量等級，正常範圍以 70 分及以上分為優、良及可 3 個等級，障礙範圍以 70 分以下分為輕、中、重及極度障礙 4 個等級，以評定受測者之障礙程度，用於擬定精神病人之治療計畫之依據。

結論：「ADLRS」已廣泛被精神醫療領域所使用，從實務的職場觀察，職業輔導評量單位也將「ADLRS」納入評量工具之一，適用其他障礙類別。「ADLRS-IV」的內容設計是符合一般正常人的生活功能範圍，故此量表也適用於各類身心障礙者，以評量其生活功能是否有障礙程度。未來研究可擴展其他障礙類別，探討其日常生活功能與其就業成功之關聯性等。

關鍵詞：日常生活功能，評量表，精神病人

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【場次 D2】

某精神專科醫院慢性住院病人下肢肌力肌耐力與動靜態平衡改變情形之 5 年世代研究

A cohort study on morbidity rate of lower-extremity muscular endurance and balance in chronic psychiatric patients of a psychiatric hospital

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目的：了解慢性住院病人 2017 年起 1 年及 5 年內之下肢肌力肌耐力與動靜態平衡之維持差率(差/很差)、維持好率(中等/好/很好)、改善率、變差率之差異情形，以研擬病房職能活動調整建議和院內防跌策略。

方法：本研究採回溯前瞻描述世代研究設計；回溯期間為 2017 年和 2018 年，前瞻期間為 2022 年，樣本醫院慢性精神病人，包含慢性病房、日間病房、護理之家及養護之家，研究對象排除無法理解體適能口語指導者及無法完成體適能檢測者。以 Excel 建檔、整理與進行描述性統計：類別變項採人數及百分率，連續性變項採平均值、標準差、最小值及最大值，先以 McNemar Test 分析下肢肌力與平衡之時段內比較如 2017 年與 2018 年(1 年)及 2017 年與 2022 年(5 年)之等級改善與變差人數差異檢定，再以分析性統計之 Proportional Test 分析下肢肌力與動靜態平衡之時段間比較，如 2017 年與 2018 年及 2017 年與 2022 年，兩個時段間之維持差比率、維持好比率、改善比率及變差比率之差異檢定。

結果：2017-2018 年樣本數為 509 至 520 人，由於 5 年期間(2017-2022 年)異動變數多，樣本數減少為 361 至 458 人。1 年和 5 年世代平均年齡範圍為 51.0±9.5 到 52.2±9.8，發病年齡範圍為 23.7±7.7(6~58)到 23.8±7.9(6~58)，罹病年齡範圍為 29.2±9.8(1~52)到 29.3±9.9(1~52)，性別以男性居多，比例占 56.9%至 61.8%，診斷以思覺失調症最高，占 89.8%至 92.0%。下肢肌力肌耐力在 1 年和 5 年之「改善」比率皆顯著高於「變差」比率(p<0.05)，為正向結果；靜態平衡則為 5 年之「改善」比率顯著高於「變差」比率(p<0.05)，也是正向結果；動態平衡則出現負向結果，5 年「變差」的比率顯著高於「改善」的比率(p<0.05)。

結論：樣本醫院自 2017 年起至 2022 年，持續推動每日 30 分鐘，每週 5 天之同儕互助自主運動，確實能有效改善精神病人下肢肌力肌耐力及靜態平衡。但對於需姿位轉換之動態平衡，病人會因年齡增加而出現變差之狀況，建議醫療團隊須精準設計能符合病人需求之實證動態平衡運動。

關鍵詞：下肢肌力肌耐力，動靜態平衡，慢性住院病人

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【場次 D3】

探討聲光療介入憂鬱症患者憂鬱情緒、心率變異與生活品質之成效

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背景: 過去研究指出透過聲光療，如雙耳節拍音樂（聲療）和節律光刺激（光療），被認為可能對改善憂鬱症狀與提升生活品質有所幫助，但對其應用在有憂鬱症患者身上的效果仍不明。

目的: 本研究目的在探討結合聲療與光療介入有憂鬱症的長照機構住民，對其改善憂鬱情緒、心率變異與生活品質之成效。

方法: 本研究採隨機控制實驗研究設計，在台灣某一長照機構招募 48 位有憂鬱症的長照機構住民，分成聲光療組與對照組，並接受週一至週五每天 20 分鐘，連續 12 週的介入。介入期間，聲光療組參與者聆聽 10Hz 的聲療（嵌入放鬆音樂）與配戴提供 10Hz 的光療眼鏡；而對照組參與者則聆聽放鬆音樂，配戴光療眼鏡但並不會有 10Hz 閃光刺激。

結果: 在介入後，聲光療組參與者在憂鬱情緒有顯著改善，且副交感神經活性顯著上升。聲光療組參與者比起對照組參與者，在自律神經系統平衡有顯著進步。此外，在介入結束後一個月後的追蹤，聲光療組參與者比起對照組參與者，有較佳的副交感神經活性、自律神經系統平衡與生活品質。

結論: 在為期 12 週的介入，結果顯示結合聲療與光療作為一種非侵入性的介入方式，有機會改善有憂鬱症的長照機構住民的憂鬱情緒與生活品質。

關鍵詞: 雙耳節拍音樂、節律光刺激、憂鬱

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【場次 D4】

探討居家復能中專業人員與照顧者有效合作策略：質性研究

The HOWs and WHATs of effective collaborative strategies between professionals and caregivers in home-based reablement: A qualitative study

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背景及目的: 台灣近四成長期照護個案由家庭照顧者照護，專業人員與照顧者的合作對於居家復能至關重要。本研究探討專業人員與照顧者具體的合作策略。

方法: 質性研究。邀請「長照個案同住並協助進行復能訓練的照顧者」，以及「與照顧者一起協助個案執行復能訓練的專業人員」進行半結構式問卷訪談。全程錄音並轉成逐字稿，使用 ATLAS.ti 9.0 軟體進行紮根理論譯碼程序之分析。

結果: 五縣市照顧者和專業人員各五位參與訪談，結果呈現五個合作策略：(1)現場講解實作讓照顧者易於學習。(2)透過小小成功讓照顧者有信心。(3)照顧者透過圖文影片或檢核表記住訓練內容。(4)專業人員透過現場或通訊軟體追蹤學習狀況。(5)專業人員引導照顧者使用相關資源以改善照護困難。另照顧者多自認為是監督者而非專業人員認為的助教角色。

討論與結論: 建議將外籍看護工和居家服務員視為合作對象，可減輕照顧者負擔並提高訓練效果。推薦專業人員善用如錄製影片或通訊軟體等行動健康（mobile health）設備作為溝通管道，以更有效率的方式調整和追蹤個案訓練。另外，過多的資源連結可能會使照顧者難以有效使用，建議專業人員需考量提供建議的時機，以改善實務中與照顧者的合作困境。研究結果將有助於新手專業人員快速掌握指導的技巧。

關鍵詞: 復能經驗，合作策略，講解實作，錄影，通訊軟體

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【場次 D5】

工具使用對健康成人上肢本體覺表現的影響

The impact of using tools on the upper limb proprioception performance in healthy adults

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前言：本體覺提供人運動時肢體位置的感覺資訊，使個體能透過回饋精確控制動作。研究顯示本體覺與書寫表現相關。研究亦發現用手指和使用工具（握筆）兩種情境下，進行書寫或繪畫活動的表現可能存在差異，過去常以手指進行的上肢本體覺測驗結果，可能無法概化至使用工具時的表現。因此，本研究目的旨在探討使用工具與否對本體覺表現的影響。

方法：本研究共招募 13 位大學生，運用平板化上肢本體覺測驗探討兩種情境（用手指、握觸控筆）和兩個方向（右至右上、右至左上）下的本體覺表現。受試者的反應時間、動作時間分別表示動作準備效率和速度；絕對誤差和相對誤差代表準確度；變異誤差代表穩定度，統計以二因子重複量測變異數分析進行檢定。

結果：握筆時動作速度顯著低於手指情境。兩情境中受試者皆會低估目標距離，而握筆會比用手指顯著更低估目標距離。未跨中線方向之準確度和穩定度顯著優於跨中線方向。

討論：握筆可能增加認知負荷，使得受試者傾向降低移動速度，也可能因此影響本體覺準確度，使受試者更易低估目標距離。跨中線動作具挑戰性且移動距離較長導致準確度和穩定度皆影響。本研究發現使用工具會對本體覺表現有影響。

關鍵詞：本體感覺、工具使用、成人

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口頭報告場次 E/ Oral Session E

【場次 E1】

弦樂團國小學生之工作記憶表現探討

Exploring Working Memory Performance in Elementary School Students Participating in String Orchestra

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背景：音樂在人類生活扮演重要角色。研究顯示，參與音樂活動越多，工作記憶表現可能越佳，特別是對於演奏音樂有經驗者。過去研究主要是探討音樂對語音工作記憶的影響，較少探討音樂對視覺工作記憶的影響。因此，本研究旨在比較接受弦樂演奏訓練的國小學生與未接受訓練國小學生在視覺與語音工作記憶表現上的差異。

方法：研究採用橫斷性設計，對象為國小四到六年級學生，分為弦樂團組及一般班級組，每組各 20 人，共 40 位受試者。評估包括語音和視覺空間兩種工作記憶，記錄正確率、反應時間及作答時間。研究使用二因子混合設計變異數分析探討兩組在工作記憶表現上的差異。

結果及結論：結果顯示，兩組在測驗的正確率並無差異，然而接受弦樂訓練的學生，在語音工作記憶測驗其作答時間顯著優於控制組，表示弦樂組在處理語音工作記憶時更有效率。本研究證實

了弦樂演奏訓練對工作記憶表現的正面影響，特別是在語音工作記憶方面。未來研究可進一步探討不同音樂訓練形式對工作記憶的具體影響，以增加音樂訓練對認知能力影響的理解，並提供實證基礎支持教育和音樂訓練的應用。

關鍵詞：音樂、工作記憶力、兒童

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【場次 E2】

Cognitive and Motor Profiles of Young Children with Autism Spectrum Disorder and Other Developmental Disabilities

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Background: The debate on whether different cognitive and motor profiles of children with autism spectrum disorder (ASD) indicate distinct subgroups with significant implications continues in autism research. This study aimed to determine the cognitive and motor profiles of children with ASD compared to children with other developmental disabilities. Additionally, we assessed if the cognitive abilities were linked to the motor performance of children with ASD.

Method: The Wechsler Preschool and Primary Scale of Intelligence-Fourth Edition (WPPSI-IV) and Movement Assessment Battery for Children-Second Edition (MABC-2) were used to examine cognitive and motor profiles and their relationship in 1150 young children with ASD and other developmental disabilities.

Results: Children with ASD, attention deficit hyperactivity disorder (ADHD), ASD+ADHD, and unspecified developmental delay (DD) performed significantly better than those with intellectual disability (ID), ID co-occurring ADHD, and ASD co-occurring ID on the WPPSI-IV test for cognitive abilities. Children with ASD co-occurring ID had significantly lower scores on all MABC-2 subtests compared to other groups, with 89.6% experiencing motor difficulties. There were significant links between cognitive abilities and motor skills in young children with ASD, ASD co-occurring ID, and ASD co-occurring ADHD. Working memory was an indicator of motor performance for children with ASD and ASD co-occurring ADHD, while verbal comprehension and visual spatial abilities together could explain approximately 29.2% of the variations in motor performance for children with ASD co-occurring ID.

Conclusions: These findings demonstrate different cognitive and motor profiles of young children with ASD and other developmental disabilities. The association of specific cognitive abilities with increased motor performance suggests that these abilities may index etiologically significant types of ASD and comorbidity.

關鍵詞：Autism Spectrum Disorder; Intellectual Disability; Attention Deficit/Hyperactivity Disorder; Developmental Disabilities; young children; preschool children; developmental profile; cognitive profiles; motor profiles

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【場次 E3】

遠距早療經驗及線上家長教練模式可行性研究

Research of remote early childhood intervention experience and feasibility of online parent coaching model

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研究背景和目的:教練模式是以家庭為中心的實證導向模式，促進家長問題解決能力，並且提供發展遲緩兒童療育服務的參考。本研究為調查遠距早療家長之經驗並探討家長對於實施線上教練模式的可行性。

研究方法:研究者透過自編問卷，發放電子問卷給 2 至 6 歲的发展遲緩兒童家長。問卷評量面向分別包括家長對遠距早療滿意度和家長感知線上家長教練模式可行性，以李特克氏五點量表評分，達到 4 分以上代表家長認為「滿意」和「可行」的分數，此外也有開放性問題請家長填答。本研究分析上述問卷的量性和質性資料。

研究結果:結果顯示家長對遠距早療滿意度總平均分數為 3.82 分，分數最高為：「線上課程能夠有隱私空間或是環境背景不易受干擾」、「專業人員透過視訊進行示範容易明白」、「專業人員線上進行談話順暢」。此外，線上家長教練模式之可行性總平均為 4.05 分。其中家長認為可行性最高為：「家長和專業人員線上討論(提供策略、視訊、影片示範)」，「家長可運用在生活中幫助兒童學習」；和「專業人員提供家長課後線上教材(居家練習活動、額外資源或網站)輔助學習」。

結論:整體而言，家長對遠距早療具有中等滿意度，約 6 到 8 成家長認為線上家長教練模式是可行的。

關鍵詞: 家長教練模式、遠距、可行性

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【場次 E4】

早期社交溝通量表之評分者間信度與效度驗證

Inter-scorer Reliability and Validity of the Early Social Communication Scales

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前言: 早期社交溝通量表(early social communication scales, ESCS)以結構化方式評估非語言溝通技巧，適用 8-30 個月的正常發展兒童，或語言年齡符合此區間的發展遲緩兒童，由專業人員施測、錄影評估過程和觀看影片進行編碼評分。ESCS 所需時間與費用成本較低，可於臨床進行簡易評估，然此量表的信效度證據仍不完整。

目的: 驗證早期社交溝通量表的評分者間信度、同時效度與區辨效度。

方法: 評分者間信度由兩位相同資歷的兒童職能治療師進行編碼評分，比較兩者評分之相關性。效度部分是以兩位評分者之平均值，與零至三歲華語嬰幼兒溝通級語言篩檢、文蘭適應性行為量

表第三版（中文版）、台灣版自閉症行為檢核表及自閉症類群障礙檢核表（華文版）之得分進行相關性分析。

結果：初步結果為 12 位自閉症兒童之資料分析。各項目之評分者間信度在 0.395-0.982，各項目間具有區辨效度，與零至三歲華語嬰幼兒溝通級語言篩檢、文蘭適應性行為量表第三版（中文版）、台灣版自閉症行為檢核表及自閉症類群障礙檢核表（華文版）之相關性皆不顯著。

結論：初步結果顯示早期社交溝通量表具有良好的評分者間信度與區辨效度，而同時效度尚不明朗，應蒐集更多樣本進行分析。未來可以蒐集更多樣本資料建構常模與切截分數，做為臨床篩檢或簡易評估使用。

關鍵詞：自閉症、兒童、社交溝通、量表、信度、效度

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口頭報告場次 F/Oral Session F

【場次 F1】

認知儲備與不同類型認知活動對健康長者認知成效的影響

Effects of Cognitive Reserve and Different types of Cognitive Interventions on Cognitive Outcomes in Healthy Elderly Populations

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Background: As Taiwan enters a super-aged society, cognitive reserve in healthy elderly has become an important research topic. Higher cognitive reserve enables individuals to resist cognitive decline due to pathologies, delaying disability. Understanding the effects of different types of cognitive interventions on cognitive outcomes in elderly with varying levels of cognitive reserve can assist clinicians in considering different types of cognitive interventions for individuals with different cognitive reserves.

Objective: This study aims to compare the cognitive flexibility and transfer outcomes between healthy elderly with different levels of cognitive reserve using MoCA scores when participating in cognitive engagement (Active Inference-based Tinkering) and cognitive activities (Control-Tinkering).

Methods: Participants were divided into an Active Inference-based Tinkering group (n=19, belonging to the Cognitive Engagement group) and a Control-Tinkering group (n=18, belonging to the Cognitive Activities group), further categorized into high and low cognitive reserve groups based on MoCA scores within each intervention (Kang et al., 2018). Effectiveness was evaluated using ERP and behavioral assessment tools. ERP assessments included Task-Set Activation (P2), Working Memory Allocation (P3b), and Frontal reliance on working memory allocation (P3b Fz: Pz Asymmetry). Transfer outcomes included Divergent Thinking, Convergent Thinking, Executive Function, and Attention. Data were analyzed using the Kruskal-Wallis test and the Wilcoxon signed ranked test.

Findings: Participants with low cognitive reserve in the cognitive engagement group showed significant improvements in divergent thinking, executive functions, and task-set activation. High cognitive reserve participants in the Cognitive Engagement group exhibited significant improvements in convergent thinking, divergent thinking, and working memory allocation, as well as reducing reliance on frontal lobe resources for working memory allocation. Low cognitive reserve participants in the Cognitive Activities

group demonstrated significant improvements in executive function, while high cognitive reserve participants in the Cognitive Activities group showed significant improvements in divergent thinking and sustained attention. Between-group comparisons revealed that high cognitive reserve participants in the Cognitive Engagement group showed significantly greater improvements in RAT (Convergent Thinking) scores compared to low cognitive reserve participants in the Cognitive Engagement group. Low cognitive reserve participants in the Cognitive Engagement group showed significant improvements in task-set activation compared to high cognitive reserve participants in the Cognitive Activities group.

Conclusion: This study found that both low and high-cognitive reserve individuals exhibited broader transfer effects after participating in the Cognitive Engagement group compared to the Cognitive Activities group. Additionally, among healthy elderly participating in Cognitive Engagement activities, those with high cognitive reserve demonstrated significant transfer effects in convergent thinking. However, the study's limitations, including a relatively small sample size and higher education level, make it challenging to generalize the findings to populations with early cognitive impairment. Future research should expand the sample size and include participants with diverse cognitive reserves and educational backgrounds to develop more effective intervention strategies.

關鍵詞：Cognitive Reserve, Cognitive Engagement, Cognitive Activities, Healthy Older Adults, Cognitive Flexibility, Transfer Effects

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【場次 F2】

在失智症光譜疾患中腦電圖振盪與工具性日常生活功能缺失之相關性研究

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背景：失智症光譜疾患的生物標誌研究指出，在認知測驗出現退化的前 10 到 20 年，就可觀察到生物標誌變化。因此找到早期認知衰退的生物標誌，是失智症研究的新興領域。其中，腦電圖 (EEG) 被認為可區分不同階段失智症進程；同時證據指出工具性日常生活功能 (IADL) 可預測輕度認知障礙 (MCI) 是否會進一步惡化成失智症。因此本研究欲了解，在不同失智症進程中，EEG 與 IADL 的關聯性，並期了解 IADL 表現是否可反映 EEG 的振盪型態。

方法：我們招募了 76 名參與者，包括正常認知 (n=25)、主觀認知障礙 (SCD, n=21)、輕度認知障礙 (MCI, n=17) 和失智症 (n=13)。所有參與者均接受了 MoCA 和閉眼 EEG 記錄。此外，參與者的照顧者填寫阿姆斯特丹工具性日常生活量表 (A-IADL-Q-SV-TC)。

結果：相較於正常認知與 SCD 個案，MCI 和失智個案在低頻段 (δ 和 θ 波) 中有較大的相對功率，在高頻段 (α 和 β 波) 則表現出較小的相對功率。此外，我們發現全腦與各腦區之 θ 波相對功率，與 A-IADL-Q-SV-TC 分數、及 MoCA 呈負相關 (分別為 $r = -0.55 \sim -0.622$ ，及 $r = -0.622 \sim -0.69$)，與全腦 β 波相對功率呈正相關 ($r = 0.35 \sim 0.46$ ，及 $r = 0.32 \sim 0.49$)。

結論：EEG 振盪在失智症不同階段表現出不同的模式。此外，EEG 振盪的頻譜強度同時與 IADL 表現、以及 MoCA 有中高程度的相關，這表示 IADL 可反映失智症光譜疾患之 EEG 振盪變化指標。

關鍵詞：工具性日常生活功能、失智症、EEG、輕度認知障礙、主觀認知衰退

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【場次 F3】

探討阿茲海默症、輕度認知障礙與健康長者執行中文抄寫之運動學表現

Kinematic analysis of Chinese handwriting tasks among patients with mild cognitive impairment, Alzheimer's disease, and healthy controls

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背景：輕度認知障礙 (Mild Cognitive Impairment, MCI) 是指「正常老化」和阿茲海默症 (Alzheimer's Disease, AD) 之間的過渡狀態。阿茲海默症是一種認知退化的疾病，而 AD 和 MCI 患者中，除了認知退化外，同時也會有動作退化的狀況。書寫是一項需要結合認知與動作綜合能力的複雜活動，而書寫困難與疾病的嚴重程度以及伴隨的認知障礙密切相關。因此，本研究旨在探討 MCI 及 AD 患者和健康控制組 (Healthy Control, HC) 執行抄寫單一字及句子的運動學表現。

方法：本研究招募了 23 名 AD、24 名 MCI 和 25 名 HC，使用平板電腦和手寫筆執行兩種抄寫任務，分別為抄寫單一「的」字以及抄寫兩次連續五個「的」字（句子）。並以書寫軌跡分析以下運動學表現，包括：(1) 長度軌跡比 (Length Ratio) (2) 時間比 Time Ratio，此兩參數可以推估書寫時的動作計畫能力，(3) 停筆時間 Still Time，表示動作的流暢程度，(4) 速度 Velocity，表示書寫效率，以及(5) 峰值速度的數量 NPV (Number of Peak Velocity)，代表書寫軌跡的平順度。統計部分，使用重複量數二因子變異數分析，比較不同組別與不同情境下的表現。

結果：在兩個抄寫任務中，停筆時間有顯著組別主效應 ($p < 0.001$)，MCI 與 AD 的停筆時間均顯著比 HC 長。峰值速度的數量有顯著交互作用 ($p = 0.006$)，在抄寫句子任務時，MCI 與 AD 的峰值速度數量顯著較 HC 較多，且在 MCI 組及 AD 組內，抄寫句子任務的峰值速度數量顯著較抄寫單字任務多。

討論：AD、MCI 相較 HC 在抄寫任務上動作流暢度較不佳，AD 以及 MCI 抄寫過程中會有較長的停頓時間。而在抄寫句子任務中，AD 及 MCI 相較 HC 產生較不平順的書寫軌跡，推估動作控制品質較不佳。相較抄寫單一字，連續地抄寫文字在 MCI 以及 AD 組峰值速度的數量明顯增加，顯示抄寫句子相較抄寫單一字對於 MCI 以及 AD 動作平順度更下降，推估可能抄寫句子對於 MCI 以及 AD 患者而言更具挑戰性。未來或許可以利用書寫任務，作為認知退化的篩檢工具。

關鍵詞：失智症、輕度認知障礙、書寫

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【場次 F4】

發展失智友善居家環境策略檢核表：前導研究

Developing a strategy checklist for a dementia-friendly home: A pilot study

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研究背景：台灣超過9成以上的失智症者在家中生活。隨著失智症病況的進展，居家環境調整能支持失智者的功能並減輕照顧者負擔。目前居家無障礙環境改造多聚焦於「提升安全性」及「預防跌倒」，且環境評估人員缺乏用於評估失智症家庭的簡易評估架構。

研究目標：本研究目標為發展「失智友善居家環境策略檢核表」。

研究方法：研究設計有三階段：第一階段進行文獻搜尋與評讀，形成初步的檢核表(題庫版)；第二階段進行專家效度檢驗，根據專家建議調整檢核表題項；第三階段由環境評估人員至輕度認知損傷(Mild Cognitive Impairment)與輕中度失智症家中實際使用檢核表，並收集環境評估人員及家屬的經驗。依照三階段的結果完成檢核表最終版。

研究結果：檢核表(最終版)包含5大面向、20題檢核要點，包含空間格局及動線、生理支持、認知支持、適度的感官刺激、空間與科技應用之彈性。專家效度之結果顯示，整體檢核表之S-CVI為0.99。五個面向的I-CVI向度在0.83-1之間。關於質性資料，評估人員表示檢核表能在失智症居家環境評估過程中提供有效的協助但希望能更精簡；家屬表示期望能獲得更多關於失智症照護的簡單環境措施。

討論：先前的環境評估僅專注於生理支持，而此檢核表提供更全面的考量，包含日常任務、感官、安全、照顧者負擔、定向協助，以擴展環境評估人員為失智家庭提供的建議。但使用檢核表需要評估人員投入更多時間學習使用，未來可增加範例圖說以提升使用的方便性。

關鍵詞：照顧者負擔、檢核表、失智症、居家環境改造、定向尋路、活動參與、安全、安適感

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【場次 F5】

以遠距醫療提供乳癌術後運動介入對上肢功能與復工之成效探討

Investigating the Effectiveness of Telehealth-Delivered Postoperative Exercise Interventions on Upper Limb Function and Return to Work in Clients with Breast Cancer

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背景：乳癌個案術後常有上肢關節活動度受限與體能下降等問題。然而新型肺炎的流行、長期復健的時間與金錢花費皆可能降低乳癌個案術後復健運動的意願，不利於其上肢功能與復工。

目的：本研究欲探討以遠距醫療提供乳癌個案運動介入，對於提升乳癌個案上肢功能與復工之成效。

方法：研究者邀請已完成乳癌手術的個案參與，並將之隨機分至實驗組與對照組二組。實驗組接受遠距術後運動介入（每日二次看影片運動、每日至少步行5000步），對照組則獲得術後復健運動的衛教手冊與運動記錄日誌。二組每週皆須定期回報運動狀況，並持續追蹤三個月。

結果：共95位乳癌個案參與研究，其中實驗組45人。流失率為50%。介入後，對照組回歸職場的比例高於實驗組（75% vs. 46%），若考量有意願返回職場的人數，則兩組無顯著差異。雖實驗組各項指標的分數略高於對照組，二組的上肢功能、工作特質（工作控制、工作負荷、主管社會支持等）、癌症相關生活品質無顯著差異。

結論：遠距醫療運動介入在提升乳癌術後個案上肢功能與回歸職場具有潛力。然而，本研究的量性成效指標並未顯示實驗組相較於對照組有顯著優勢。未來的研究應考慮個案能力的差異，設計更個別化的活動以提高介入成效和個案參與度。

關鍵詞：遠距醫療、乳癌術後、運動介入、上肢功能、復工

通訊作者：吳姿誼

口頭報告場次 G/ Oral Session G

【場次 G1】

職能導向的遠距大學課程可提升職能平衡

Occupation-based online college course improves occupational balance

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Background and Objectives: College students are inclined to give up health-promoting routines and occupational balance during stressful times, e.g. exam periods. This study examined the effectiveness of lifestyle interventions focusing on maintaining occupational balance during the semester.

Methods: Non-randomized, two-group controlled quasi-experimental design was used. The experimental group were recruited from college students who registered for an 8-week online, synchronous course, with 1 booster reflection at the ninth week in Spring, 2024. The course focuses on increasing students' awareness of health and occupational patterns, and skills for modification of occupations, habits, and routines. Control group was recruited from another online course and from social media. Pre-test was administered at the first week of the course, post-test at mid semester, and two-month follow-up at the beginning of summer break. Data was collected via online questionnaires. The primary outcomes were occupational balance. Secondary outcomes were competence in managing health-promoting occupations, motivation in health-promoting routines, perceived-health status, and psychological well-being. Data were analyzed using two-way repeated measures ANOVA (rANOVA), and the Time*Group interactions were tested with linear and quadratic models respectively.

Results: Forty-four and 92 participants were recruited for the pretest in the experimental and control groups, respectively. Twenty students (45.5%) in the experimental group and 41 students (44.6%) in the control group completed all three tests. At follow-up, compared to the pretest, both groups had a higher proportion of females within the group (65%). Academic colleges differed between the 2 groups ($p = .031$), and thus academic colleges were controlled as covariate during the test of rANOVA. From pre-test, post-test, to the follow-up, the experimental group showed significant improvement in occupational balance with medium to large effect size ($p = .004 \sim .030$, $\eta^2 = .086 \sim .146$) compared to the control group. Competence in managing a health-promoting occupations ($p < .001 \sim p = .049$), motivation for a routine that "helps stress management", "improves sleep", and "includes a regular routine" ($p = .023 \sim .048$), as well as perceived-health status ($p = .035$), and the well-being of a daily life filled with interesting things ($p = .016$) also significantly improved.

Discussion: The experimental group improved in overall occupational balance, and especially the balance among "different types of occupations", "different characteristics of occupations", and "occupations that bring or consume energy". The effect is inferred to come from the facilitation of the occupation-based lifestyle tele-course, in which college students selected and implemented the meaningful and health-promoting occupations in their daily routines and made adjustments continuously. It is hypothesized that through the guidance of the course, students improved their competence in managing health-promoting occupations, which enabled them to translate their motivation into action, and in turn enhanced

occupational balance and the perceived-health status. The application and generalization of this study's results should consider the limitation of a higher proportion of female participants.

Conclusion: Compared to the control group, college students improved their occupational balance, perceived health, as well as competence and motivation for managing health-promoting routines during the stressful mid semester.

關鍵詞： College students, occupational balance, health promotion, lifestyle, effectiveness

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【場次 G2】

職能治療臨床教師與實習學生對臨床實習表現的期待比較

The Expectations of Clinical Performance in Internships: A Comparison Between Occupational Therapy Clinical Educators and Intern Students

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背景：實習生常因專業知識與技能不足，以及心態未從學生調整為臨床工作者，與臨床教師的期待存在落差。

研究目的：本研究旨在建立臨床職能治療教師對於「良好臨床實習表現」的共識，並比較臨床職能治療教師與實習生對於「良好臨床實習表現」的看法差異。

研究方法：研究者邀請 150 名即將開始大四臨床實習的職能治療系學生和實習後的學生，以及 40 位各領域職能治療臨床教師參與研究。研究以德菲法 (Delphi method) 進行三回合問卷調查，建立臨床職能治療教師對於「良好臨床實習表現」的共識。隨後，研究者請職能治療系大四學生於實習前後填寫「良好臨床實習表現調查表」。研究者以 percent agreement 和 weighted kappa 分析教師與學生實習前後的一致性。

結果：第一、二回合問卷皆有 35 人 (70%) 回覆。第三回合問卷結果顯示 100 個項目達到重要程度的共識。學生方面，實習前有 124 名大三學生及 52 名大四學生填寫問卷。教師與學生在知識和理解、專業形象、交流與互動、個人特質及工作能力等方面存在差異。大四學生的看法更接近臨床教師，尤其在知識和理解方面。

結論：臨床職能治療教師對「良好實習表現」達成高度共識。教師與大三學生看法差異較大。建議治療師向實習生進行行前說明，以提升實習生之表現。

關鍵詞： 臨床實習、德菲法、職能治療、實習生、臨床教師

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【場次 G3】

深呼吸、好好眠：比較正念冥想與心跳變異生理回饋對降低醫學院學生焦慮之影響

Deep Breathing and Better Sleep: Comparing the Effects of Mindfulness Meditation and Heart Rate Variability Biofeedback on Reducing Anxiety in Medical Students

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目的：醫學院學生在求學期間常面臨壓力，導致焦慮和睡眠品質低落。過去研究顯示，通過呼吸調節壓力如正念冥想和心跳變異生理回饋 (HRV-BF) 能有效減少焦慮。本研究比較這兩種方法

在醫學院學生期末考壓力下的效果。

方法：招募 20 名有顯著失眠困擾的大學生，隨機分配至正念組和 HRV-BF 組。所有受試者在學期初及期末考前一週進行前、後測評估，使用匹茲堡睡眠品質量表（PSQI）、失眠嚴重度量表（ISI）、Epworth 嗜睡量表、貝克憂鬱量表（BDI）及狀態與特質焦慮量表（STAI）進行評估。同時，使用睡眠日誌和智慧手錶記錄主觀與客觀睡眠參數。兩組學生在期中考後到實驗室接受每週一次共四次的正念冥想引導或 HRV-BF 介入，並給予平日練習指引。使用 ANOVA 比較各測量變項之組別與前後測之差異。

結果：在睡眠相關測量中，介入後的主觀 PSQI 與 ISI 分數顯著下降，但沒有組別差異；客觀的入睡後覺醒有組別與介入之交互作用；其他指標則沒有主要效果與交互作用。另外，STAI 與 BDI 分數顯示，組別與前後測呈現顯著交互作用，這些交互作用來自於 HRV-BF 組在介入後，STAI 和 BDI 分數顯著下降，而在正念組沒有此現象。

討論：初步結果顯示，正念冥想和 HRV-BF 對主觀睡眠改善都有幫助，但唯有 HRV-BF 對醫學院學生的焦慮與憂鬱症狀具有顯著調節效果。

關鍵詞：失眠、焦慮、正念、心跳變異生理回饋

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中文發表場次(Chinese presentation session)

兒童與青少年(Topic: Children and Adolescents)

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學齡前兒童視覺動作整合發展趨勢初探

The preliminary investigation of the development of visual-motor integration in Taiwanese preschooler children

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背景與目的：視覺動作整合發展是學齡前兒童之重要能力發展，並與其他能例(如認知、動作、語言、社交)息息相關。因此，瞭解學齡前兒童之視覺動作整合發展趨勢有助於臨床從業人員提供適切的服務。然而，過去文獻探討台灣學齡前對於追蹤兒童視覺動作發展甚少。本研究目的為初步探討不同年齡層的學齡前兒童在視覺動作整合的發展趨勢。

方法：本研究採縱貫研究法自 2020 年至 2023 年，使用拜瑞－布坦尼卡視覺－動作統整發展測驗中文版追蹤 37 名學齡前孩童視覺動作發展功能狀況，收案年齡為 2 歲至 5.5 歲，半年至一年追蹤發展狀況，追蹤次數最多 7 次，最少 2 次，追蹤至孩童年齡 5.5 歲至 9 歲。

結果：(一) 學齡前兒童視覺動作發展趨勢隨年齡增長；(二) 視覺動作發展趨勢：2.5-3.5 歲兒童平均發展斜率 6，3.5-5.5 歲兒童平均發展斜率 1.80，5.5-8 歲兒童平均發展斜率 1.66，8-9 歲兒童平均發展斜率 3.30。

結論：本研究發現學齡前兒童視覺動作整合發展劇烈後有一段平緩期的非線性增長，與預期的線性發展不同，致於何種因子影響視覺動作整合發展劇烈變化，有待後續進一步研究釐清。

關鍵詞：學齡前，視覺動作發展

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孩童與青少年自閉症類群障礙之情緒調節訓練：敘述性回顧

Emotion-Regulation Training in Children and Adolescents with ASD：A Narrative Review

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前言：自閉症類群障礙(ASD)相較於典型發展孩童，更常出現挑戰行為以及情緒調節的問題，增加照顧者、學校老師以及臨床治療人員照顧以及教學上的困難性，但因相關介入方式

眾多，Nuske 等人於 2023 年以系統性回顧，整理出孩童以及青少年 ASD 之實證為基礎排名前十的情緒調節與挑戰行為之介入或是療法，如情緒調節訓練(Emotion-Regulation Training, ERT)、Parent-Implemented Intervention (PII)、Visual Supports (VS)等，本篇會進一步探討及整理 ERT 的介入內容。

目的：利用敘述性回顧，針對 ASD 常見之情緒調整障礙以及挑戰行為，透過有實證效力的情緒調節訓練，提供臨床人員具體介入策略之參考。

研究方法：將敘述性回顧的主題定為 Emotion-Regulation Training (ERT)，並將此介入療法進行文獻搜尋，搜尋 Pubmed、Medline、Scopus、PsycInfo 以及 Google Scholar 等資料庫。

研究結果：整理數篇文獻，提及之情緒調節訓練中強調個體對於覺察自身情緒外，當中亦涵蓋知覺對於他人的情緒狀態以及行為反應，並辨識自身情緒失調的誘發因子。策略包含：(1) 訓練應對技巧、問題解決能力 (2) 建構自身的“工具箱”(toolbox)，其中情緒調節策略如，放鬆技巧、轉移注意力、思想修正或是認知再評估等 (3) 非情緒化當下之訓練。

結論：此篇整理 ERT 針對孩童以及青少年 ASD 的具體介入方式，未來可針對其於情緒調節之介入比較其臨床應用的可行性，提供更深入的探討。

關鍵詞：自閉症類群障礙、情緒調節訓練、挑戰行為、情緒調節障礙

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自然職能治療對神經多樣性兒青的效益：文獻回顧

Effectiveness of Nature-based Occupational Therapy in Neurodivergent Children and Adolescents: A Literature Review

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研究背景：近年有研究提出透過戶外活動的參與，對於自閉症或 ADHD 之兒童青少年之感覺動作、社會情緒及注意力問題上能有幫助，故本篇著重於透過文獻回顧，探討近年以自然為基礎的職能治療，對於神經多樣性兒童青少年的效益。

研究方法：本篇以文獻回顧作為檢視之研究方法，共搜尋 PubMed、MEDLINE、CINAHL、Cochrane Library 四個資料庫，關鍵字包含 occupational*和 therap*和 nature-based，搜尋近五年，共計 37 篇文獻，以及相關引用文獻，並依標題及內文排除：非神經多樣性、非兒童青少年(大於 18 歲)、動物輔助治療，以及非職能治療師的文獻。

研究結果：最終納入五篇，其中以自然為基礎的職能治療介入形式多元，包含：五天四夜的生活技巧及冒險活動露營、戶外的感覺及社會活動(收集彩繪石頭、盪鞦韆、生火等)、戶外遊樂場及花園的活動等。

總論：職能治療專業因了解兒童發展及感覺統合，並可透過環境及活動的分析和調整，支持新技巧或策略的學習。五篇皆有提到透過介入，可提升孩子的自我效能或勝任感，三篇提到社會互動或技巧的提升(表達、彈性增加)，兩篇提到創造力或想像遊戲的增加。目前相關研

究仍不足，但對於神經多樣性之兒童青少年，提供自然基礎職能治療，可能提升自我效能感或勝任感，或是社會互動及感覺動作技巧。

關鍵詞：Adolescents; adventure therapy; nature-based occupational therapy; neurodiversity; pediatrics

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童年逆境經驗與創傷知情在職能治療中的應用：個案報告

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本研究透過對一位 13 歲個案的案例研究，深入探討了童年逆境經驗對心理健康的長期影響，以及創傷知情方法在職能治療中的應用和效果。個案在童年經歷了多次重大創傷，包括父母自殺和缺乏穩定的照顧，這些逆境經驗對其心理健康造成了深遠影響，導致其在面對壓力和人際衝突時出現極端行為和自殺傾向。

使用貝克憂鬱量表第二版（BDI-II）和多功能語句完成測驗系列-國中版（MSCTS）進行的評估結果顯示，個案初次評估時處於中度憂鬱狀態，且缺乏有效的應對策略。經過 12 週的認知行為治療（CBT）和藝術治療後，個案的憂鬱症狀顯著減輕，分數從 27 分下降至 12 分，並且在 MSCTS 中的反應顯示出其自我肯定和安全感的提升。

認知行為治療：幫助個案識別和挑戰負面思考模式，學習新的情緒調節和問題解決技巧，顯著降低了其憂鬱症狀。

藝術治療：通過藝術創作和表達，幫助個案安全地釋放和處理內在的情感和創傷，增強其自我表達能力和情感調節能力。

創傷知情方法在治療過程中提供了安全、支持性的環境，幫助個案逐步重建信任感和安全感。本研究強調創傷知情的重要性，認為在職能治療中應重視創傷知情，並針對童年逆境經驗制定相應的介入策略。

關鍵詞：童年逆境、創傷知情、認知行為、治療藝術治療

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探討專業人員以家庭為中心之衛教內容-以自閉症家長為例

Exploring the Delivery of Family-Centered Health Education Content by Professionals: A Case Study of Parents of Children with Autism

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研究背景與目的：最早從 1965 年的啟蒙教育方案到國際健康功能與身心障礙分類系統皆強調活動、社會參與和環境的重要性，其中，最早、最長時間接觸、最了解兒童的就是家庭當中的家長，以家庭為中心的概念儼然成為趨勢。而文獻顯示其早療需求的障礙類別中，自閉症家長的照顧壓力是最大的，故本研究將統整出影響自閉症家長自我效能的相關因素，進一步提供早期療育相關專業人員在衛教過程中，如何更有效率的增權賦能家庭的內容並進行總結。

方法：本研究透過 National Library Medicine、Pubmed Central Institute of Education Sciences、sage journals、Google 學術搜尋等網站搜尋文獻，關鍵字設定：ASD、Parent-reported、Parent-mediated、Parent Training。篩選研究方法必須是由家長執行介入，並採隨機對照試驗的研究設計，排除無法下載之全文。加以歸納及統整，並提出結論及建議。

結果：研究者整理了上述搜尋結果中的文獻，歸納出四種主要策略：FPI（Focused Playtime Intervention）、PACT（Preschool Autism Communication Trial）、ABA（Applied Behavior Analysis）、家長參與。研究結果顯示，家長參與程度越高，孩子的語言能力提升越顯著；同時，家長在參與過程中能增加育兒信心、自我效能感，並促進正向親子互動，有效解決家庭需求。因此，治療師在進行衛教時，提升家長的參與度顯得格外重要。

結論：透過本研究結果，顯示出家長的積極參與對於孩子治療效果的重要性，無論是透過 FPI、PACT、ABA 等策略，家長參與度與孩子能力的進步之間，有著顯著密切相關。同時，家長透過參與，不僅提升自我效能感與育兒信心，還能使孩子進步，一併幫助解決了家庭需求。因此，在未來臨床衛教或研究，應提供更多機會以鼓勵家長參與孩子的治療，並為家長持續提供支持和資源。目前烏日林新醫院兒童發展中心，每位治療師於治療課後都會與家長進行衛教，這個模式正是本研究所驗證的實踐方式。故本篇研究主要就是透過相關文獻來驗證，這種治療後的衛教模式，確實能促進家長參與度，並為臨床上帶來持續的正面影響。

關鍵詞：以家庭為中心、衛教、家長參與、early intervention、Video-based education

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職能治療在新生兒加護病房對於基因異常孩童的介入：個案報告

Occupational therapy intervention for genetically abnormal children in the neonatal intensive care unit: a case report

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基因異常的孩童從出生開始即可能面對到呼吸、進食、神經行為發展等多方面的困難，而早期的職能治療介入被認為能夠協助基因異常的孩童面對現有的挑戰和預防未來可能產生的問題。本文以一名 MAP2K1 基因異常，診斷為 Cardiofaciocutaneous syndrome 的早產女童為例

(妊娠週數 34+4 週，出生體重 2495 公克)，自受孕週數 35+4 週在新生兒加護病房進行職能治療評估，後續開始進行職能治療介入，介入內容包含：治療性擺位、神經行為發展、感覺處理、口腔動作、進食能力、家長衛教等。於矯正年齡 48 週時，女童離開新生兒加護病房時結束職能治療服務。介入結果顯示職能治療的早期介入能夠改善基因異常的孩童在神經行為發展、進食等方面的表現。

關鍵詞：職能治療、新生兒、新生兒加護病房、基因異常、神經行為發展介入

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運用虛擬實境改善自閉症兒童社交技巧的成效：文獻回顧

The effectiveness of using Virtual Reality to improve social skills of Children with autism spectrum disorder : system review

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研究目的：台灣自閉症的盛行率有逐年上升的趨勢，不同年齡學生中自閉症的人數也隨之增加，且大多數屬輕度自閉症。因缺乏良好的社交技巧，如口語及非口語溝通技巧，伴隨固著行為，無法和他人有效互動，除降低學習成就，也讓家庭的面對教養的壓力，隨著早療觀念的提升，如何促進自閉症在生活、學習及社交的適應，已是早療領域的職能治療師的一大課題。由於科技的進步，虛擬實境技術漸成為臨床治療模式，本研究的目的，主要利用文獻回顧的方式，探討運用虛擬實境改善自閉症兒童社交技巧的成效。

研究方法：本研究為回溯性論文，利用關鍵字 Children with ASD、VR-based treatment、social skills，搜尋 PubMed、Cochrane library、Airtir library 及 Google Scholar 等資料庫，並以下標準篩選文獻：(1)本機構有權限取得全文之文獻；(2)發表年份介於 2015~2024 年之間。文獻符合標準者共有九篇，將其內容整理成論文，希望藉由此研究來幫助職能治療師及家長，了解虛擬實境在改善自閉症兒童社交技巧的成效。

研究結果：分析蒐集的文獻中的研究結果，證實虛擬實境的介入，在改善自閉症兒童的社交技巧上有明顯的成效。

結論：虛擬實境的介入的可進行個別及團體的社交技巧訓練，在家中及臨床單位模擬不同的社交情境，減少時空因素的限制，便於重複練習，隨進程調整訓練內容，讓訓練的成效能類化到日常生活中。

關鍵詞：Children with ASD、VR-based treatment、social skills

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中文書寫障礙評估與介入之文獻回顧

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學習障礙根據精神疾病診斷與統計手冊第五版，可分為閱讀障礙、書寫表達障礙，以及數學障礙。與閱讀障礙已有大量文獻相比，書寫障礙的相關文獻較少。本篇將針對中文書寫障礙的文獻進行整理與回顧。

書寫與識字密不可分，大多數有書寫障礙的個案，也都有識字上的問題。首先透語文系統形音-義，說明聽說讀寫之間的相關性。並說明書寫在不同年齡層的發展階段與要素。依據任務的類型與書寫要素闡述書寫障礙的分類與可能出現的問題表現。並從書寫要素的架構下整理中文書寫能力的評估工具以及相關的錯誤類型。

此外，臨床上也常發現書寫障礙與注意力缺失過動症、發展性協調障礙有共病的現象，因此也就注意力缺失過動症和發展性協調障礙在出現書寫障礙時，所可能發現的困難和現象進行討論。

最後，同樣使用書寫要素的架構下，整理中文書寫障礙相關的介入策略。以期透過本篇文獻回顧對於書寫障礙有更多的認識，並能在系統性文獻回顧下，對書寫障礙的相關評估與介入提供治療師作參考。

關鍵詞：書寫困難，中文，書寫發展，錯誤類型，共病，書寫評估，介入

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漂泊與蓄勢待發-拒學青少年經驗探究

Drifting and Gathering Momentum : Exploring the Experiences of Adolescents with School Refusal

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本研究目的為探討青少年從拒學到在醫療系統中接受替代性教育的歷程與經驗。研究參與者為三位參與日間病房持續三個月以上的高中/職女性，年齡介於 17-18 歲，其中兩位是第二次參與日間病房。研究者以自行設計的訪談題綱收集資料，與協同分析者以敘事研究中之「整體-內容」及「類別-內容」進行資料分析，探究青少年的拒學歷程、參與日間病房前的生活及參與日間病房後的轉變。研究結果如下：（一）拒學發展過程中，在學校層面，青少年與老師及互動經驗會直接影響學校適應，並且他們期望融入同儕，在學業上面臨挫折；在家庭層面，青少年與家庭間出現溝通阻礙，關係緊張；在生活層面，青少年與外界連結少，生活由自己安排。（二）拒學青少年在日間病房的經歷包含課業壓力減輕、保有與同儕互動機會並有較充足環境支持。（三）拒學青少年在日間病房的改變包含重建規律生活、緩和與家庭的衝突、穩定情緒狀態。最後根據研究發現提出建議，提供與拒學青少年的學校、家長

及醫療

系統做為參考。

關鍵詞：拒學、日間病房、醫療跨域合作

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青少年族群網路使用成癮行為與精神健康之關聯性

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前言：青少年正處於身體、心理、認知與社會互動快速發展的階段。此階段重要課題包含學業、人際關係和自我形象的建立。隨著科技的快速發展，網路已成為人們日常生活中不可或缺的一部分，網路及社交媒體也成為青少年主要的人際互動的平台。若不當使用網路，可能導致網路成癮，間接對日常生活、學習和社交活動造成不良影響。網路成癮也可能會提高青少年出現焦慮、憂鬱症狀的風險。低自尊和衝動控制不佳亦是與網路成癮具有一定的關聯性。本研究目的為了解青少年族群網路成癮與精神疾病間的關聯性。首先，想了解青少年若有網路成癮的行為，是否有較高的憂鬱、焦慮、衝動控制不佳及自傷/自殺的風險。再者，若青少年已經罹患精神疾病，是否有較高的比例同時具有網路成癮的行為。

方法：本研究採用文獻回顧的方式進行研究，使用關鍵字精神疾病類別：Schizophrenia, psychosis, psychotic；研究對象：Young Adult, Adolescent, youth；行為或現象描述：Addict, patholog, problem；網路成癮類別：internet, gaming 交集，將過濾條件設定在近十年內，於Pudmed 此資料庫進行文獻檢索，後使用人工篩選方式排除不符合研究條件之文獻，收納條件包含：(1)收案個案年紀為 10 到 19 歲。(2)研究設計為個案對照實驗(有對照組及實驗組；實驗組受試者具有網路濫用的行為或診斷)。(3) 行為問卷有收集憂鬱、焦慮、衝動控制或自殺/自傷行為等精神症狀。(5)文獻發表期間為 2014 年到 2024 年。(6)排除文獻回顧、個案報告、無法取得全文及非英文之文獻。(7)排除研究主要目的比較實驗組及對照組之生理訊號(如，腦波)及影像(如，腦影像)之文獻。

結果：最初以關鍵字交集搜索文章，共取得 111 個結果，後以人工篩選方式排除不符合研究要求之文章，包含年齡非青少年要求的文獻 23 篇；非網路成癮相關之文獻 7 篇；非精神疾病相關 29 篇；完全不相關之文獻 7 篇；非相關性研究之文獻 11 篇；找不到免費內文之文獻 14 篇，總共合計排除 91 篇文獻。最終，本研究總共納入 20 篇文獻，研究涵蓋加拿大、義大利、俄羅斯、土耳其、中國、日本、韓國等國家。初步結果顯示青少年網路成癮行為與憂鬱、焦慮症狀具關聯性，不同精神疾病間網路成癮行為嚴重度不同。可進一步討論何種特質的青少年具有較高的網路成癮風險，以作為家長、醫療人員、教育工作者和政策制定者之參考，幫助其採取有效的預防或介入措施，減少網路成癮對青少年身心健康的危害。

關鍵詞：青少年、網路成癮、憂鬱、焦慮、精神疾病

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學齡前兒童視動整合訓練系統可行性探究

Exploring the Feasibility of Visual-Motor Integration Training System in Preschool Children

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背景及目的：視動整合對學齡前兒童學習動作技巧尤為重要，學齡前發展障礙兒童經常在視動整合任務表現困難。過去文獻證實傳統形式介入的有效性，但礙於人力、單調乏味等限制，無法提升孩童內在動機。近年來，平板因易於取得、直覺操作、即時互動的特性而成為最佳治療媒介。故本研究開發三款針對學齡前 4-6 歲兒童的視動整合平板訓練系統，旨在探討此平板訓練系統於學齡前兒童的可行性。

方法：採用問卷調查專家意見，共分析 10 位職能治療師的意見。每款遊戲皆針對遊戲規則、操作方式、訓練目標、有趣能吸引孩童注意力的程度分析年齡適用性，本研究採描述性統計。

結果：此 10 位職能治療師(4 位男性、6 位女性)100% 擁有數位遊戲操作經驗也有接觸過學齡前 4-6 歲發展障礙兒童。其中 80% 至 100% 認同遊戲規則符合年齡適用性、70% 至 100% 認同操作方式適合學齡前兒童、90% 至 100% 認同訓練目標符合學齡前孩童發展能力、90% 至 100% 認為遊戲有趣且能吸引孩童注意力。

結論：結果支持本平板訓練系統符合學齡前 4-6 歲兒童的年齡適用性，展現出操作直覺、生動有趣並能扣合孩童發展能力的特性。

關鍵詞：學齡前兒童、視動整合、平板訓練系統

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注意力不足過動症兒童之執行功能障礙及其對於職能表現的影響：文獻回顧

Executive dysfunction in children with attention deficit hyperactivity disorder (ADHD) and its impacts on occupational performance: A literature review

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執行功能 (executive function, EF) 包含三個核心 EF：抑制控制 (inhibition control, IC)、工作記憶 (working memory, WM) 和認知彈性 (cognitive flexibility, CF)。此三種核心 EF 不僅相

互影響，更影響高階的 EF，從而影響職能表現。而多數的注意力不足過動症 (attention deficit hyperactivity disorder, ADHD) 兒童至少有一個核心 EF 障礙，並可能影響其職能表現。

為彙整目前 3 至 12 歲 ADHD 兒童 EF 障礙及其對於職能表現的影響，本研究以 EF 障礙、ADHD 及職能表現相關關鍵字，於 PubMed、CINAHL、Cochrane library 及 Google Scholar 資料庫進行檢索。

最後共搜尋 826 篇文獻，納入 24 篇進行回顧。其中，7 篇文獻顯示 ADHD 兒童在 WM、IC 和 CF 上表現較正常發展兒童差，而關於 WM 及 IC 的關係方向性仍未有定論，但兩者均會影響 CF，於進行轉換任務時，保留不活躍的規則並抑制當前活躍的規則。有 2 篇文獻指出 EF 障礙會造成 ADHD 兒童較低的學業成就，5 篇文獻顯示 EF 障礙導致較差的社交能力，使兒童難以有效參與社交活動。另有 4 篇文獻發現 EF 障礙會影響 ADHD 兒童的情緒調適，使其較易選擇非適應性情緒調適技巧，造成情緒失調。

總結，ADHD 兒童確實存在 EF 障礙，且對學業、社交及情緒調適等職能表現造成負面影響，但 WM 和 IC 的關係、各核心 EF 對職能表現之作用的研究結果不一。建議未來研究驗證核心 EF 間的關聯性，以較全面的角度分析其中機制，為後續之職能表現的介入計劃建立實證基礎。

關鍵詞：執行功能；注意力不足過動症；學業表現；社交功能；情緒調適

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視多障兒童訓練小屋感官偏好問卷之開發應用

Development and Application of Caregiver-Reported Sensory Preferences in Little Room for Children with Visual Impairment: A Preliminary Study

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前言：訓練小屋 (Little Room) 由著名丹麥心理學家 Dr. Lilli Nielsen 創立，專為多障，特指合併視覺障礙兒童設計。透過選擇適當物件和擺放，提供有限空間自主探索，促進感知覺、認知和動作發展。Little Room 在臨床上常用作視覺訓練工具，但依賴使用者個人經驗，缺乏系統化評量不同兒童的特殊需求，故難以有效評估、設定訓練目標和追蹤使用成效。

目的：藉由發展照護者自評問卷，了解兒童日常生活中感知覺偏好，並同步試用 Little Room 校正兩者間落差，選擇合適物件及搭建方法，建立系統化使用方式。

方法：首先治療師透過實作影片、教學門診觀摩與專家討論熟悉 Little room；再參考現有相關量表及文獻，擬定初步問卷並進行試用。根據使用者及專家回饋持續修正，最終完成「視多障兒童 Little Room 感官偏好問卷」（下稱甲問卷）與「Little Room 概念與使用調查問卷」（下稱乙問卷）兩份自評問卷。

結果：本研究納入 5 位視多障兒童（3 男、2 女，平均年齡 1Y9M）。照護者於試用 Little

Room 前填寫兩份問卷，治療師依甲問卷結果選用刺激物進行試用，確認感官偏好及能力，並進行衛教。照護者於試用後再次填寫乙問卷，以評量甲問卷和衛教之效能。

結論：結果顯示，自評問卷有助於照護者了解視多障兒童感官偏好，提升對 Little Room 的理解與使用意願，並系統化制定使用方案。

關鍵詞：視覺、視覺障礙、感官偏好、訓練小屋

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自閉症學齡前兒童動作發展

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研究背景：自閉症譜系障礙 (Autism Spectrum Disorder, ASD) 主要影響兒童的社交互動、語言和溝通技能。此外，他們的動作發展亦可能受到影響，進而影響體育、遊戲和日常生活中其他活動參與。因此，了解此族群在學齡前期的動作發展、活動量和生活參與表現，將有助於設計有效的介入和支持策略。

研究目的：探討自閉症學齡前兒童動作發展、活動量與生活參與跟典型發展兒童之差異及三個面向間的關聯性。

研究方法：本研究招募八位 3-6 歲之學齡前疑似或診斷為自閉症譜系障礙之兒童 (ASD 組) 及八位年齡、性別對照之典型發展兒童 (TD 組)，透過皮巴迪動作發展量表第二版、學齡前身體活動量、學齡前兒童參與評估問卷及幼兒參與及環境評估量表進行評估。統計分析法包括曼惠特尼測試及斯皮爾曼等級相關係數。

研究結果：ASD 組的粗動作發展顯著差於 TD 組，且其在參與動態體能性育樂活動 方面的表現也有較不足的趨勢。在家庭參與和社區參與部分，ASD 組亦顯著較少，且動作發展和生活參與呈現正相關。

結論：有自閉症譜系障礙症狀之兒童在動作發展、身體活動量、及生活參與方面都可能較一般兒童不足，提升其動作功能表現可能有助於其未來生活參與、反之亦然。故適當的早期介入對此兒童族群的整體發展與生活品質應有正向幫助。

關鍵詞：自閉症、學齡前、動作發展、身體活動量、生活參與、動作技能

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心智理論為基礎的介入於自閉症類群障礙症兒童的有效劑量：文獻回顧

The effective dosage of theory of mind-based interventions for children with autism spectrum disorder: a literature review

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背景與目的：自閉症類群障礙症 (autism spectrum disorder, ASD) 兒童經常面臨社交互動困難。近年研究指出心智理論 (theory of mind, ToM) 為基礎的介入有助於增進 ASD 兒童對於同儕心理狀態的理解，進而改善其社交互動。本篇研究旨在進一步回顧以 ToM 為基礎的介入對於 ASD 兒童介入之建議劑量，療效指標包含 ToM 能力、應用 ToM 與社交互動。

方法：本研究以 ASD、ToM 與介入等關鍵詞，於 PubMed、EMBASE 二電子資料庫，檢索 2011 至 2024 年間 ToM 為基礎的介入於 ASD 兒童之文獻。

結果與討論：本研究共納入六篇文獻，結果皆顯示介入後之 ToM 能力顯著進步。其中二篇為個別介入，介入劑量皆為 480 分鐘，每次介入一小時，每週二次，共執行四週；其他四篇則是團體介入，介入劑量分別為 480、600、600 及 1440 分鐘，前二篇之應用 ToM 在介入後顯著進步，前三篇之社交互動在介入後顯著進步。前三篇之團體介入皆為每次一小時且每週一次，僅介入週數不同（8 週與 10 週）、第四篇則是每次 1.5 小時，每週一次，共執行 16 週。

結論：有效之介入劑量為 480 至 600 分鐘，其 ToM 能力、應用 ToM 與社交互動皆在介入後顯著進步，且有三篇介入劑量皆在 480 分鐘；但介入頻率不相同，二篇為每週二次，另一篇為每週一次。未來研究建議可進一步比較在相同有效介入劑量下，不同介入頻率是否影響療效指標。

關鍵詞：心智理論、自閉症類群障礙症、兒童、介入劑量

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視覺復健對合併視覺問題自閉症兒童之成效

The effects of visual rehabilitation on children with autism spectrum disorders and visual disorders

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前言：視覺影響兒童社交行為發展，自閉症兒童常合併視覺問題，視覺問題可能加重自閉特質表現。然而，臨床上鮮少探討視覺復健對此類兒童之成效。

目的：以合併視覺問題的自閉症兒童為研究對象，探討視覺復健對其視覺功能與功能性視覺之影響，以及能否同步改善社交和溝通表現。

方法：對象為自閉症類群障礙症兒童，經眼科醫師與職能治療師合作，確認有視覺問題者。

介入前後的評量：特殊需求兒童視覺功能表(VFB-CSN)、功能性視覺問卷(FVQ)、視知覺發展

測驗(DTVP-2)、文蘭適應性行為量表(VABS-3)、臺灣版自閉症行為檢核表(ABCT)、自閉症類群障礙檢核表(CASD-C)、早期社交溝通量表(ESCS)、目標達成量表(GAS)。每周一次和一小時的一對一介入，共十次。內容包含個別化眼動與視知覺訓練，依據個案能力與 GAS 調整活動。

結果：個案為 5 歲自閉症男童，介入後整體 DTVP-2(58→72, MDC=2.77)、非動作視知覺(27→34, MDC=5.54)、視動整合(31→38, MDC=5.54)之組合標準分數皆有顯著進步；VABS-3 的適應行為組合(68→81, MDC=4.66)、溝通領域(66→74, MDC=7.98)、日常生活領域(75→82, MDC=6.62)、社會領域(75→92, MDC=6.24)之標準分數皆有顯著進步；ABCT 的總分下降(15→7)；ESCS 起始性共享注意力(8.5→15.5)、起始性與回應性社交互動分數(ISI: 1.5→3.5, RSI: 11→13.5)提升。

結論：初步顯示視覺復健有助於改善視覺問題自閉症兒童社交功能和視覺等功能。但仍需進一步研究探討療效。

關鍵詞：視覺復健、自閉症、視覺、視知覺、社交、溝通

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生理領域 (Physical Dysfunction)

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腦中風居家 PAC 個案下轉西基診所執行成效

Effects of the Client with Stroke of Home-based Post-acute Care Intervention Applied by the Clinic

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目的：急性後期照護計畫(post-acute care, PAC)的目的在於讓個案接受急性照護後，順利地轉銜回歸居家或社區生活。根據先前的研究顯示，急性後期照護住院(inpatient PAC, IPAC)或居家模式(home-based PAC, HPAC)皆能提升個案的功能性移動和日常生活功能，不過接受居家模式的個案在功能性復原和平衡能力有較為顯著的進步。本實務分享腦中風個案透過院際整合團隊協助，下轉西基復健科診所執行職能治療評估、介入以及衛教等方式，提供居家急性後期照護嶄新介入模式。

方法：113 年 1 月至 113 年 2 月間的 1 位右側肢體無力的腦中風個案，進行每週 3 次，每次 30 分鐘的職能治療介入，介入內容包含日常生活功能訓練、平衡訓練、上下肢功能訓練以及衛教家屬合適的居家職能活動與策略。初評時利用巴氏量表、工具性日常生活功能量表、傅格梅爾上肢功能評估以及動作活動日誌進行評估，後續每 3 週進行複評，直到第 6 週計畫結束結案。

結果：個案於第 3 週複評及第 6 週結案評估時發現巴氏量表、傅格梅爾上肢功能評估以及動作活動日誌表現有進步，而工具性日常生活功能未有明顯進步表現。

結論：腦中風居家 PAC 個案下轉西基診所執行有正向的效益，可以促進個案的日常生活功能表現。未來可作為類似個案進行介入計畫擬定的參考。

關鍵詞：急性後期照護、腦中風、居家模式

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腦部腫瘤合併左側偏癱個案之職能治療介入

Occupational Therapy Intervention for the Left Hemiplegic Client with Brain Tumor

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目的：分化不良星狀細胞瘤(anaplastic astrocytoma)是世界衛生組織分類為第三級的星狀細胞瘤(grade III astrocytoma)，頭痛、心智狀態不佳、神經學缺損以及癲癇是其早期常見症狀。腫瘤的治療方式(如化學治療、放射治療或外科手術)可能會帶來不良的副作用，像是心理社會失能、周邊神經病變、認知缺損、肌力、協調性與平衡表現問題。本實務分享職能治療針對腦部腫瘤合併左側肢體偏癱個案的介入經驗，改善上肢及日常生活功能，提供罕見個案職能治療之參考。

方法：112年6月至113年3月間1位星狀細胞瘤合併左側肢體偏癱個案進行每週3次，每次30分鐘的職能治療活動介入，包括上肢動作控制訓練、精細動作訓練以及日常生活功能訓練，加上職能治療師給予的居家活動與衛教建議。初次評估及每3個月的複評皆利用巴氏量表、Lawton-Brody IADL scale、傅格梅爾上肢動作評估(Fugl-Meyer Assessment)以及動作活動日誌(Motor Activity Log)進行施測。

結果：巴氏量表由初評35分進步至60分，Lawton-Brody IADL scale由初評1分進步至3分，傅格梅爾上肢動作表現由初評18分進步至38分，動作活動日誌使用量由0分進步至1.8分，品質由0分進步至1.5分。

結論：職能治療針對腦部腫瘤合併左側偏癱的上肢動作復原以及日常生活功能表現具正向效益，未來可針對此發現進一步深入探討。

關鍵詞：星狀細胞瘤、上肢動作、日常生活功能

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遠端橈骨骨折個案之日常生活功能介入成效

Effects of the Activity of Daily Living Intervention for the Client with Distal Radius Fracture

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目的：手部職能治療通常是遠端橈骨骨折(distal radius fracture)的治療策略之一。根據研究顯示為期至少 6 週的職能治療介入可有效改善個案的手部功能狀態以及日常生活功能表現。高齡長輩發生遠端橈骨骨折的原因多是由於高處跌落產生之低能量外力(low-energy trauma)所致，而年輕族群是因為高能量外力(high-energy trauma)如交通意外造成。遠端橈骨骨折大多是閉鎖性且發生骨頭移位現象，目前手背側的橈股移位錯位或是變形仍多以柯力氏骨折(Colles' fracture)稱呼。本實務分享職能治療針對遠端橈骨骨折的介入經驗，改善其日常生活功能，提供職能治療計畫之參考。

方法：113 年 1 月至 3 月間 1 位遠端橈骨骨折的女性個案進行每週 2 次，每次 30 分鐘的職能治療活動介入，包括疤痕按摩、被動關節運動、精細動作訓練、上肢肌力訓練以及日常生活功能訓練。初次評估及每 1 個月的複評皆利用巴氏量表、Lawton-Brody IADL scale、動作活動日誌(Motor Activity Log)進行施測。

結果：巴氏量表由初評 70 分進步至 90 分，Lawton-Brody IADL scale 由初評 2 分進步至 5 分，動作活動日誌使用量由 1.2 分進步至 3.8 分，品質由 0.8 分進步至 3.4 分。

結論：職能治療針對遠端橈骨骨折個案的日常生活功能介入具正向效益，在動作活動日誌、基本日常生活功能及工具性日常生活功能皆有進步，此發現值得未來進一步研究深入探討。

關鍵詞：遠端橈骨骨折、日常生活功能、職能治療

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複合式副木介入促進腦中風個案工作表現

Combined Splint Intervention for the Working Performance of the Client with Stroke

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目的：痙攣(spasticity)是腦中風個案常見上肢動作問題，可能是主動肌及拮抗肌間的不協調、肌肉無力及缺乏協調性所致。痙攣會限制肌肉長度，造成肌肉長時間處於收縮狀態與拮抗肌自主動作受限，兩現象會形成手腕以及手指屈肌攣縮。穿戴副木針對痙攣肌肉提供持續性低負荷力量(low-load force)，可以促進肌肉放鬆、維持肌肉長度並預防攣縮發生。本實務分享職能治療針對腦中風個案工作表現介入經驗，利用多種副木協助其動作表現，提供職能治療計畫之參考。

方法：112 年 11 月至 113 年 3 月間 1 位腦中風左側偏癱個案進行每週 2 次，每次 30 分鐘的治療介入，包括穿戴背側式豎腕副木(dorsal cock-up)、手指伸直副木(finger extension splint)與短型對掌副木(short opponens)方式衛教、穿戴後進行修剪頭髮、吹頭髮以及髮型設計等工作項目操作。初次評估及每 2 個月的複評利用目標達成量表(GAS)及加拿大職能表現評估(COPM)進行施測。

結果：目標達成量表由初評-2分、複評-1分進步至結案+1分，加拿大職能表現評估表現分數由初評0分、複評1.6分進步至結案3.2分，品質由初評0分、複評1.2分進步至結案2.8分。

結論：複合式副木介入對於腦中風個案工作表現具正向效益，目標達成量表以及加拿大職能表現評估的表現及滿意度皆有進步，此發現值得未來進一步研究深入探討。

關鍵詞：副木、腦中風、工作表現

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沉浸式虛擬實境鏡像手系統於中風個案之臨床適用性和可行性

Clinical usability and feasibility of an immersive VR mirrored-hand system for stroke survivors

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Background and objective: Immersive virtual reality (VR)-based mirror therapy has been recently developed as a new approach to stroke rehabilitation. However, most existing VR-based mirror therapy programs simply consist of range of motion exercises, reaching, and grasping and releasing movements. This study aimed to develop an activity-based immersive VR mirrored-hand system with real-life activities designed for upper limb of stroke survivors, and aimed to evaluate the clinical usability and feasibility of this system in stroke survivors.

Methods: This immersive VR mirrored-hand system was developed using Blender software on a MacOS Apple Silicon platform. The HTC VIVE Focus 3 headset and VIVE Focus Controller were utilized. Ten stroke survivors were recruited to evaluate the clinical usability and feasibility of this innovative system using the System Usability Scale (SUS) and a self-designed questionnaire. In addition, the Virtual Reality Sickness Questionnaire (VRSQ) was used to assess any instances of cybersickness experienced by patients while using VR.

Results: The immersive VR mirrored-hand system has been developed, featuring software that includes 3D virtual scenes for real-life activities such as cooking, driving, housework, and shopping. After testing this system, stroke survivors had average scores of 55.50 (out of 100) on the SUS, 37.10 (out of 50) on the self-designed questionnaire, and 6.75 (out of 100) on the VRSQ, indicating moderately acceptable clinical usability and feasibility, and very mild cybersickness.

Conclusion: This new immersive VR mirrored-hand system with moderately acceptable clinical usability and feasibility might be widely applied in clinical practice for post-stroke upper limb rehabilitation. Further studies are needed to examine the treatment effects of this VR mirrored-hand system on improving upper-limb motor and daily function in stroke individuals.

關鍵詞：Virtual reality technology, Mirror therapy, Stroke, Usability, Upper limb.

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具振動觸覺提示之穿戴式步態訓練裝置於中風個案的應用

Effect of Portable Ambulation Training Devices with Vibrotactile Cues for Stroke Patients

張介瀚¹

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中風是全球造成失能的最大主因，雖然死亡率已較過去逐年下降，但中風個案仍需進行長時間的復健治療，以期能夠回歸高品質的日常生活。其中，最容易影響到日常生活的失能表現，便是不正常的平衡及步態。

臨床上傳統的步態復健治療常以重複性高的訓練模式來改善個案的基本動作能力，並透過目標取向策略來調整復健方法，以增加日常生活的適應能力。然而，這些方式都受限於特定的空間、時間與人力，若沒有治療師的隨時指導，個案便可能在缺乏正確引導的情況下以不良的姿勢行走，日後養成錯誤的代償動作，不利於步態復健發展。

近年來，「外在提示」為步態復健中常採取的方式之一，運用視覺、聽覺、觸覺等不同的提示目標，來幫助個案學習或改善動作技巧，可有效地協助個案改善步態表現。其中，振動觸覺提示的相關研究當中，發現人類可以透過皮膚與神經系統的關聯型，使用觸覺輸入來刺激大腦，改變神經可塑性且提高動作皮質區的活性。此外，振動觸覺輸入也會使提高脊髓與皮質脊髓徑的興奮性，促進產生像是移行的動作。

針對上述內容，本研究希望能夠透過文獻回顧整理近期有關穿戴式振動觸覺提示系統之研究有改善中風個案在步態方面的何種問題，來提供中風個案不同的復健介入方式選擇。

關鍵詞：中風、步態、步態復健、振動觸覺、穿戴式

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發展及驗證電腦化空間記憶測驗於中風病人之心理計量特性

Development and Validation of a Visuospatial Working Memory Test in persons with stroke

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背景：視空間工作記憶（Working memory, WM）為個體於學習新事物及解決問題時，儲存視空間資訊並操弄之能力。中風病人常伴隨 WM 缺損，易造成中風患者之動作復健成效較差、日常生活獨立性較低及社交活動障礙等，進而影響個案之復健成效。然而，目前常用之

視空間 WM 評估工具因施測者負擔大、施測費用高、缺乏心理計量特性驗證等，使其應用於國內之臨床或研究人員受到限制。

研究目的：本研究之研究目的為發展內容適用於中風個案之電腦化空間記憶測驗(Visuospatial Memory Test, VMT)，並驗證 VMT 之同時效度。

方法：本研究包含二階段：(1) 發展 VMT：研究者將組成發展小組，參考之前發展之視空間 WM 測驗，以發展適用於中風個案之施測內容與架構。之後，發展小組召開專家會議，以驗證 VMT 之專家效度，確認 VMT 之測驗架構。研究者將招募中風個案進行測試，以檢驗 VMT 之內容效度及臨床適用性及。最後，研究者將 VMT 測驗撰寫成 VMT 測驗程式。(2) 驗證 VMT 之同時效度。

結果：共 35 為中風個案納入分析。當刺激物數量增加時，受試者的答對率顯著下降。此外，VMT 得分與蒙特利爾認知評估 (MoCA) 之間呈現中度相關 ($r = 0.65$)。

結論：VMT 可提供快速之適用於中風個案之視空間工作記憶之評估，減少施測者及受測者之施測負擔。後續研究可再驗證 VMT 之心理計量特性。

關鍵詞：工作記憶、中風、心理計量特性、電腦化測驗

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使用 AI 建構偵測中風患者上肢正確動作模板之個案研究

Using AI to construct a template for detecting correct movements of the upper limbs of stroke patients - case study

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研究背景與目的：在慢性中風個案想伸手拿取超出手臂長度的目標時，這個動作同時需要活化兩個關節以上的肌肉，而中風個案難以迅速調整肘關節和肩關節的協調性(Subramanian, et al., 2020)，這使得中風後個案難以進行此類運動(Israely, Leisman, & Carmeli, 2020)。儘管代償動作可以幫助個案在短期內完成任務，但是透過代償動作改善動作功能是有限的，且代償動作的存在可能與長期性的問題如關節活動度的降低和疼痛有關(Levin, Kleim, & Wolf, 2008; Pain, Baker, Richardson, & Agur, 2014)。代償策略可能導致習得費用的模式(Alaverdashvili, 2008)，並阻止個案嘗試在日常活動中產生更多“正常”運動模式，這最終可能會限制患側手臂的功能結果(Jones, 2017)。而使用結構化的訓練程序有助於限制軀幹代償性的動作，並促進肩部屈曲—手肘伸展協調，並在伸直活動中透過額外的典型關節活動來增強“正常”伸直模式的發展(Oujamaa, Relave, Froger, Mottet, & Pelissier, 2009; Woodbury et al., 2008)。故此研究以上肢動作之角加速度，並以 AI 建模以偵測錯誤動作，比較前後測動作正確性的表現。

研究方法：收案標準：(1)經醫師診斷為中風患者；(2)在動作能力評量顯現問題，上肢 Brunnstrom Stage 為 III~IV；(3)生理年齡範圍 30 至 75 歲；(4)中風發病時間 6~84 個月之個

案；(5)簡易智能量表其認知分數為 24 分以上之認知正常或僅輕度障礙者；(6)可配合執行接受 12 次(計六週)，每次 30-40 分鐘，共十二次的上肢動作訓練。

收案人數：四位。

蒐集資料：使用 Arduino33 sense BLE 進行資料收集，利用其內部的六軸感測器 (LSM9DS1)(REF04)進行資料收集，六軸感測器 LSM9DS1 會偵測到使用者目前在三軸上的加速度和角加速度的大小，並將他們轉換成具體的數字，存到暫存器中，之後透過無線傳輸 (BLUETOOTH)將資料傳送到電腦端供使用。

正確動作資料建立：將 3 個 Arduino33 sense BLE 作為偵測動作角加速度的感測器，放置在患者的肩膀、手腕以及軀幹，而蒐集資料過程中將受試者動作進行，由職能治療師觀看影片並將錯誤動作進行標註(如表一)，並將資料放入到 CNN 中訓練模型。

訓練方式：受試者於治療過程中由職能治療師協助提醒修正代償動作，並進行開始前、介入完成及介入後六週給予初評、後評及六週後追蹤的評量。

研究結果：Ranganathan、Wang、Dong 及 Biswas (2017)的研究中，將正常人的手肘使用支架侷限手肘伸直的動作，藉以誘發代償動作，並且將可穿戴的傳感器放在上臂、前臂以及軀幹上，過程中發現軀幹出現代償動作偵測到的角加速度標準差比較大，而手肘伸直動作受限所以偵測到的角加速度標準差比較小，而辨別動作準確率則可高達 90%，因受試者採用正常人，與本研究比較，因為中風患者代償策略較多變，而本研究收案量少，蒐集之數據量相對較少，故準確率沒有像此研究這麼高。而可明確呈現上肢動作準確率的進步，可增進中風患者增進其大量練習之動機。

關鍵詞：中風、AI、上肢功能、正確動作、代償動作

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偏癱患者使用簡易內衣輔具之成效:個案報告

The Effects of a Simple Bra Dressing Aid to a Patient with hemiplegia: Case Report

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研究背景及目的：

偏癱患者常因手部肢體運用困難影響日常生活功能表現，目前職能治療師介入之穿衣技巧訓練多為穿衣褲及外套，且國內較少穿內衣輔具介入的案例分享，故本篇目的為探討偏癱患者個案使用內衣輔具之成效。

職能治療評估及介入：

個案為 52 歲女性，中風病史 3 年，左側偏癱，左手呈現屈曲高張，主訴平常需仰賴照顧者協助穿內衣，因此造成生活上不便。職能治療師運用活動分析拆解步驟並設計輔具將內衣一端固定，使個案可用單手完成任務；利用副木材料(山形夾板)、可調腰帶、夾子與尼龍繩設計簡易穿內衣輔具。治療師安排為期 5 週的介入 (2 次/週，30 分/次)，並請個案每天至少搭配

生活情境練習 1 次。

結果及討論:

職能治療師於過程中根據練習狀況及反饋調整，遇到的問題為輔具不易固定於褲頭上，且原先的山形夾板過小不便固定內衣背扣，其調整方式如下：1.增加山形夾板的高度提升固定效果。2.將山形夾板黏於可調腰帶上。3.新增掛繩夾子夾住內衣另一端以方便拉取至身體對側。經過以上調整，個案透過反覆練習後可獨立完成穿內衣的任務。此案例顯示透過低成本材料製作之簡易內衣輔具能有效提升穿衣獨立性效益，建議未來可追蹤維持成效。

關鍵詞：偏癱患者；穿內衣輔具

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駕駛模擬器訓練對腦中風個案的影響

Effect of driving simulator training for stroke patients

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研究背景與目的：中風個案面臨感覺動作、認知知覺的缺失和問題，影響到職能角色及日常生活的參與。其中，汽車駕駛為重要職能活動，是與社會維持連結的重要橋樑。但基於花費、安全性以及場域的受限，多數個案無法在真實情境中接受駕駛訓練。故本研究想進一步探討使用駕駛模擬器訓練後，對於中風個案駕駛能力與認知功能之影響。

方法：本研究透過文獻回顧的方法，於 Pubmed、Cochrane、Google 學術搜尋等網站搜尋文獻，英文檢索詞以「Stroke」、「Driving simulator」、「Driving ability」、「Driving rehabilitation」、「Driving training」作為關鍵字搜尋，共得 18 篇文獻，檢視過後刪除非相關文獻，剩餘 7 篇文獻進行歸納及統整，並提出結論及建議。

結果：研究者透過 7 篇文獻回顧和分析發現在 264 位 37~75 歲且具有駕照、動作肢體Brunnstrom stage IV~VI 等級腦中風個案，在進行 3~5 周、每周 2~3 次、每次 30~60 分鐘的駕駛模擬器訓練後，發現可以對個案的視覺處理速度、分散性注意力、選擇性注意力、反應時間、路標辨識、道路駕駛考驗上有顯著的提升。

結論：安全駕駛是需要高度注意力、快速反應與認知能力之雙重任務 (dual tasks)，以模擬器介入後對於中風個案認知能力有進步的效果。在任務相關及貼近實際駕駛的情境下訓練，不只相對於傳統介入方式更能帶來效益及類化效果，也能提升個案的參與動機。

關鍵詞：Stroke、Driving simulator、Driving ability、Driving rehabilitation、Driving training、駕駛模擬器、中風駕駛訓練、職能治療

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中風個案行走能力與認知動作雙重任務訓練介入的成效

Effects of Cognitive Motor Dual-task Training on walking ability in patients

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研究背景與目的：對於中風個案的復健治療計畫中，時常會將回歸社會視為重要的目標。但重返社區以動作層面上則會需要行走能力。安全的行走除了要求動作能力，也會需要認知能力的配合。認知動作雙重任務訓練，是透過認知及動作任務重複一項或一項以上的動作情境下，其增加視覺或聽覺來接受指令，而產出相對應的動作和回應，並在過程中會要求中風個案的姿勢控制能力。因此透過本篇文獻探討，探究認知動作雙重任務訓練，是否可以有效運用在促進行走能力的中風個案。

方法：使用 PubMed 搜尋引擎，以 Cerebrovascular Accident、walking、Dual task training，作為關鍵字，共得到 36 篇結果，在檢視文獻後，篩選研究方法必須是 18 歲以上具有中風診斷且發病超過 6 個月，治療介入需使用雙重任務訓練，文獻使用介入結果的前後測比較，治療結果針對行走能力、平衡、步態或跌倒風險，刪除非相關文獻，剩餘 4 篇文獻作為本次文獻探討。

結果：研究者在 4 篇文獻研究探討發現訓練行走能力時，使用認知動作雙重任務訓練可以在動作層面上有效提升行走能力並加強其類化至日常生活中；而認知層面上，可以透過行走訓練來使中風個案在行走時更有效的利用上認知功能，達到降低跌倒風險的成效。

結論：中風是目前很常見的疾病，在臨床上時常強調要讓個案回歸於社會，提高其生活獨立性，中風個案除了要訓練行走能力以外，更需要注意到跌倒的風險。在使用認知動作雙重任務訓練下，不僅可以提高個案在行走時安全性，更可以讓個案在回歸社會時更加獨立性。

關鍵詞：Cerebrovascular Accident、stroke、walking、Dual task training、Cognitive training、Motor training

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Wolf's 上肢運動計畫合併神經肌肉電刺激預防中風患者肩部半脫位成效性：案例研究

The Effectiveness of Wolf's Upper Extremity Exercise Program Combined Neuromuscular Electrical Stimulation to Prevent Shoulder Sub-luxation for Patient with Stroke: A Case Study

閔傳心 賴辰鎬 張妤綸 李欣桐 李佳璋 蔣孟軒

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背景：中風後的肩膀肌肉無力，引發肩部半脫位的發生機率約 81%。神經肌肉電刺激(NMES)與上肢功能性運動介入已被證實可預防中風後的肩部半脫位，然而對於上肢功能性運動介入之架構模式卻較少被提及，本篇將運用 Wolf 等人在 2012 年發表過上肢運動計畫結合 NMES 進行個案報告。

方法：收案對象為 65 歲男性，於 113 年 02 月 14 日診斷出右基底核合併周邊腦室血管梗塞導致左側偏癱，患者有原發性高血壓與第二型糖尿病合併神經病變。於 113 年 04 月 02 日測量左肩疑似半脫位(肩峰至肱骨頭間隙約 1 公分)，上肢布朗斯壯近端 II 期，遠端 I-II 期。患者於每日接受 60-75 分鐘電刺激與上肢運動治療，內容包含三大項目:①肩關節穩定與活動性訓練、手腕和手指運動、②肌力與反覆性動作訓練(強調功能性活動之預備)、③功能性活動，共介入 6 週。以傳格梅爾中風上肢評估量表(FMA-UE)和日常生活功能量表(FIM)與肩峰至肱骨頭間隙作為介入前後成效之量測。

結果：經六周介入，患者上肢布朗斯壯近端 III-IV，遠端 III，FMA-UE(滿分 66 分)進步 16 分、FIM (滿分 126 分)進步 7 分，肩峰至肱骨頭間隙減少 0.4 毫米。

討論：參考 2022 年 Chen 等人的研究，實驗組(NMES+運動+輔具)與控制組(運動+輔具)其 FMA-UE 分別是 20 分與 4.46 分，相對於本篇個案進步 16 分且無輔具介入即可達到效果，同時患者肩峰至肱骨間隙縮小無擴大，其 Wolf's 上肢運動計畫的指引可提供臨床治療師參考。

關鍵詞：中風、肩半脫位、神經肌肉電刺激、上肢運動

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短版伯格平衡量表於亞急性中風之反應性初探

Responsiveness of the Machine Learning-based Short-form of the Berg Balance Scale in Patients with Subacute Stroke: A pilot study.

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研究背景與目的：機器學習短版伯格氏平衡量表 (Machine Learning-based Short-form of the Berg Balance Scale, BBS-ML) 是一種基於臨床及學界知名之伯格氏平衡量表 (Berg Balance Scale, BBS)，並利用機器學習技術構建的簡化版本。一般而言，BBS 測試通常需要 20 分鐘，這於臨床情境之常規應用較為困難。反觀 BBS-ML 僅需 6 題，即可達到與 BBS 測試相似的準確度，從而減輕施測者和受測者的負擔，具有潛在的臨床應用價值。然而，目前 BBS-ML 的反應性尚未得到驗證，這使其作為成效評估工具的效能難以確定。因此，本研究欲驗證 BBS-ML 在亞急性中風個案的反應性。

研究方法：研究對象為中風三個月內且能遵從三步驟指令者。研究共需接受二次 BBS-ML 的評估：前測於個案至治療室復健一週內；後測於出院前一週內為之，期間至少間隔兩週。

研究結果：共 30 名個案參與研究。反應性部分，BBS-ML 的 Kazis' 效應值 (Kazis' effect size) 及標準化平均反應值 (standardized response mean) 分別為 1.52 及 1.25。相依樣本 t 檢定 (paired t test) 之 p 值 = .000，表示 BBS-ML 有足夠之反應性。另外，BBS-ML 施測時間平均可於 5 分鐘內完成，相較於 BBS，可大幅降低施測者與受測者之負擔。

結論：研究結果顯示，BBS-ML 於亞急性中風個案尚具備足夠之反應性，可能為一兼顧呈現

個案功能變化及效率之評估工具。但由於本研究樣本數較少且為單中心樣本，故結果判讀與應用需謹慎。

關鍵詞：機器學習、伯格氏平衡量表、中風、反應性

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驗證家屬代寫之原版與 16 題版中風衝擊量表的因素效度

Factorial validity of proxy-reported Stroke Impact Scale and 16-item short-form in persons with stroke

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背景及目的：健康相關生活品質 (health-related quality of life, HRQOL) 為個案受到健康/疾病狀態影響後於各生活層面之滿意程度。由於個案主觀感受的資訊常與客觀評估的結果不同，故 HRQOL 的分數有助於臨床與研究人員掌握個案當前的生活滿意度，從而瞭解其需求並擬定最佳化的個別治療計畫。中風衝擊量表第三版 (Stroke Impact Scale; third edition, SIS 3.0) 以及 16 題短版 SIS (縮寫為 SIS-16) 皆具備良好之信度與效度，且能同時反應多種生活層面之狀態/滿意度，為臨床與研究推薦使用的評估工具。此外，為提升其臨床可用性，SIS 3.0 與 SIS-16 皆可由家屬代寫，有利於評估受到動作或語言功能損傷影響，難以自行填寫問卷之個案。然而，家屬所關注之焦點可能與個案有別，顯示個案自陳與家屬代寫版之心理計量特性可能不同。同時，目前尚無研究探討家屬代寫版之 SIS 3.0 與 SIS-16 之因素效度，難以確認由家屬代寫時之 SIS 3.0 與 SIS-16 分數之有效性。有鑑於此，本研究欲驗證家屬代寫版 SIS 3.0 與 SIS-16 之因素效度，以確認其分數的可解讀性。

方法：我們抽取 Field Administration of Stroke Therapy–Magnesium Trial 資料庫之數據，並以驗證性因素分析 (confirmatory factor analysis) 檢驗家屬代寫版之 SIS 3.0 與 SIS-16 的因素效度。

結果與討論：除溝通向度具有大致良好的適配度 (comparative fit index = 0.98, Root-mean-squared error of approximation = 0.09, Standardized root-mean-square residual = 0.03) 外，家屬代寫版的 SIS 3.0 與 SIS-16 的整體與個別單向度模型適配度皆不佳。此結果顯示家屬代寫版的 SIS 3.0 與 SIS-16 難以有效反映中風個案的 HRQOL，故於取得更多支持性的實證數據之前，應避免使用家屬代寫版的 SIS 3.0 與 SIS-16 分數，以免誤判中風個案的 HRQOL。不過，SIS 3.0 溝通向度的模型適配度大致良好，說明家屬代寫的向度分數可提供有效關於溝通滿意度的資訊。因此，如使用者欲瞭解中風個案溝通方面的滿意度，SIS 3.0 溝通向度的題目與分數為有效且可選擇的評估工具。

結論：本研究結果顯示僅有家屬代寫的溝通分數能有效反映其 HRQOL，SIS 3.0 的其他向度

與 SIS-16 皆未能提供有效之評估。使用者應謹慎挑選適當的評估工具，以利準確且有效地掌握中風個案各生活面向的 HRQOL。

關鍵詞：中風、健康相關生活品質、因素效度、分數解讀

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以機械學習探索影響中風個案自覺改變之影響因素

Investigations of factors of self-perceived changes in persons with stroke

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背景及目的：個案自覺改變 (self-perceived change, SPC) 為個案主觀判斷本身功能之恢復情形。瞭解 SPC 之影響因素，有助於臨床人員掌握個案治療之關鍵，從而落實以個案為中心的治療模式；亦有利於研究人員瞭解相關恢復機制。然而，目前尚無研究探討影響中風個案 SPC 之因素，可能與缺乏良好之 SPC 評估工具，以及候選之影響因素間可能彼此相互影響，難以透過傳統統計如迴歸分析等方式處理有關。本研究欲以機械學習 (machine learning) 分析個案自覺生活品質改變問卷 (SPC in quality of life) 以克服前述困境，因為該量表應用於中風個案具備良好的信度與效度，且機械學習尤善於挑選特徵以預測分數，且不受獨立變項彼此相關之限制。

方法：抽取中風個案初評與半年後之數據，並隨機分配 80% 的資料進行機械學習訓練。我們共產生 1,000 個獨立的機械學習模型，並計算各題目/行為的千次模型獲選率，以表徵各題目的相對重要程度。

結果與討論：此 1,000 個模型的平均解釋力為 53%。結果顯示，出門次數沒有想要的多 (千次中選 261 次)、從事以前的工作有沒有困難 (千次中選 153 次)、很難專心 (148 次)、準備自己吃的東西有沒有困難 (77 次)、扣鈕釦有沒有困難 (61 次)，以及身體狀況妨礙家庭生活 (47 次) 是最關鍵的影響因素。

結論：這 6 項活動可能影響個案半年後自覺恢復程度。故專業人員可依據此活動設計治療目標與內容，從而最佳化個案半年後的自覺功能恢復程度；並納入更多題目以拓展模型的可解釋性，從而增進我們對於個案自覺功能恢復程度的瞭解。

關鍵詞：中風、個案自覺改變、預測因子

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以羅序模型檢驗世界衛生組織障礙評估手冊

A Rasch analysis of the World Health Organization Disability Assessment Schedule II

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背景及目的：世界衛生組織障礙評估手冊 (World Health Organization Disability Assessment Schedule II, WHODAS 2.0) 為身心障礙鑑定功能評估之工具之一。WHODAS 2.0 包含六個向度 (認知、移行、生活自理、人際互動、居家活動/工作與學習，以及社會參與)。然而 WHODAS 2.0 應用於中風病人之心理計量特性實證闕如，限制臨床及研究應用。本研究目的為以羅序分析檢驗 WHODAS 2.0，以提供穩定、有效之分數結果。

方法：本研究為次級資料分析，共 432 位中風病人符合篩選標準。研究者以羅序分析 WHODAS 2.0 題目，並刪除違反羅序模型假設 (適配度指標 infit/outfit mean square [MNSQ] > 1.4) 之題目。最後確認剩餘題目之適配度、平均羅序信度，及個別羅序信度。

結果：於刪除 9 題適配度不佳之題目後，剩餘 27 題適配度良好 (infit and outfit mean square = 0.60–1.32)，支持其個別單向度。WHODAS 六向度皆有良好之平均羅序信度 (0.92–0.96) 及個別羅序信度 (羅序信度超過 0.90 之受試者百分比為 76.0%–91.5%)。

結論：初步結果顯示 WHODAS 2.0 之 27 題版本具備良好之建構效度及羅序信度，可有效提供六種日常生活功能之執行困難程度之評估。後續研究宜進一步驗證 WHODAS 2.0 其餘心理計量特性，包含信度及反應性，以提供臨床及研究人員具備實證之評估工具。

關鍵詞：中風、世界衛生組織障礙評估手冊、身心障礙鑑定、羅序分析

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中風患者上肢動作改善對日常生活品質之影響

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目的：上肢功能障礙是中風患者常見的症狀，影響患者的日常生活能力。職能治療致力於改善患者的日常生活獨立性，但臨床上在空間等諸多限制下，使職能治療師難以直接針對日常生活活動進行訓練。因此本研究旨在探討中風個案在接受職能治療介入後，上肢功能的改善是否與其日常生活活動品質的提升存在關聯性。

方法：本研究共收案 27 名 PAC 中風個案。所有患者在職能治療介入前後均接受 Fugl-Meyer 和 MAL 評估，分別評估患者的上肢動作功能及日常生活中患側手的使用量和品質。數據收集包括患者的年齡、Fugl-Meyer 前後測分數、MAL 使用量及品質前後測分數。透過配對樣本 t 檢驗比較前後測分數的差異，並使用 Pearson 相關分析探討 Fugl-Meyer 改善分數與 MAL 使用量及品質改善分數之間的相關性，進一步進行線性回歸分析以驗證相關性。

結果：結果顯示，研究對象的平均年齡為 69.7 歲。Fugl-Meyer、MAL 使用量和品質的 t 值分別為 3.72、3.83 和 4.31，p 值均小於 0.001。上肢動作改善與使用量 ($r = .45, p < 0.05$) 及品

質 ($r = .50, p < 0.001$) 之間存在顯著相關性。

結論：本研究顯示，中風患者在接受職能治療介入後 Fugl-Meyer 的分數提升對日常生活活動的獨立性及品質具有實質影響。建議未來進一步探討此研究結果，深入分析其背後的原因和機制。

關鍵詞：中風、職能治療、上肢功能、日常生活活動、相關性分析

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早期帕金森氏症個案介入方案的可行性探討

Feasibility study of an intervention program for people with early stage Parkinson's disease

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背景：早期帕金森氏症個案已出現動作及非動作症狀影響日常生活表現及生活品質，但仍缺乏針對早期帕金森氏症個案的介入方案。

目的：探討結合自我管理的介入方案是否能維持或提升個案的功能。

研究方法：招募 6 位早期帕金森氏症個案，侯葉分級介於 1~2 級，年齡為 54~69 歲，慣用手皆為右，實驗組個案接受遠距自我管理方案訓練，介入頻率為每週 2 次，每次 1 小時，共 12 次，遠距自我管理方案組 1 小時由治療師以遠距的方式提供介入，另 1 小時由個案自主練習，控制組則不會接受任何介入，為現有的臨床實務現況。主要結果測驗包含箱與積木測驗、諾丁漢延伸性日常生活活動量表、起身行走測試、一般性自我效能量表、台灣活動量調查問卷（長版）、匹茲堡睡眠品質量表、台灣簡明版世界衛生組織生活品質，個案於介入前後完成前後測，資料分析以敘述性統計為主。

結果：實驗組在手功能表現、行走速度及日常生活功能表現皆有提升，改善的百分比範圍 0~46.86%，在總活動量、睡眠品質、自我效能、生活品質亦有提升，改善的百分比範圍 4.17~50%。控制組個案在總活動量、睡眠品質、自我效能、睡眠品質有下降。可行性分析的部分，實驗組對於遠距介入滿意度高，且自主練習遵從度高，每週自主練習總時數的平均為 82.87 ± 12.45 分鐘。

結論：針對早期帕金森氏症個案進行遠距自我管理介入具有可行性，結果顯示可維持或提升個案在動作及非動作的各項表現。

關鍵詞：關鍵字：日常生活功能、遠距復健、自我管理、介入方案

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動力型手部外骨骼應用於慢性腦中風患者手部功能恢復之滿意度調查

Satisfaction survey of powered hand exoskeleton designed for hand recovery in chronic stroke patients

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腦中風是造成全球醫療負擔與失能人口增加的主因之一，中風所造成的上肢功能缺損影響患者的日常生活功能獨立性。目前，機器輔助訓練已被廣泛應用於臨床治療，用以改善腦中風患者的上肢動作功能；然而現有的市售裝置價格昂貴、穿戴過程需要他人協助才能操作。本研究團隊已開發出一款動力型手部外骨骼，本體採用 3D 列印技術製作，具有兩個可替換之微型電動推桿，其動力透過連桿傳遞至前三指指套以輔助手指伸展、曲屈動作。本團隊初步臨床研究結果指出，慢性腦中風患者在使用此動力型手部外骨骼，經過 8 周 15 分鐘伸手取物的活動訓練後，上肢動作功能有顯著的提升。為了解腦中風受測者對穿戴此手部動力外骨骼之主觀感受，本研究採用滿意度問卷調查方式，13 位腦中風受測者以 0~10 分之視覺類比量表填答，問卷量測題向包含操作過程以及外骨骼裝置；操作過程題目包含：整體滿意度、幫助手指打開程度、手部動作進步程度；外骨骼裝置題目包含：裝置輕便性、穿戴舒適性、裝置操作難易程度、外觀美觀程度，資料蒐集方式為受測者獨立填寫，不方便書寫者以口頭說明由研究者協助填寫。結果顯示腦中風受測者認為本研究動力型手部外骨骼裝置整體滿意度高(7.3±1.4)，認為該裝置容易自行穿戴與操作，並且對於手指打開及手部功能有一定程度的幫助，此結果有助於讓腦中風患者於臨床自主穿戴與練習使用。然而在裝置輕重程度(4.1±1.57)、與裝置美觀(5.4±1.98)方面，受試者則給予較低的評價。雖然外骨骼主要結構已採用輕量化的 3D 列印材質設計，並且裝置整體重量僅約 400g(含電池)，但腦中風受測者仍認為裝置重量偏重，導致穿戴的遠端肢體手部變重，進而需要更多近端肢體前臂支撐抗重心能力，才能完成伸手取物活動。這對於缺乏近端肢體控制能力中、重度損傷的腦中風患者，是十分挑戰的活動。綜合本研究問卷評量結果，整體而言，受測者在使用外骨骼後滿意度高並且容易上手使用，整體設計符合臨床患者的需求，未來研究可以探討結合遠端手部外骨骼搭配相應近端肢體前臂支撐系統，讓中風患者在有足夠近端肢體穩定度下，能藉由動力型手部外骨骼輔助下，大量重覆練習伸手取物動作，進而促進手部功能的恢復。

關鍵詞：3D 列印,腦中風,外骨骼

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互動式音樂手套結合上肢姿勢控制於腦中風之手功能訓練

Hand Rehabilitation of Combined Interactive MusicGlove and Postural Control for Individuals with Stroke

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前言：互動式音樂手套（MusicGlove）結合音樂回饋、遊戲積分、和簡易操作等特色，已廣泛應用於腦中風個案之手功能訓練，且在精細動作、上肢表現、和患手使用等，已獲得臨床實證。然而個案使用音樂手套時，沉浸於音樂和遊戲中，經常忽略協同動作的發生。目的：了解使用音樂手套於腦中風之手功能訓練時，結合上肢姿勢控制，對於個案手部表現的影響。方法：招募腦中風個案。介入期有兩階段，階段一為自由操作期，以個人偏好的方法操作音樂手套，階段二為上肢姿勢控制期，以指定的姿勢操作音樂手套（姿勢一、手肘伸直向前平舉 90°，和姿勢二、屈肘 90°）。每期共兩周，每周五天，每天 30 分鐘。三個評估點，階段一前(T0)、階段一結束(T1)和階段二結束(T2)。評估項目：傅格－梅爾動作評估量表、握力、捏力（指側、三指、指尖捏力）、九孔插棒測試、盒子－積木測試、和臨床觀察。結果：本研究發現握力和盒子－積木測試的表現，三次的評估結果趨於進步。然而傅格－梅爾動作評估量、捏力和九孔插棒測試，T1 表現最好，而 T2 表現皆趨於退步。臨床觀察則發現，姿勢一肘伸直時，個案邊操作音樂手套，肩關節無法維持屈曲角度；姿勢二肘屈曲，肩關節逐漸內轉和伸直的。討論：使用互動式音樂手套時，應避免協同動作發生，以維持良好的動作品質。

關鍵詞：互動式音樂手套，手功能訓練，協同動作

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手部機器輔助訓練應用於中風患者上肢遠端動作功能復原成效之綜論

A Review of the effect of Hand-Assisted Robotic Training on the Recovery of Distal Upper Limb Function in Stroke Patients

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研究背景：中風個案常有上肢動作功能損傷，近年來輔助復健訓練之手部機器發展快速，目前研究多著重於近端，不過有研究指出遠端較近端訓練可能激活更多大腦運動皮質，更有效率地改善肌力和動作。

研究目的：本文旨在推估機器輔助治療對於中風患者上肢遠端動作功能之成效，作為臨床應用與研究的參考。

研究方法：以關鍵字搜尋電子資料庫 (PubMed, Google Scholar, Scopus)，納入 (1)個案為中風成人 (2)以機器輔助療法介入 (3)訓練上肢遠端 (4)主要評估動作恢復療效 (5)為隨機控制試驗 (6)以英文發表。

研究結果：初步搜尋關鍵字獲得 322 篇，閱讀摘要及內容後剩 26 篇，最終納入 11 篇。最常見介入頻率為每次 40 分鐘、每週 5 天、持續一個月。治療介入的機器種類有外骨骼、末端執行器、肌電圖驅動；運作模式有感覺器驅動、腦機介面控制、肌腱式抓握原理電子控制器等；介入模式分為主動、主動協助、被動；訓練內容則分為單純手部動作及加入電腦輔助兩種。

療效部分則在 Fugl-Meyer Assessment (FMA) 、Modified Ashworth Scale (MAS) 、Action Research Arm Test (ARAT)表現上與傳統療法有組間差異。

研究結論:研究結果顯示動作損傷之中風患者，機器輔助治療可增進整體上肢功能及遠端動作。然而，不同訓練模式可適用於不同個案，概化至不同中風階段的個案及其動作損傷程度之推論效果有限。

關鍵詞：機器輔助治療、遠端上肢、中風

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反覆性誘發療法(川平法)及其合併療法運用於中風上肢動作復健：文獻回顧

Efficacy of repetitive facilitative exercise (RFE) and its combined therapies in upper limb motor rehabilitation post-stroke: A review of literature

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前言：近年由川平和美教授提出的反覆性誘發療法(Repetitive facilitative exercise, RFE)逐漸被運用於改善中風患者的動作與功能，此 RFE 療法以中樞動作程式與反射理論為基礎，強調大量、反覆動作練習以強化神經迴路連結、促進患側自主動作。此回顧欲了解 RFE 運用於改善中風上肢動作復健之療效。

方法：於 PubMed 等資料庫搜尋相關文獻後，共彙整 8 篇 RFE 單獨和 RFE 合併其他治療(如：肌肉電刺激、肉毒桿菌注射、重複經顱磁刺激)運用於改善中風患者上肢動作與肌肉張力的文獻，此 8 篇文獻皆有使用控制組以探討 RFE 療效。

結果：分別各有 4 篇文獻探討 RFE 單獨介入及 RFE 合併其他治療的成效。回顧文獻後發現 RFE 相較於傳統復健，對於亞急性患者上肢功能性恢復效果更顯著，能有效減少動作損傷與肌肉痙攣。另發現 RFE 與鏡像治療都能有效改善急性中風後上肢功能。此外，發現 RFE 結合低振幅連續肌肉電刺激可更顯著地提升亞急性患者手臂功能、RFE 結合 A 型肉毒桿菌注射可改善慢性患者肌肉痙攣及上肢功能、RFE 結合重複經顱磁刺激有助增強慢性患者腦部神經可塑性。

討論：此回顧研究發現 RFE 可改善中風患者上肢動作與降低肌肉痙攣，此外，RFE 結合其他療法亦具有同等或更好的療效，顯示 RFE 單獨介入或合併其他治療具有實證及臨床實務使用上的潛力。

關鍵詞：中風上肢復健，反覆性誘發療法，川平法

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感覺動作治療對中風上肢功能療效：個案報告

The Effect of Somatosensory-Motor Training on Upper Limb Function after Stroke: A Case Report

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背景及目的：動作功能障礙及體感覺受損是中風患者最常感到困擾的問題，進而可能影響其患肢的使用意願並影響生活品質。目前現有的療法主要聚焦於單一的動作或感覺訓練，單獨的動作訓練和感覺訓練都有其成效，然而目前有研究指出，良好的動作品質與體感覺訊息的回饋密不可分，故若能整合動作與感覺訓練，可望同時提升兩者的功能，但此訓練方式的療效目前尚待確認。

本個案報告旨在呈現慢性中風患者進行體感覺動作整合治療後的兩部分療效，包含體感覺功能及上肢運動功能的恢復，並驗證此療法能否有效改善慢性中風患者的生活品質。

個案問題：個案為 58 歲女性，於民國 111 年 9 月右側被殼 (putamen) 發生出血性中風，造成左側（非慣用側）偏癱，主要問題為上肢動作及體感覺功能異常。

職能治療評估及處置：個案在 113 年 1 月接受前測評估後，進行了為期五週、每週三小時的體感覺動作整合治療活動。在療程結束時以及三個月後，分別進行了後測和追蹤評估。研究者使用 Fugl-Meyer Assessment-Upper Extremity (FMA-UE) 評估動作功能，使用 Revised Nottingham Sensory Assessment (rNSA) 評量體感覺功能，並使用 Motor Activity Log (MAL) 評量其患側上肢在日常生活中的使用頻率及動作品質，此外，也使用機器學習短版 Stroke Impact Scale 3.0 (ML-SIS) 來評量其生活品質。

結果：個案在接受 15 小時的治療後，動作方面有進步，FMA-UE 分數由 52 分提升至 60 分，體感覺功能也有所提升，rNSA 由 114 分提升至 116 分，且在治療後及追蹤期間皆持續進步，FMA-UE 進步至 66 分，rNSA 進步至 117 分。患側上肢在日常生活中的使用頻率及動作品質皆提高許多，MAL 中的使用頻率由 21 分提升至 58 分，動作品質由 35 分進步至 74 分，個案的生活品質亦有改善，ML-SIS 分數由 82 分進步至 112 分。

結論：體感覺動作整合治療可能有潛力同時改善中風患者上肢動作及感覺功能，並且能提升患側上肢的使用頻率及動作品質，進而可能提高其生活品質，且此治療效果能延續至 3 個月後。

關鍵詞：體感覺動作整合治療、動作功能、體感覺功能、中風、上肢功能

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虛擬實境對慢性中風患者上肢動作功能之成效

The effectiveness of virtual reality on upper limb motor function in patients with chronic stroke

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背景/介紹：職能治療對於慢性中風患者上肢復健多以常規治療(Conventional training, CT)為主，具有便捷、資金需求較低、實體回饋多等優勢，但缺點為治療室環境限制及人力需求較高。虛擬實境療法(Virtual reality, VR)能透過體感裝置偵測及分析動作、模擬多元情境、自動化紀錄與調整訓練參數，更能提升患者動機，但缺點為具較少真實情境回饋，若透過 VR 結合 CT 可能具有更完整的治療效果。近年來有許多研究探討 VR 臨床運用的療效，但卻鮮少比較 VR+CT 與純 CT 兩者的效益。因此，本研究目的為比較 VR+CT 與 CT 於慢性中風患者上肢動作功能之成效。

方法：本篇為系統性回顧，以 Google scholar、Medline complete 資料庫中篩選近 10 年文獻，包含 6 個月以上慢性中風患者之隨機對照試驗。介入為 VR 結合 CT，而對照組為 CT，進行每週至少 3 次的療程。

結果：本研究納入 5 篇隨機對照試驗，上肢動作功能部分，有 3 篇顯示 VR+CT 與 CT 組具組間顯著差異。有 1 篇顯示握力有組間顯著差異，有 1 篇顯示腦波圖在 VR+CT 組介入後比 CT 組更為活化。介入總時數部分，VR+CT 結合 CT 介入時數達 12-20 小時成效顯著，而 6 小時的文獻在粗大動作中則無顯著成效。

結論：本研究表示 VR+CT 比純 CT 治療對於慢性中風患者改善整體上肢功能效益可能較佳。但仍需更大規模的研究支持其結果。

關鍵詞：{Non-Immersive} or {Immersive virtual reality} {chronic stroke} or {cva}
AND{upper extremity training}

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雙側上肢動作訓練於中風感覺動作功能之成效

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前言：中風為造成國人失能的主因之一，常見後遺症包含感覺及動作功能缺損，皆可能造成患側肢體廢用，進而導致上肢功能表現與生活品質下降。過去研究支持，雙側上肢動作訓練藉雙手同時執行相同任務，可有效整合雙側大腦，促進腦區間的連結與協調，達到改善上肢動作功能之成效。然而，此療法對於上肢感覺功能之成效仍不明確，故本個案報告欲探究雙側上肢動作訓練對上肢動作及感覺功能之影響。

方法：個案為 55 歲男性，112 年 7 月於右側大腦發生阻塞性中風，造成左側偏癱，自陳上肢動作及感覺功能有異常。於 113 年 4 月前測評估後，個案接受連續五週，每週 2-3 次，共 15

小時之雙側上肢動作訓練，並於治療結束後接受後測評估。本研究療效指標採用：Action Research Arm Test (ARAT) 評估上肢功能性動作、Revised Nottingham Sensory Assessment (rNSA) 評估感覺功能、Motor Activity Log (MAL) 評估患側手使用情形。

結果：經 15 小時雙側上肢動作訓練，個案之動作及感覺功能皆有進步。ARAT 總分自 3 分進步至 21 分；rNSA 總分自 68 分進步至 80 分，在手肘、手腕及手掌處之感覺功能皆有進步；MAL 中患側手使用量自 0.37 分進步至 0.97 分。

結論：雙側上肢動作訓練除對慢性中風病人之動作功能具成效，亦可能具潛力提升病人之感覺功能，並促進患側手的使用頻率。

關鍵詞：雙側上肢動作訓練、中風、動作功能、感覺功能

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機器輔助於脊髓損傷患者上肢功能之成效回顧

Effects of Robotic-Assisted Interventions on the Upper Limb Function of the SCI Survivors: A Literature Review.

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背景：脊髓損傷可能影響個案之手功能及日常生活功能。以職能治療的觀點而言，若個案剩餘感覺/肌肉功能可以保留，並發揮其最大效能，則能促進個案職能之參與。機器輔助介入為近年新興之復健媒介。此文獻欲回顧機器輔助介入於脊髓損傷患者上肢功能之療效，以協助職能治療師了解此介入之臨床效益。

方法：作者使用 PubMed、Medline 及 Embase 資料庫搜尋相關文獻，鍵入關鍵字，“spinal cord injury”、“robotic or exoskeleton”、“hand or upper limb or arm or wrist”。納入條件為：(1)十年內發表之文獻；(2)可取得文獻全文；(3)參與者皆為脊髓損傷患者；(4)限定為機器輔助介入方式；(5)僅針對上肢進行介入；(6)非產品介紹。

結果：共收錄六篇文獻。介入方式可分為軟式機械手套及上肢輔助機器二種，前者針對手部精細操作；後者訓練範圍為前臂。研究結果顯示，機器輔助介入可提升脊髓損傷個案之手功能及生活獨立性，且可配合遊戲提升個案之復健動機。

結論：機器輔助介入於脊髓損傷個案上肢功能有顯著療效，然本文獻回顧缺乏傳統職能治療與機器輔助介入之比較，故難推論其優劣與差異。另，收錄文獻所使用之評估工具皆針對手功能，未將個案所需輔助程度列入評量，易錯估個案真正需求。未來可針對上述限制發展研究，以提升機器輔助介入於職能治療之臨床成效。

關鍵詞：脊髓損傷、機器輔助介入、軟式機械手套、上肢功能

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遠距醫療對中風患者平衡訓練之文獻回顧

Systematic Review of Telehealth Balance Training for Stroke Patients

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研究動機：由腦血管病變造成的神經功能缺損（俗稱中風），會導致病患行動能力不佳及跌倒的風險。然而許多中風患者因家庭因素，無法有效入院而無法持續接受行走、平衡或下肢運動，凸顯現行復健醫學模式的不足。因此，本研究旨在探討遠端視訊復健對於中風患者下肢平衡的可行性，以期能夠找到居家復健方式，提升患者的康復效果並繼續參與職能治療。

研究方法：本文搜尋的電子資料庫為 EMBASE、PUBMED，並輸入關鍵字：telehealth、stroke、rehabilitation、balance，勾選隨機對照臨床試驗(RCT)，搜尋日期至 2024 年 9 月，共蒐集出 23 篇相關文獻，再藉由量化的工具的 Modified Jadad Score 評析。經評讀後，計有 13 篇 4.5 分以上高品質的文獻，可供納入研究依據。

結果：結果顯示，透過遠距復健進行的評估項目不僅涵蓋平衡訓練，還包括上肢訓練、日常生活活動及生活品質。針對 Berg 平衡量表（BBS）的測量結果，顯示個案在接受遠距復健後有顯著進步，透過增強的肌肉力量、轉移訓練以及動態姿勢的適應可能促進了中風個案下肢總體平衡的改善。

結論：本研究發現，遠距醫療雖可讓中風病患在家進行復健，但其復健動作的落實缺乏復健治療師的完整觀察。未來台灣若能普及遠距醫療並確實其復健動作，不僅提升民眾復健的便利性與效能，進而促使患者持續參與職能活動。

關鍵詞：telehealth、stroke、rehabilitation、balance

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使用外骨骼輔助行走訓練對中風個案的介入成效文獻回顧

The effectiveness of intervention in stroke cases using exoskeleton-assisted walking training

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背景：腦中風個案常需進行行走能力訓練。外骨骼下肢機器人為訓練下肢功能障礙者行走能力之新興科技。

目的：旨在蒐集和分析下肢外骨骼行走訓練的介入研究並彙整其介入成效。

方法：使用 PubMed、Embase、CINAHL 和華藝線上進行文獻搜尋，關鍵字包括 exoskeleton、stroke、gait、walking，搜尋年限為 2013 年 7 月至 2023 年 7 月。納入條件：(1) 受試者為中風個案；(2) 接受下肢外骨骼機器人訓練；(3) 結果評量包含獨立行走能力、行走速

度或平衡；(4)比較外骨骼步態訓練與傳統步態訓練的差異；(5)研究類型為隨機控制試驗。篩選過程包括初步篩選標題和摘要，隨後對全文進行詳細評估。

結果：本研究共納入 13 篇研究，受試者大多為亞急性期中風個案，少部分為慢性中風個案。結果顯示，使用外骨骼步態訓練後，中風患者的行走功能在多方面均有顯著改善，包括獨立行走能力、行走速度、行走距離以及下肢功能（如膝關節屈曲和踝關節背屈）。外骨骼步態訓練能在較短時間內提升行走功能，但與傳統步態訓練相比，兩者的最終效果沒有顯著差異（ $p>0.05$ ）。

結論：外骨骼步態訓練對中風個案的行走功能具有正向影響，但目前研究樣本較小，且缺乏長期追蹤數據。建議未來研究應擴大樣本量，進行長期追蹤以準確評估外骨骼步態訓練之成效。

關鍵詞：外骨骼機器人、行走訓練、中風、介入成效、文獻回顧

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心理健康 (Mental Health)

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手工藝治療性團體介入於精神障礙患者之成效探討

The Effectiveness the Handcraft Activities Group with Mental Illness.

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研究背景：精神障礙患者受精神症狀影響，導致多功能退化，常見的功能退化包含日常生活、認知、人際社交、情緒調整與執行功能等。因此透過有目的性之治療活動，提升精神障礙患者其操作能力建立成功之經驗甚為重要；本研究主要透過手工藝系列性治療活動，藉由具成品性之任務導向活動設計並提供自我評值問卷，期待提升精神障礙患參與意願、提升操作功能與自我效能感。

研究方法：本研究場域為南部某精神專科醫院日間病房之精神疾病患者，由實習治療師帶領（兩名職能治療師擔任協同與督導），以「金屬絲」為媒介執行手工藝治療性活動，設計每次 70 分鐘共五次之系列性團體，參與者於每次活動結束填寫自我評值問卷，問卷包含以下三個面向：活動喜好、治療成效、自我滿意度，使用六點量表計分。

研究結果：5 次團體共 34 位精神疾病患者參與(128 人次)，結果顯示：個案喜好手工藝活動（平均分數：4.81）、滿意自己訓練的功能面向(手工藝技巧：4.91；空間組職能力：4.86；問題解決能力：4.97)、滿意自己的表現(參與活動自我滿意度：4.95；獲得成就感受：4.91)。

結論：手工藝治療性團體對於精神疾病患者具備活動喜好、獲得操作功能之訓練，得到自我滿意與成就，顯示手工藝活動可以作為臨床上合適的媒材。

關鍵詞：手工藝、職能治療、精神障礙疾患、自我效能、治療滿意度

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以精神病人為對象的門診復健團體治療方案—個案報告

歐欣怡

馬偕紀念醫院

針對精神病人的復健服務，發展一週一次的門診復健團體，設計課程上考量如何使成員在沒有來參加團體的時間，將團體所學應用到生活中，因此引入「生活型態再設計」概念，希望藉由健康生活的討論與規劃，使成員建立健康的生活型態。

本文所撰寫的個案為思覺失調症病人，每週一次參加 90 分鐘的門診復健團體，為期一年，治療內容包括：運動與自我健康管理、休閒生活安排與日常生活功能、認知功能、手部靈活度與精細動作、情緒辨識與人際互動訓練、壓力調適訓練與放鬆技巧練習、職前準備訓練。使用普渡手功能測驗、褚氏注意力測驗、世界衛生組織生活品質問卷-台灣簡明版，並佐以質性分析評估療效。個案經過治療後，在所有量表的分數都有一些進步，且順利轉介支持性就業，直到目前為止已穩定就業一年以上並持續工作中。此外，個案在生活型態上也有很大的改變，藉由團體中的主題課程與討論，個案體認到運動的重要性，也開始增加人際互動與出門的頻率。治療後除了工作時數增加，個案也開始運動，假日生活增加與朋友出遊活動，休閒種類增加。

未來研究或許可針對參加一週一次門診復健團體的所有成員，收集更多樣本，進行治療成效分析，瞭解此一治療模式之可行性。

關鍵詞：門診復健團體、生活型態再設計、精神疾病、職業重建

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應用人類職能模式設計之枯山水團體於慢性精神病患者減低社交焦慮增進自我效能和提升生活品質之成效初探

Does participate in Zen Garden group Reduce Social Anxiety, Improve Self-Efficacy and Quality of Life? Applying model of human occupation to the treatment group suffering chronic mental illness .

葉俞佐

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背景與目的：慢性精神病患者在臨床中常有社交焦慮度高，自我效能感不佳，易產生低自尊，自環境中退縮，造成社會參與生活適應更顯困難，且生活品質低落。然而，大多數的職能行為須與環境互動，個體向他人傳達情感、意念、需求，整合情境因素和他人適當交流，達成目標。即使是功能不佳的病人仍渴望與環境良好互動經驗，獲得友善人際關懷以及情緒

抒發的管道。故特別規劃以人類職能模式設計「藝遊未境愛上枯山水」團體，製作迷你枯山水放鬆身心，分享交流，協助患者發展自然人際支持、又可從中獲得情緒抒發，將可滿足病人需要。於團體結束後對團體成效進行分析，期待研究結果做為能臨床工作者提供服務、照護之參考。

方法：研究對象為區域醫院精神科日間病房慢性精神病人，無聽覺與語言障礙，有參與休閒團體意願之病人，15位。所規劃人類職能模式休閒團體，共12週，每週一次，每次70分鐘。介入成效以自我效能感量表（General Self-Efficacy Scale, GSES）、社交情境焦慮量表（Social Avoidance and Distress Scale, SAD）、世界衛生組織生活品質問卷中文版（WHOQOL-BREF）前後測評量。分析團體介入的反應。分析不同患病年數、穩定治療年數、精神醫療診斷、教育年數之患者對團體介入反應。

結果：

一、本研究完成前後測13位，個案平均年齡53.9+13.35歲，患病年數平均25+12.9年，男性8人(61.5%)，女性5人(38.5%)。

二、團體介入後，：

(1)患者在「社交苦惱」前後測達顯著差異，「社交迴避」前後測則未達顯著。「社交情境焦慮度總分」達顯著差異。

(2)「自我效能感」：患者在自我效能感量表前後測達顯著差異。

(3)「生活品質」方面：分析患者在世界衛生組織生活品質問卷中文版前後測得分，其中「整體生活品質」和「整體心理健康」得分達顯著差異。量表四個健康範疇分析，「心理健康範疇」和「社會關係範疇」前後測達顯著差異。「生理健康範疇」和「環境範疇」前後測則未達顯著差異。

結論：分析本研究初探應用人類職能模式設計之枯山水團體應可減低慢性精神病患者的社交情境焦慮，尤其是降低社交苦惱。亦可提升患者自我效能感以及生活品質。且較適於思覺失調症教育程度高中職以上或是沒有工作處於復健階段的病人。未來研究仍需增加樣本數與更為嚴謹方式驗證介入成效。

關鍵詞：慢性精神病、思覺失調症、人類職能治療模式、自我效能、社交情境焦慮、生活品質、枯山水、Social Avoidance、Social Distress、Social Anxiety、Self-Efficacy、Quality of Life、Zen Garden、Model of Human Occupation

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中強度負重運動團體於慢性住院精神病友之成效

Effects of moderate-intensity and weight-bearing Exercise group on patients with Chronic Psychiatric Disorders (CPD)

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目的：規律運動及身體活動在生理、心理和社會領域皆有顯著益處，也是職能治療師介入精神疾病的重要手段。目前臨床上提供的運動及身體活動多為輕度強度，且較少涉及額外負重。因此，本研究期待探討中強度及負重運動團體對精神疾病患者的成效。

方法：於中部某精神專科醫院的慢性病房，自 111 年 08 月至 113 年 07 月，每週進行一次中強度及負重運動團體，共納入 133 位參與者（年齡 $m=54.0$ 歲 ± 11.5 ）。使用非獨立樣本比率卡方檢定分析 111 年 08 月、112 年 08 月及 113 年 07 月的體適能表現（功能性體適能測驗）、骨骼肌密度(SMI)及動機表現（意志量表）的變化。

結果：統計分析結果顯示意志量表於 111 年及 112 年比較顯著改善($p<.05$)，112 年及 113 年比較則無顯著差異；SMI 於 111 年及 112 年比較顯著改善($p<.05$)，112 年及 113 年比較則無顯著差異；功能性體適能表現於 111 年及 112 年比較，上肢肌力顯著改善($p<.05$)，動態平衡顯著變差($p<.05$)，112 年及 113 年於靜態平衡、動態平衡、下肢肌力、心肺耐力顯著改善($p<.05$)。

結論：精神疾病患者的老化速度比預期更快，中強度及負重運動團體能改善精神疾病患者的動機及體適能表現，有效且安全地提供規律且具運動強度的運動和身體活動介入，以達到減緩及逆轉衰弱、改善負性精神症狀及建立健康生活方式的益處。

關鍵詞：關鍵字:精神疾患、中強度運動、負重訓練

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中高齡者日常活動與心理健康狀況之關聯性分析

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本研究使用衛生福利部國民健康署辦理「中老年身心社會生活狀況長期追蹤調查」2011 年及 2015 年結果，探討中高齡者日常活動與心理健康狀況之關聯性。研究對象為有完整回答心理健康與生活滿意度及情緒支持度者，共將 3332 人納入本研究。採用壓力狀況量表、抑鬱 (CES-D) 量表及生活滿意度量表三項結果定義心理健康與生活滿意度，使用卡方檢定及羅吉斯迴歸分析影響其結果之因素。

卡方檢定結果中男性、教育程度為高中職以上、已婚或有伴侶、認知狀況良好、基本日常活動無困難、工具性日常活動無困難、情緒支持度佳、居住滿意度良好、聯絡頻率為每周的親友數量較多及有參加團體活動者心理健康及生活滿意度佳的比率高，且達顯著相關，社會互動部分單變項羅吉斯迴歸結果中聯絡頻率為每週的親友數量及是否參加團體活動與心理健康及生活滿意度也有顯著關係。

本研究發現中高齡者日常活動無困難、有參與團體活動、每週聯絡的親友數量較多者心理健

康狀況及生活滿意度良好的比率較高。中高齡者若能維持日常生活能力、參與團體活動、擁有關係緊密的親友，能從互動的過程中獲得心理支持，以提升心理健康及生活滿意度。

關鍵詞：中高齡心理健康；日常活動；社會互動

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人類職能模式運用於急性住院個案之成效

Applying Model of Human Occupation to a Acute Hospitalization Client

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目的：本文以 MOHO 為參考架構運用於一位於南部精神專科醫院急性住院中即將轉復健病房的個案，以協助其未來可順利重返復健工作訓練為目標進行介入。

方法：藉由人類職能模式進行全面性評估，與個案討論並共同制定治療目標，包含改善活動持續專注度及減少因焦慮情緒而影響面對問題的能力。針對提升個案活動持續專注度，治療師安排符合個案能力及興趣之事務，提供會談並訂定目標值，透過集點表單給予個案視覺回饋。針對個案的焦慮情緒，除鼓勵參與靜心團體，於非活動時間一同與個案進行正念技巧練習及實務、撰寫心情日誌，以提升對自我情緒的覺察，並使用具有良好信效度的貝克焦慮量表及多維度內在感受覺察檢視介入成效。

結果：經兩周介入下，透過表格集點的制度及活動的設計，個案單次活動分心次數下降約為 2 次；貝克焦慮量表介入前後施測結果皆落在中度困擾，但其中 2 評分向度有分數明顯減少；多維度內在感受覺察 8 個向度中，介入後有 6 個向度提升。另外，個案向工作人員/其他個案抱怨的頻率降低。

結論：總和以上客觀及主觀的結果顯示部分介入具有成效，期待未來能加長介入時間，更有效提升個案情緒穩定性，及持續專注度，以順利重返復建工作角色。

關鍵詞：職能治療、Model of Human Occupation、專注度、焦慮、急性病房、復建工作者角色

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降低慢性精神病人自我照顧能力缺失率

Decrease self-care impairment rate of chronic psychotic patients

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臨床觀察發現，本院大部分慢性精神病人缺乏相關衛生常識，社交禮儀的概念不足，較不重視個人衛生清潔，造成個人衛生之成效不佳。

根據文獻，精神疾病之個案於患病過程中雖有治療，但仍約有三成會呈現慢性精神病的狀態，出現功能及自我照顧能力逐漸衰退，因此讓病人病情穩定後恢復日常生活自我照顧的能力，加強病人衛生習慣的認知是重要的。

2023.04~2023.09 針對本院精神科住院患者進行「淨香團」專案，規劃由負責慢性病房與日間病房的職能治療師和醫療團隊，以團體和個別的方式進行自我照顧個人衛生教與學之系列活動，

設計「自我照顧能力檢核表」，評核及比較病人執行修容、頭髮清潔整理、無體味、衣服整齊等自我照顧行為，獨立完成及需協助的人數之差異。

成效目標衡量指標為各評核項目之分數維持或進步之個案數/完成前後測個案數，並參考標竿醫院之執行成效設立目標，統計分析結果目標達成率 78.14%

顯示團隊分工合作且實際帶領個案操作之自我照顧衛教活動，能增進慢性住院病人於自我照顧衛生方面之認知，並增進其執行動機。

關鍵詞：自我照顧、個人衛生、動機

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從模仿到勝任：角色模範在職能復健中的成效

From Imitation to Competence: The Effectiveness of Role Modeling in Occupational Rehabilitation

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背景與目的：本院精神科職能治療提供個案院內販賣復健工作訓練，但個案與來往人潮少有主動互動行為。為提升個案的社會互動能力，設計了社會互動學習介入方案，安排輔導員參與並示範銷售行為。本研究旨在探討該方案對個案銷售行為學習的成效。

方法：本研究經 IRB 核准後進行，研究對象為參加方案的個案。採質性研究方法，進行一對一深度訪談收集資料，個案訪談在參與方案後當日進行。訪談過程經個案同意後全程錄音，每位訪談時間約 1 小時。訪談錄音檔轉成逐字稿進行分析。

結果：參與者共 7 名，男性 4 名，女性 3 名，平均年齡 41.2 歲，參與復健工作平均年資 15.1 個月。透過輔導員參與販賣工作，讓個案觀察並學習其與來往人潮的互動和銷售技巧。根據分析結果顯示，輔導員在場提供安全感，個案較不害怕和顧客主動互動；個案覺察輔導員的銷售方式與自己不同，從中學習新的銷售技巧並應用於販賣工作中；銷售業績較去年同期成長約 70%。

結論：在自然情境中提供示範行為學習方案，有助個案學習販賣工作與顧客互動行為和銷售技巧。銷售行為融合豐富的社會互動技巧，因此，本研究建議工作復健訓練設計模仿角色，

讓個案有機會在自然情境中見習並加以應用習得的技巧，能提升個案的工作技能和社會互動能力。

關鍵詞：職能治療 工作訓練 社會學習

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應用情緒儀表於身心病房治療團體之結果初探

Preliminary Findings on the Use of Mood Meter in Occupational Therapy Group in Neurosis Ward

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背景及目的：覺察並辨別情緒是情緒調節的重要步驟，然病人在描述情緒時，常有情緒詞彙貧乏及失焦於事件細節等情形。情緒儀表(Mood Meter)提供 100 種情緒詞彙，將各情緒依據「愉悅程度」與「活力程度」之高低分為四象限，可做為發展情緒詞彙及協助情緒衛教之工具。本研究探討應用情緒儀表於身心病房治療團體之結果及適用性。

方法：將情緒儀表與賓果遊戲結合，設計治療活動。病人以 1-4 人的小組為單位，參照情緒儀表，覺察並辨別自己在各題目下可能產生的 3 種情緒。本研究彙整其中四題（最喜歡、最不喜歡、要出院了，及活動當下的情緒）之作答結果做分析，總計收集 2 次團體，共 15 組病人之作答，亦記錄病人對活動的質性回饋。

結果：四題收集到的詞彙數目及分布象限為：最喜歡 25 種，落在一、四象限；最不喜歡 30 種，落在一、二、三象限；要出院了 22 種、活動當下 37 種，均分布在四個象限。病人的回饋包含「原本完全想不出來」、「看見大家不同的答案很新奇」等。

結論：病人可於教學後適當使用儀表練習覺察及辨別情緒，各組辨別出的詞彙多樣性高，提供了看見差異、學習同理及發展情緒詞彙之機會，有助於身心病房的情緒調節衛教教學。此外，辨別出的情緒可作為會談的切入點，亦有助於後續深入會談。

關鍵詞：情緒儀表、情緒覺察、情緒調節衛教

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音樂偏好對於心理健康的影響：系統性文獻回顧

The influence of music preference on mental health:A systematic review

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研究背景：音樂偏好是指個人對特定音樂類型的喜愛程度，但對心理健康的影響尚不明確。

本研究旨在探討音樂偏好對於心理健康的影響，了解不同音樂風格如何影響心理健康。

研究方法：以系統性文獻回顧方式，在 PubMed、Sciedirect 以及 Web of Science 資料庫搜尋 2014 到 2023 年的文獻，內容須包含音樂偏好與心理健康（含整體心理健康、情緒、壓力、心理疾病面向）的相關研究，且二者採用評估工具測量。排除重複文獻、回顧性質/理論典範型文獻，及用於生理疾病治療的文獻。共計 24 篇納入文獻回顧統整分析。

研究結果：不同音樂風格與心理健康有關，如快樂者偏好快節奏、悲傷者偏好慢節奏、外向者喜愛電子音樂；重型音樂與低心理健康，流行、古典和傳統音樂與較佳心理健康有關。聆聽偏好的音樂也能增進情感連結、降低壓力、改善心理疾病、減輕憂鬱，與放鬆身心。長期追蹤研究顯示音樂偏好與心理健康有雙向因果關係，情緒狀態變化會影響參與者的音樂偏好；經歷壓力事件後聆聽音樂有助於減緩焦慮；音樂偏好可促進情感連結；及早年音樂偏好對成年後心理健康有影響。

討論：研究發現音樂偏好與整體心理健康、身心安適、情緒與情感連結、壓力、以及心理疾病有關。研究結果可作為臨床實務運用音樂作為治療活動的參考。

關鍵詞：Music preference、Mental health、Systematic review

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是獅子或老虎？影響認知障礙症患者 MoCA-T 量表命名項目作答的可能因素

Is it a Lion or a Tiger? Potential Factors Influencing Responses to the Naming Items on the MoCA-T Scale in Patients with Cognitive Impairment

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蒙特利爾認知評估台灣版(MoCA-T)是一個用於快速篩選輕度認知障礙症的評估量表，內容包含命名(獅子、犀牛、駱駝)等七大項目。臨床評估中發現，認知障礙症長者在回答 MoCA-T 命名項目時答案多元，然而 MoCA-T 只接受一個標準答案。因此本研究的目的為以質性研究探討影響長者 MoCA 命名作答的可能原因。本研究擬定了 10 題訪談大綱，以半結構式訪談長者辨識動物的策略、錯誤的原因等議題。參與者為台北市日照中心之八位認知障礙症長者(五位男性、三位女性，平均年齡 72 歲)。資料分析以紮根理論進行。結果發現：壹、主要命名的方式：1.以動物明顯特徵進行辨認，如獅子的鬃毛。2.以熟悉的語言(如台語)可將動物命名出來英文單詞也可以將動物說明出來，但對於其他長者，因非自己慣用語言，故沒辦法依靠其他語言進行辨識。3.長者會以對動物投射的情感來命名，如兇猛是獅子，可愛的是駱駝。貳、命名錯誤的原因：1.體型相似的動物容易辨識錯誤，例如獅子被誤認為老虎，2.犀牛跟駱駝在台灣不常見，常無法作答。參、文化相關的影響：包含文化、生活經驗、社經地

位、教育程度都影響命名。基於研究結果，建議 MoCA-T 應考慮台灣長者的文化背景和語言習慣，適當調整命名項目或答案，以提高評估的準確性和適用性。

關鍵詞：蒙特利爾認知評估台灣版(MoCA-T)、認知評估、命名、認知障礙

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身體活動生活型態再設計方案應用於精神社區復健中心之經驗與反思

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研究主題：目前有關身體活動生活型態再設計應用於精神社區復健中心的研究較為稀缺，因此本團隊專注並投入於此領域的方案開發。我們期望透過深入了解此方案的實際效果，將所獲得的實務經驗分享給專業夥伴。

研究方法與工具：為了解參與者對於方案的主觀感受，我們選用了滿意度問卷作為評估工具。滿意度問卷不僅能反映參與者對於方案的整體滿意度，還能讓我們了解該方案在實際操作中的可行性。雖然滿意度問卷提供了重要的主觀反饋，但我們也意識到其在量化客觀數據方面的局限性。因此，除了量性資料，我們也透過開放式訪談、行為觀察等質性研究方法，深入了解個案的經驗與想法，以補足量性資料的不足。

研究樣本與統計結果：由於本研究的參與者僅有 5 名，且樣本來自於單一社區復健中心，因此統計結果可能無法充分代表廣泛的群體。然而，儘管樣本數量有限，本研究仍然為我們提供了有價值的初步見解。透過研究過程中所面臨的挑戰，我們得以識別並分析方案在實施中的潛在問題與障礙，並針對這些挑戰提出了未來執行的改進建議。我們相信，這些經驗將為後續研究與方案開發提供重要的參考，並有助於提升未來方案的有效性和可行性。

關鍵詞：精神障礙、身體活動、生活型態再設計

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以批判理論途徑審視艾倫認知障礙模式的障礙觀

Revisiting the Disability Construct in the Allen Cognitive Disability Model : Insights from Critical Theory

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背景：認知障礙是職能治療師服務高齡者、精神疾病患者和神經退化疾患者的常見挑戰。而艾倫認知障礙模式（Allen Cognitive Disability Model, ACDM）作為職能治療的重要模式之一，並在協助認知障礙者生活適應上佔有重要角色。隨著障礙研究和批判理論的發展，傳統的醫學和功能取向的障礙模式日益受到質疑。本研究運用批判理論途徑，深入探討 ACDM 所呈現的障礙觀，旨在促進對認知障礙的更全面、更正義的理解，為發展更具包容性和解放性的實踐提供理論基礎。

方法：本研究透過閱讀 ACDM 發展者 Claudia Kay Allen 歷史文本，以解析其障礙觀，並試圖分析 ACDM 背後的理論假設和意識形態，並探討其對實務工作的潛在影響。

結果：ACDM 主要採用生物學模式和功能主義意識形態，這種視角可能導致對障礙的片面理解。值得注意的是，ACDM 選擇使用認知障礙而非認知損傷的術語，提示工作者更需探討 ACDM 如何在模式主張中避免忽視環境和社會因素，以及如何減少對障礙的病理化和問題化。同時，也應關注如何在專業工作者與障礙者的關係中平衡專業權力，以強化服務使用者的主體性和能動性。從批判理論和社會模式的視角來看，實務工作者需要重新思考認知障礙的本質，關注權力關係及社會建構在障礙經驗中的作用。

討論：本研究呼籲在認知障礙/損傷的概念化和實務工作中，應當採取更全面和批判的視角。我們需要反思現有理論中的「障礙觀」，重視障礙者的主體經驗和權利。重新定義認知障礙，採取更貼近人性、社會觀的優勢視角，將有助於發展更符合職能正義的障礙觀。

關鍵詞：社會學、認知、障礙研究

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憂鬱症的運動、職能平衡與生活品質研究計畫

The Study Protocol of Exercise, Occupational Balance, and Quality of Life in People with Depression

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研究背景與目的：憂鬱症常見動機低落，影響個案生活品質（QOL）及職能平衡（OB）。運動可作為憂鬱症療法之一，研究顯示個案動機與運動參與度相關，甚至影響治療效果。本研究為一研究計畫，欲探討憂鬱症個案的運動動機和運動參與度，及其與 QOL 和 OB 的關聯性。

研究方法：本研究預計採橫斷性研究設計，在臺灣中部醫院招募受試者，條件須符合憂鬱症診斷、精神症狀穩定、年滿 20 歲，識字且具基本溝通能力。排除診斷有思覺失調症候群或其他精神性疾病、重大生理疾病或運動禁忌，及妊娠狀態者。受試者填寫自填式問卷並接受研究者訪談與測量身高和體重。以運動行為調節問卷、國際身體活動量表長版問卷、職能平衡問卷、世界衛生組織生活品質問卷和貝克憂鬱量表，測量動機、運動參與、職能平衡、生活品

質及憂鬱程度。以描述性統計、相關分析、迴歸分析及結構方程模型做資料分析。

預期結果:本研究計畫基於自我決定理論，假設運動參與度與自主動機呈正相關，與受控動機呈負相關，又自主動機對運動參與度影響較大且顯著。此外，運動參與度與 QOL 和 OB 均呈正相關。

結論:本研究結果希冀作為國內憂鬱症個案運動動機和運動參與度的實證研究，供臨床實務參考，以制定個別化運動計畫，提升個案 OB 與 QOL。

關鍵詞: 憂鬱症、動機、運動參與、職能平衡、生活品質

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空巢媽媽的博物館處方箋執行指引之研究

Tips for Implementing Museum Prescriptions: Supporting Empty Nest Mothers

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空巢，意指家中兒女離家生活後的階段，此時的母親可能由於生產性角色喪失而導致的憂鬱、焦慮等情緒困擾。因空巢引發的一系列症狀則為「空巢症候群」，若漠視，將增加未來罹患失智症的風險，因此空巢中年女性之心理健康重要性不容小覷。博物館在社會處方箋中具有資源取得與執行容易、可提升正向情緒與社會互動等特性，具備增進心理健康的潛力。故本研究目的為：以質性研究方法探究博物館處方箋對空巢中年女性的心理健康成效，並提出臨床實用指引建議。

本研究以結合線上及線下任務、社交互動與博物館參訪等，經設計的博物館處方箋進行 6 週介入。參與者為 9 為空巢與準空巢媽媽。活動結束後以半結構式訪談蒐集質化資料，再以紮根理論進行分析。將質化資料進行分析後，研究結果發現博物館處方箋以展覽、參觀行程、人我互動等三面項促進正向情緒經驗，進而提升幸福感與心理健康；此外，本研究藉由實驗中介入活動經驗及質化資料結果，自人、任務、環境等面向總結出空巢媽媽的博物館處方箋執行六指引(Tips)：(1) 團隊與成員、(2) 活動規劃與安排、(3) 引導活動、(4) 促進互動、(5) 增進實體博物館團體互動、(6) 回顧，能促進博物館處方箋療癒因子之發揮，為臨床與未來相關研究提出具體實施建議。

關鍵詞: 幸福感、博物館處方箋、空巢、中年女性

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精神病患對污名圖像量表的感受與經驗投射：以質性研究探究量表使用之合適性

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污名是影響精神病患社會融合的重要因素。常見研究中之污名問卷多屬文字題型，且對象為一般民眾，較少探究精神病患的污名感受。因此，本研究藉由精神疾病觀感傾向圖像量表 (Shih et al., 2024) 訪談慢性精神病患對量表的感受，與其所投射之個人經驗，以作為精神病患使用之合適性探究。本研究以質性研究法進行，參與者先行填答圖像量表及文字題型污名量表後，接續半結構式深度訪談(10 題訪談大綱)以收集資料，並以紮根理論進行分析與形成主題。參與者為 6 位來自台中某精神專科醫院的病患 (5 女、1 男，年齡 40-60 歲，平均住院 5 年以上)。結果發現：壹、對圖像感受，包含感受到圖像中有：1. 受難者：如老年人，需要照顧。2. 情境：如在雨中，需要幫助。3. 幫助者：如社工和慈濟、志工。而對文字題型的量表之感受則為感受到詢問「你願意和精神疾病患者當朋友嗎？」「可以和精神病患打招呼、講話」。貳、個人經驗的投射：包含 1. 過去經驗，如自己第一次發病時、流落街頭時。2 受污名經驗：與鄰居、同事、家人、房東的摩擦；被鄙視的感受。3. 污名之應對：逃避、隱藏。4. 尋求協助：尋求宗教幫助。結果顯示，參與者由圖文量表中可投射與反應多面向情緒，因此污名圖像量表作為探究精神病患污名情形是合適的工具。

關鍵詞：污名、慢性精神病患、圖文量表、質性研究、社會融合

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從訪談看生活：影響精神障礙者職能平衡的因素

Seeing Life Through Interviews: Factors Affecting Occupational Balance in Individuals with Mental Disorders

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背景：康復之家的精神障礙者可能有職能不平衡的情形，值得關注。職能平衡可定義為個體主觀地感受到在其職能模式中擁有適量的職能和適當的職能變化。本研究欲透過質性研究方式探討影響精神障礙者職能平衡的因素。

方法：研究對象為 6 位在台中某康復之家的精神障礙者，使用半結構式訪談進行資料收集，以紮根理論進行資料分析。訪談內容包含個人照顧、日常活動參與、休閒活動、工作情形、人際互動、睡眠品質等方面。將逐字稿進行初步的編碼後，依敘述整合成各類別，再依照回應分為職能平衡與不平衡兩組，分析相關的影響因素。

結果：研究發現職能平衡組 (N=4) 對於個人照顧能自理，會安排日常及休閒活動、滿意自己的工作、人際互動較無壓力，除了一位易睡眠中斷其他睡眠品質佳。職能不平衡組 (N=2)，雖在個人照顧、休閒生活、睡眠品質滿意，但一位對於人際互動不滿意且影響職能平衡，一位則是對工作不滿意，想做較有挑戰性的工作，而表示職能不平衡。

結論：根據研究結果，33%的精神障礙者有職能不平衡的情形，工作及人際互動的因素對於職能平衡的評價有重要的影響。本研究結果可供未來治療策略參考，以促進精神障礙者的職能平衡。

關鍵詞：職能平衡、康復之家、精神障礙者、質性訪談、紮根理論

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認知矯治對思覺失調症認知功能之成效：後設分析與臨床應用

Efficacy of Cognitive Remediation on Cognitive Function in Schizophrenia: A Meta-Analysis and Clinical Application

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Background: Cognitive impairments in schizophrenia can significantly impact daily life. Cognitive remediation (CR) is an evidence-based treatment modality, and Neuropsychological Educational Approach to Remediation (NEAR) is a standardized, manual-based CR method with clinical application literature in English-speaking countries and Japan.

Objective: This study aims to integrate evidence on NEAR for schizophrenia through a systematic review and to explore the feasibility of NEAR on cognitive function in patients with schizophrenia.

Methods: This study consisted of two phases. The first phase involved a systematic review and meta-analysis, while the second phase involved clinical application. In the first phase, we searched databases such as PubMed, Embase, and Cochrane Library for literature meeting the inclusion criteria up to July 2023. The inclusion criteria were randomized controlled trials utilized NEAR for cognitive function in schizophrenia. Effect sizes were calculated using standardized mean difference (SMD). Meta-analysis was conducted using a random effects model. In the second phase, NEAR interventions were implemented in an outpatient setting at a medical center, conducted twice weekly for 90 minutes per session. Pre- and post-tests were conducted using the Trail Making Test (Part A & B), California Verbal Learning Test (short form), and Digit Symbol Modality Test. Wilcoxon's signed-rank test was used to analyze the results.

Results: Eleven studies were included, with seven studies eligible for meta-analysis. The results indicated that NEAR interventions significantly improved global cognition (SMD=0.526, p=0.006*), verbal memory (SMD=0.543, p=0.000*), processing speed (SMD=0.303, p=0.004*), and executive function (SMD=0.516, p=0.006*) in schizophrenia patients compared to control groups. The preliminary clinical application involved 7 outpatients with schizophrenia. Results showed significant improvements in memory (p=0.042, r=0.77), but no significant improvements in attention (p=0.345, r=0.36), executive function (p=0.344, r=0.36), or information processing speed (p=0.686,

r=0.15).

Conclusion:The meta-analysis results indicate that NEAR interventions can significantly improve cognitive function in schizophrenia patients. Preliminary clinical intervention data also suggest improvements in verbal memory. However, the study has a small sample size and does not assess long-term benefits. Further research is needed to validate these findings.

關鍵詞：Schizophrenia, cognitive function, cognitive remediation

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三種失智症照顧者負荷量表隨機測量誤差比較

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背景與目的：Novak 照顧者負荷量表 (Caregiver Burden Inventory, CBI)、Zarit 照顧者負荷量表 (Zarit Burden Interview, ZBI)、疾病家庭負擔量表 (Family Burden Scale of Disease, FBS) 為三種常用之失智症照顧者負荷量表，可用來評估照顧者在照顧失智症的家庭成員時所產生的負面影響，為照顧者本身健康的重要指標之一。本研究之目的為檢驗並比較此三種失智症照顧者負荷量表之隨機測量誤差，以提升其臨床實用價值。

方法：本研究之參與者皆接受 CBI、ZBI 及 FBS 二次訪談，二次訪談中間間隔二週。為檢驗此三種失智症照顧者負荷量表之隨機測量誤差，研究者先計算 CBI、ZBI 及 FBS 二次總分之組內相關係數 (intraclass correlation coefficient, ICC)，再進一步計算最小可偵測變化值之百分比 (percentage minimal detectable change, MDC%)，MDC% 小於 20% 代表可接受之隨機測量誤差。

結果：本研究共納入 80 位照顧者(女性占 80%)，平均年齡為 53.5 歲。研究結果發現 CBI、ZBI 和 FBS 的 ICC 分別為 0.88 (0.82-0.92)、0.86 (0.79-0.91) 和 0.88 (0.82-0.92)。CBI、ZBI 和 FBS 的 MDC% 分別為 18.4%、19.2% 和 22.0%。

結論：三種常用失智症照顧者負荷量表中，CBI 和 ZBI 具備可接受之隨機測量誤差，可提供穩定的照顧者負荷量資訊，有助於臨床工作者了解照顧者之身心健康狀況。

關鍵詞：失智症、照顧者負荷量表、隨機測量誤差

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居家模式治療對急性後期衰弱高齡的探討

The Effect of Home-based Post-Acute Care in Patients with Frailty

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前言:高齡族群在經歷急性醫療或壓力後，容易產生衰弱或失能狀態，若能早期辨識並介入可減輕病人的衰弱程度。

方法:南部某地區醫院復健科透過每周一次的跨領域團隊會議討論住院病人出院動向向安排轉銜急性後期居家復健模式。以衰弱高齡對象，篩選出符合收案條件為 75 歲(含)以上長者，具疾病診斷為帕金森氏症、失智症、慢性阻塞性肺部疾病、第三期以上之慢性腎臟病四大族群病人、且住院 72 小時以上衰弱量表評估 CFS 5-7 的病人，為期兩周居家治療，收案、結案及照護期間執行周全性評估量表。

結果:110 年七月至 113 年三月期間符合收案人數共 63 人，男性 30 人(48%)，女性 33 人(52%)，平均年齡 84.8 歲。評估量表含日常生活活動量表、工具型日常生活量表、健康相關生活品質量表、臨床衰弱量表其初評及結評以 t-test 統計顯示均有顯著差異， $P < 0.05$ 。

結論:PAC 居家模式的職能治療對 75 歲高齡衰弱的病人，返家後日常生活的任務導向的目標設定進行訓練，不論於 BI 及 IADL 及生活品質均有顯著進步，其中衰弱程度由 6 級中度衰弱進步至 5 級輕度衰弱，顯示室內活動的日常生活功能的獨立性已進步，後續持續輔以長照 2.0 照顧服務及專業服務，促進個案職能自我照顧能力的功能表現，提升生活品質，便可落實在地老化，免去機構化的安置。

關鍵詞:急性後期、居家模式、高齡衰弱

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長照專業服務需求分析-以桃市某 A 單位為例

The Analysis of Long-term Care Professional services- - Using Unit A in Taoyuan City as an Example

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目的:台灣長照服務中 A 級長照中心(A 單位)主要功能為失能者擬定照顧服務計畫及連結長照服務。本研究分析該區中專業服務及輔具/居家無障礙環境改善服務需求取向及長照補助額度使用變化，以期藉此反映在地化專業服務、輔具取向與補助需求之參考，擬定因地制宜之長照策略。

方法:本研究收集本 A 單位民國 107~111 年間使用 C 碼「專業服務」納入分析。以敘述性分析個案基本資料，再統計出照顧服務中各項次數及其佔比，並計算服務自初次評至每年度固

定複評之年度使用金額平均值。

結果：接受 C 碼「專業服務」共 123 人次，平均年齡為 80.48 歲 (± 14.23)，男女生佔比為 1:1.2，CMS 範圍 2~8 級，其中 8 級佔 43.1%。專業服務使用中以 CA 碼佔 61.79%，其次為 CB04 佔 22.76%，第三為 CD02 佔 15.45%。初評時平均使用金額 5088.0 元/人次，次年複評平均使用 3789.5 元/人次，第三年平均使用 3847.8 元/人次，第四年平均使用 3000.0 元/人次。

結論：長照專業服務方面以 CA 碼的需求較高，推估長照個案及家屬期待個案日常生活功能之重建。另外服務金額有遞減的趨勢，可能原因：一、個案因復能目標達標而結案；二、在資源有限的情況下，個案 CMS 等級隨著時間增加，導致個案傾向使用更多居家照顧服務協助分擔日常照顧任務而壓縮專業服務額度，仍有待未來研究分析。

關鍵詞：長期照顧服務、專業服務 C 碼

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複合式認知預防和延緩認知失能介入對中部社區據點的長者的效果

The effect of a multi-component preventing and delaying cognitive disability program for community dwelling elders in central Taiwan

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老化會造成認知功能下降，可能會導致日常活動失能。目前長照 2.0 推行預防及延緩失能方案大多未經驗證，本研究目的想了解複合式認知方案對社區據點長者的認知功能和日常生活功能的效果。

本研究採單組前後測設計，對象為 16 位中部某社區關懷據點生活功能獨立的長者(76.31 ± 6.92 歲)，介入為十二周的複合式認知團體活動，一周一次，每次兩小時，活動內容包含視覺記憶力、聽覺記憶力、視覺注意力、聽覺注意力和執行功能的認知刺激及訓練，同時教導在日常生活中適用的技巧和策略，並且以蒙特利爾認知評估量表(MoCA)、情境記憶測驗、路徑描繪測驗、史楚普色字測驗、日常生活(ADL)獨立性和自我效能量表和認知功能自評表來了解其認知及日常生活功能的前後變化。評估結果以 SPSS for Windows (版本 22.0) 分析，採敘述性統計和無母數分析(Mann-Whitney U test)中的相關樣本 Wilcoxon 檢定， α 設為 .05。

結果顯示超過半數受試者的 MoCA 分數(87.5%)、情境記憶個數(68.75%、56.25%)、路徑描繪測驗的秒數(56.25%)是有進步的，但未達統計顯著性。ADL 的獨立性和自我效能和社交互動表現於前後測皆無顯著差異。雖社交互動和解決問題的自我勝任有顯著退步，但在認知功能自評顯示認知功能有進步。

雖然因人數少統計檢定力稍弱，但介入後長者的整體認知功能和執行功能多數都進步，且因為長者多數日常生活及社交功能皆為獨立，介入後也都能維持不變。雖然如此長者在社交互動及解決問題的自覺勝任卻有下降，可能在具挑戰的活動中長者們對自己整體社交能力的不足之自我覺察增進。因此此認知複合式方案有助於增進社區據點長者的認知功能以及對自己

能力的自我覺察，有利於達到健康自我管理的目標。未來藉由增加收案的人數，可進一步驗證整個方案的成效。

關鍵詞：社區據點、認知復健、認知刺激、認知障礙

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電腦化日常認知功能測驗於主觀認知衰退個案之心理計量特性驗證

Psychometric Properties and Validation of the Computerized Everyday Cognitive Function Assessment for Individuals With Subjective Cognitive Decline

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前言：電腦化日常認知功能測驗(computerized everyday cognitive function assessment, CECFA)為一以購物活動為情境之認知評估工具，用以評量失智症前期患者。

目的：欲驗證 CECFA 於主觀認知衰退(SCD)個案之心理計量特性：內部一致性、區辨效度、聚合效度、因素分析。

方法：CECFA 之測驗內容含核對購物清單、勾選廣告單、帶傘出門、記住特價物、採購、計算找零金額、拿傘、搭車返家。本研究納入 50 歲以上之 SCD 個案 (n = 64)及健康成人(n = 39)，進行 CECFA 及蒙特利爾認知評估(MoCA)。資料分析以 Cronbach's α 檢驗內部一致性。區辨效度以 Mann-Whitney U 檢驗是否能區分健康成人與 SCD，並以 Spearman's rho 檢驗其與 MoCA 之聚合效度。最後以因素分析探討各題項潛在測試之認知能力。

結果：CECFA 在答題正確度及時長，內部一致性分別為差和尚可(Cronbach's $\alpha = 0.54$ 和 0.60)。與健康成人相比，SCD 在「總分」、「購買商品」正確度及「總完成時間」顯著較差，效果值為小至大 ($r = 0.24 - 0.84$)。聚合效度方面，「總分」及「購買物品」正確度，與 MoCA 總分皆達顯著中度相關($r = 0.361$ 和 0.399 , $p = 0.003$ 和 0.001)。因素分析顯示，本工具含三種概念：記憶、注意力及計算能力。

結論：CECFA 作為認知評估工具，主要包含記憶、注意力及計算能力三層面，且可區分健康成人與 SCD 之差異。然其內部一致性較不理想，這可能與題數較少有關，後續應修正施測項目，並進行再測信度之驗證。

關鍵詞：主觀認知衰退，日常認知功能，電腦化測驗

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各國活動分類圖卡之發展與差異：文獻回顧

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研究背景與目的：活動分類圖卡(Activity Card Sort, ACS)為用於評估年長者活動參與程度之工具，因其採用圖卡形式利於長者理解，可有效了解年長者的活動參與程度和改變，並已在各國廣泛使用。本研究旨在回顧文獻以探討不同國家發展 ACS 之過程與文化差異。

研究方法：透過 Google scholar 和 PubMed 尋找不同國家發展該國版本 ACS 之研究進行比較，選用”Activity Card Sort”、”ACS”作為搜尋文獻之關鍵字，篩選有關此工具發展之文獻，納入發展歷程撰寫完整之文獻並將其研究結果與台灣版本進行比較。

研究結果：本研究包含四個不同國家所發展之活動分類圖卡研究，包含澳洲、英國、日本及台灣，各國之發展過程雷同，皆分為項目產生和項目選擇兩階段。整理不同版本所納入之活動，可發現各國皆有因應當地文化而納入的獨特活動項目。澳洲版本 ACS 共有 82 個活動項目並含有 12 個獨特項目；英國版 ACS 包含 91 個項目並有 7 個特殊項目；日本版 ACS 有 72 個活動項目及 8 項獨特項目；台灣版活動分類圖卡也根據本土文化將圖卡內容進行調整，共有 86 個活動項目和 17 項不同於其他國家的活動項目，例如發票兌獎、接受民俗療法、買樂透等，顯示各國年長者日常活動之文化差異。

結論：本研究發現各國發展 ACS 之過程類似，但皆有因應該文化所加入之特定活動，顯示 ACS 為文化敏感之評估工具，各國須使用符合其國情之 ACS 以適切評估老人之參與狀況。

關鍵詞：Activity Card Sort, ACS

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虛擬實境介入於老年長者平衡能力、跌倒預防復健之應用

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研究背景：近幾年來，虛擬實境越來越興盛，將此技術引用到復健領域上為介入手法之文獻，其中在改善平衡能力、預防跌倒等方面有顯著成效。

研究目的：本篇專題整理了近十年以虛擬實境為介入的軟體類型，以及其成效。欲了解使用虛擬實境來當作介入手法能否改善老年長者的平衡能力，以及是否能作為老年人預防跌倒的訓練模式。

研究方法：使用 PubMed、MedLine、華藝線上圖書館醫學資料庫搜尋文獻，納入條件為老人跌倒，以虛擬實境為介入手法之研究、研究結果的評量以量性研究為主、無性別及種族限制；排除條件為文獻回顧性文章。資料庫限制條件為健康長者，排除有神經疾患、嚴重疾

病、損傷個案。蒐集近 10 年間(2014 年~2024 年)文獻。關鍵字輸入 Elderly、fall、Virtual Reality、rehabilitation、balance、postural balance、motor、gait、postural stability 搜尋，以人工閱讀，無重複文獻，共 10 篇。

研究結論：進 10 年來常被用於介入老年人平衡方面虛擬實境有 Wii、Xbox Kinect。以 Wii 作為介入在平衡、步伐長度有顯著成效，Xbox Kinect 作為介入在平衡、行走能力有顯著成效，但若剛使用完虛擬實境裝置 2 分鐘內，會增加跌倒風險。本篇專題討論建議使用虛擬實境軟體作為介入的頻率為每週 3 次，每次 30 分，建議時間長度為 4 週以上。

關鍵詞：虛擬實境、平衡能力、跌倒

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以事件關聯電位探討動手樂活動與桌遊活動之認知彈性效益

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背景：認知彈性是面對問題及環境改變時，彈性調整行為以解決問題及適應環境的重要能力。桌遊常用於長者認知介入，具規則性及特定玩法；本研究採用之動手樂活動採情境式認知訓練，在不主動提供指導、提示的認知挑戰環境中，參與者藉主動推理的過程解決問題、完成成品。事件關聯電位(event-related potential, ERP)可觀察在刺激與反應間的腦活動，呈現與年齡相關之轉換成本的神經活動差異，作為認知促進的成效指標，然較缺乏認知介入後 ERP 及認知行為表現成效探討。

目的：比較社區認知功能正常之長者，接受動手樂及桌遊活動介入後認知彈性成效之差異。

方法：42 位認知功能正常之長者隨機分配至動手樂及桌遊組，介入為期 12 週，每週 2 小時。ERP 記錄交替任務測驗 (task-switching task) 時受試者腦活動，認知彈性表現以 task-switching task 中之特定轉換成本 (specific switch cost, SSC) 呈現。

結果：僅動手樂組觀察到 SSC 減少($p=.037, d=.50$)。ERP 結果中，兩組之 P3b 平均振幅皆增加，即參與者能在轉換任務中召集更多認知資源；但僅動手樂組之 P3b FZ-PZ asymmetry 降低($p=.012, d=.66$)，即參與者較少依賴額葉進行轉換任務，大腦活動較趨近年輕人。

結論：結果初步支持，主動推理導向之動手樂活動相對桌遊活動，對大腦活動及認知彈性行為表現效益更佳，支持長者大腦具可塑性。然樣本數較少，需擴大樣本進行後續探究。

關鍵詞：認知彈性、事件關聯電位、作業交替、動手樂活動、主動推理

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社區精神病友邁向復元服務效果分析

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目的：了解社區精神病友邁向復元需求趨勢並於提供團體或個別化治療服務後，比較每三個月之需求改變情形。

方法：研究樣本取自中部 1 家社區復健中心共 23 名病友。依據精神復健機構評鑑基準及健保署審查原則，邁向復元自評表包括：獨立生活功能、健康維護功能、社會功能、休閒功能、家庭與社會支持系統及職業功能等六類，共 12 題。評分等級以「完後全他助、部分他助、自助、部分助人、完全助人」(1-5 分)。於每季自評結束後分別提供團體活動或個別化訓練來提升個案自助能力，團體活動包含：衛教團體、烹飪團體、社會互動團體、代工團體、運動培養團體、早午操、休閒團體、藝術團體、歌唱團體；個別化訓練包含：刷牙、洗澡、起床、交通訓練、服藥訓練、庶務工作訓練、財務管理、個別化運動。

結果：社區精神病友樣本之平均年齡 37.3 ± 16.5 ，平均發病年齡 21.4 ± 10.0 ，平均罹病年數 15.9 ± 10.8 ，思覺失調症佔 56.5%，女佔 60.9%。經過為期 9 個月的介入服務，在他助層面成效佳的項目有 4 項：刷牙(8.6%進步到 0%)、交通(60.8%進步到 12.5%)、家人(17.3%進步到 6.3%)、財務(43.5%進步到 37.5%)；成效維持的項目有 4 項：洗澡(維持 0%)、起床(維持 26%)、人際(維持 13%)、工作(維持 38%)；成效待加強的項目有 4 項：家事(17.3%增加到 25%)、服藥(13%增加到 18.8%)、運動(43.5%增加到 62.5%)、休閒(21.7%增加到 37.5%)。在自助及助人層面成效佳的項目有 5 項：刷牙(91.3%進步到 100%)、交通(34.7%進步到 87.5%)、服藥(82.6%進步到 100%)、家人(82.6%進步到 100%)、財務(47.7%進步到 62.5%)；成效維持的項目有 5 項：洗澡(維持 100%)、起床(維持 75%)、家事(維持 78%)、人際(維持 87%)、工作(維持 63%)；成效待加強的項目有 2 項：運動(52.1%降至 37.5%)、休閒(78.2%降至 62.5%)。

結論：復健中心所提供之復健服務能顯著滿足個案刷牙、交通、家人互動及財務管理 4 項需求，惟仍有 8 項之需求維持原狀或待加強，社區復健團隊須持續精進符合個案需求之復健服務。

關鍵詞：社區精神病友需求趨勢，復健服務效果，邁向復元自評表

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社區肌少症功能性運動介入應用於社區精神個案之可行性探究：案例研究

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簡介：台灣邁入超高齡社會，肌少症盛行率高，而肌少症與老年憂鬱症具相關性，本研究為一位患有肌少症前期與憂鬱症之 79 歲女性案例研究，探討非結構性之功能性運動方案

(Sarcopenia Translation functional Exercise Program [STEP])，將輕度身體活動融入日常，對提升肌肉力量、質量、身體表現、運動習慣、生活品質與降低坐式時間之影響。

方法：研究納入之參與者符合肌少症或肌少症前期，無運動習慣或心血管疾病、可自由行動，具足夠認知能力，在介入前、後與介入後三個月(追蹤)進行主要結果(骨骼肌肉質量指數、膝伸直肌力與身體表現)與次要結果(生活品質、坐式時間與運動習慣)的評估。

結果：個案於介入期間皆穩定服藥，各項結果於後測呈現正向效果，膝伸直肌力由 7.5 至 8.9 公斤，骨骼肌肉質量指數由 7.3 至 7.5 公斤/平方公尺，簡易身體表現功能量表由 7 至 8 分，生活品質由 47.1 至 52.2 分，運動習慣從第一週的 12 分至第十一週的 13 分，坐式時間數據無法反映個案真實狀況，故不採用，各結果在追蹤時亦有微幅進步或與前測持平。

結論：此研究的結果顯示 STEP 介入具有可行性，在減緩肌少症影響之同時，亦透過人際互動增加長者的正向感受，期待此結果可應用至更多社區患有憂鬱症之長輩，但仍需更多研究支持。

關鍵詞：肌少症；社區長者；功能性運動；坐式生活；運動習慣

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以減少環境危害因子來預防社區老人跌倒:利益相關者之觀點

Remove Environmental Hazards to Prevent Falls among Community-Dwelling Older Adults: Stakeholders' Perspectives

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背景：居家改造(Home modification)是國外職能治療師常用於減少環境危險因子的介入方法之一，其中 Home Hazard Removal Program(簡稱 HARP)可顯著降低社區長者 38% 跌倒率，而台灣尚未有類似的防跌實證研究，故本研究目的為探討利益相關者(社區長者及職能治療師)對於在台灣應用 HARP 之觀點。

方法：本研究採質性研究中的焦點團體，以立意取樣及滾雪球取樣招募帶領長者健康促進之職能治療師、居住在北台灣且 65 歲以上的社區長者，排除非相關專業之社區工作者、具認知障礙而無法接受訪談者，訪談結束後，由三位分析者以框架分析法探索主題。

結果：本研究共進行五場焦點團體，收得六位職能治療師(平均年齡 33.3±5.0 歲)、十五位社

區長者(平均年齡 71.1±4.7 歲)，從中凝聚三大主題：居家改造範疇、實施形式、安全意識覺察。治療師建議先橫向連結治療師之經驗、建立可以解決執行過程障礙的知識庫；社區長者表示較年長或有疾病者會較重視自家環境安全，且大多對 HARP 持正向看法，但因注重隱私，建議家訪時由具公信力者陪同。此外，本研究發現居家改造一詞容易與居家無障礙環境改善服務混淆，未來欲施行時應有更明確之解說。

結論：利益相關者認為台灣可應用 HARP，但尚有需調整處，而本研究之結果將有助於訂定更適合台灣長者之居家改造計畫。

關鍵詞：跌倒；居家改造；社區；老人

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職能治療主動營造醫院台語環境之經驗分享

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前言：台語是台灣自 17 世紀起通行最廣泛的語言，直到 1950 年政府推行國語運動，強力禁止並汙名化台語，迫使多數人民母語轉換。即使近十年來本土文化重新受到重視，學校開始母語教學，但 2018 年調查顯示，僅有兩成北部年輕族群主要使用台語。

語言是良好醫病關係的關鍵，目前醫療環境中母語服務明顯不足。職能治療應具文化敏感度和共融視野，但相關語言文化的探討仍然缺乏。

方法：筆者在北部醫學中心精神科日間病房任職，該病房近九成病人家庭母語為台語。職能師主動營造台語環境，包括以台語點名、帶領團體、分享台文繪本、探討台語新詞和資源，並以問卷調查病人感受。

結果：17 位病人中，88%的家庭主要使用語言已轉換；病人對台語持正面印象者達 88.24%。感受包括：「治療師用台語帶領團體，讓我印象深刻，提醒我重新使用台語，咱是台灣人要傳承台語。」和「我是客家人，能聽懂大部分台語，覺得在病房聽到台語讓大腦更靈活。」

應用與展望：使用台語進行職能治療團體活動，不僅提升病人的參與感和親切感，改善溝通效果，也增加文化連結與身份認同。在醫院使用台語提升了醫療服務質量和平等性，促進多元文化和語言發展，更能接納多元文化和尊重差異。建議未來職能治療師提供更多元文化敏感度的就醫環境。

關鍵詞：台語；語言；文化；職能治療；共融；多元文化

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健康福祉 (Health and Well-being)

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2023 年新成立之職災勞工職能復健專責醫院推動經驗探討-以高雄醫學大學附設醫院為例
Exploring the Implementation Experience of Newly Established Occupational Rehabilitation
Institutions for Workers in 2023: A Case Study of Kaohsiung Medical University Chung-Ho
Memorial Hospital

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研究背景和目的：高雄醫學大學附設中和紀念醫院自 2007 年起，負責南區勞工職業傷病的工作能力評估及強化中心計畫，並於 2023 年獲得勞動部職災勞工職能復健專責醫院認可。本研究旨在探討 2018 至 2024 年間高醫附院職災勞工服務的成效，特別針對工作強化訓練、個人特徵與復工狀態進行分析。

方法：研究採用回溯性設計，分析 2018 年至 2024 年的服務情形，包括服務人數、基本資料、職業別、受傷部位、復工情形及強化訓練時數等變數。數據透過 Excel 分析比較不同時間點和變數之間的差異，呈現服務成效及為未來改進提供依據。

結果：2018 至 2022 年，服務人數和復工比例逐步提升，顯示高醫附院的服務品質持續改善。2023 年成為認可機構後，服務數量明顯增加，36 位職災勞工接受強化訓練，復工率達 90%。統計分析顯示，復工與訓練時數和職業類別有顯著關聯。且 2024 年上半年服務人數已達 84 位，有 20 位接受強化訓練，數字持續上升。

結論：高醫附院在《勞工職業災害保險及保護法》支持下，提供多元且專業的職業重建服務，並持續改進以應對政策變化。未來會持續往更為完善的職業重建服務努力，尤其是工作強化訓練，期能有效協助各種職業的職災勞工重返職場。

關鍵詞：職能復健、職災勞工、職業重建、復工

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包容性生活優化服務模式：遠距健康平台的設計與實施

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從職能治療專業來看，許多不同類型的族群都需要接受長期的照護支援，其中，退化現象往往在特定事件發生時引發生活能力急遽下降，但多數家庭照顧的個案無法及時且正確因應，因此若能透過專業且客製化的生活照顧服務，根據個案生活難題與情境切入，給予動態的專業評估建議，既可降低家人的照護負擔，亦可能持續維持原本的居家生活型態。

本研究提出了一項遠距高頻生活優化服務模式，以提升家庭整體生活品質為服務目標的，並藉由數位服務技術降低服務成本，讓此服務成為一種可負擔的方案。流程如下：(1) 全面評

估日常功能；(2) 制定階段性調整計劃；(3) 活動實施；(4) 定期監測進展；(5) 調整訓練任務。本研究建立了一個平台以實施這項服務，透過與專業團隊合作，提供長期支持。該平台主要功能包括每日生活和訓練建議、治療師分配任務、記錄任務執行情況以及反饋問題。結果顯示生活優化服務利用數位技術，促進個案、照護者和治療師之間的緊密聯繫，提供精準支持，降低服務成本，並擴大服務範圍。這種方法顯著影響個人和家庭的健康與生活品質，促進區域照護生態系統的穩定。

關鍵詞：生活品質、生活優化、遠距健康、智慧平台

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北部某綜合醫院精神科日間照護中心病人之健康體適能結果分析

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本研究目的欲探討北部某綜合醫院精神科日間照護中心病人其健康體適能表現，以及分析可能影響其健康體適能表現之相關因子。本研究參與人數合計共 40 位病人，排除頭部外傷、患肌肉骨骼疾病史、主觀疼痛問題或無法施測之病人，共收案 37 位病人。其健康體適能由日間照護中心職能治療師進行施測，並蒐集相關生理資料，以統計軟體 SPSS 分析資料。本次健康體適能以五個向度來討論，分別為身體質量組成(BMI)、心肺耐力、下肢肌耐力、手部握力及柔軟度。

研究結果顯示，54.1%為女性，平均年齡為 45.7±13.4 歲，平均精神科疾病病程為 20.2±12.9 年，56.7%病人合併有其他身體疾病，78.3%病人 BMI 超出正常範圍，其中合併有其他身體疾病者，其 BMI 顯著較高($t=3.67$, $p<0.01$)；56.8%病人其心肺耐力及下肢體耐力為不佳，其心肺耐力與精神科疾病病程年數呈現中度的負相關($r=-0.506$, $p=0.001$)，診斷為思覺失調症病人其下肢肌耐力表現顯著低於躁鬱症者($t=-2.79$, $p<0.05$)；50%病人手部握力為不佳程度；29%病人其柔軟度為不佳程度。

本次研究發現病人於體重管理、心肺耐力、下肢肌耐力及手部握力須加強，其中部分體適能表現與疾病種類、病程及是否有合併其他身體疾病具相關性，顯示除增加體適能訓練外，疾病預防及減緩退化速度應為重要考量之一。因此，未來於復健活動規劃部分，可考量體適能表現差異以提高體適能表現。

關鍵詞：精神疾病、體適能

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TRX 懸吊訓練於思覺失調肥胖者健康促進及肌力改善之初探

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研究背景與目的: 思覺失調症患者常因抗精神病藥物作用、代謝率減少、熱量攝取增加及活動量減少等因素，相較常人，其身體質量指數(BMI)與罹患代謝症候群的機率相較於一般民眾都較高，如何有效促進健康體態是重要的議題。TRX 是懸吊式阻抗訓練的簡稱，其使用懸吊設備並利用體重作為阻力，進行全身性的訓練，特點為具調適性、強調核心肌群及功能性訓練。本篇旨在探討使用 TRX 懸吊系統對思覺失調肥胖者健康促進與肌力改善的助益。

方法: 本篇之收案採便利取樣且條件為: 身體質量指數>24、經體適能評估確認可負荷中高強度之運動、具有可學習新事物能力之思覺失調症患者，考量場地設備預計收案 9 位。介入方式採 TRX 訓練團體每周一次，一次一小時，共六次，由具 TRX 教練資格之職能治療師帶領。本篇結果分析包括: 前後測之評估體重、體脂、體適能(上肢肌力、下肢肌力、動態平衡)之量性變化，團體結束後進行訪談質性分析，以了解思覺失調症肥胖年長者對此介入之反應。

結果: 受試者共 9 位(男性 4 位、女性五位)，平均年齡 54 歲，平均身體質量指數 29，因感控管制，故僅實施五次介入。分析前後測成績發現，78% 成員體重下降，平均下降 0.51 公斤，最多下降 1.8 公斤。78% 成員體脂率下降，平均下降 0.72，最多下降 1.6；88% 成員上肢肌力進步、67% 成員下肢肌力進步、67% 成員動態平衡能力進步。質性分析結果顯示，前五項較多的回饋為：自覺肌力增加、精神狀態改善、自信提升，自主增加運動量及減少多餘熱量攝取等。

結論: 本篇雖受限於場地致使受試者有限，但於 TRX 懸吊訓練後，受試者於體重、體脂及肌力表現皆有不同程度之改善；更重要的是受試者對於 TRX 懸吊系統的接受度高，認為訓練過程中感受到身心的雙重好處，有效增進受試者對於健康的重視，並正向影響生活型態。故本研究顯示 TRX 懸吊訓練可作為思覺失調肥胖者健康促進的新選擇，建議未來可再搭配飲食控制及生活型態再設計，並進行長期介入，將可更有效促進健康及延緩失能。

關鍵詞： TRX 懸吊訓練、思覺失調症、肌力、健康促進

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皮拉提斯於改善慢性非特異性下背痛之疼痛的緩解成效: 文獻回顧

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背景與目的： 下背痛為一種自肋骨下緣至骨盆之間的疼痛疾病，依據病徵時長分為慢性、急性、亞急性，依疼痛來源再分為特異性與非特異性，其中以非特異性下背痛最為常見。這種疼痛廣泛影響個人生活和工作，是全球重要的公共衛生問題。皮拉提斯(Pilates)為一種強調核心肌群的運動，包含墊式和器械式，能調整腹盆腔的結構關係，塑造正確姿勢體態。本文獻

回顧旨在透過系統性回顧，探討 Pilates 對於慢性非特異性下背痛患者的治療效果，提供職能治療師在臨床處理上一個不同的思考方向與應用途徑。

方法：使用 PubMed、Embase、Airiti Library 華藝線上圖書館進行搜尋，關鍵字包含 Pilates、low back pain、chronic non specific low back pain、pain、Pilates training、Pilates exercise，年份介於 2013 年至 2023 年。初篩選 26 篇文獻，最終納入 14 篇，並使用 PEDro 量表評估文獻品質，多數文獻評分在 8 分以上。

結果：14 篇研究文獻皆包含 Pilates 對慢性非特異性下背痛患者疼痛的療效，主要分為三類，包含 (1) Pilates 與其他運動方式的比較；(2) Pilates 以不同的頻率或進行方式介入；(3) 單純探究 Pilates 對疼痛和其他指標的有效性。結果顯示，Pilates 能有效緩解疼痛，提升生活品質與功能表現。然而，與瑜伽和 McKenzie Training 等相似運動相比，效果差異不顯著。

結論：Pilates 是治療慢性非特異性下背痛的一種有效工具，能改善患者的疼痛和功能，但其效果與其他運動形式相比無顯著差異。建議職能治療師在臨床中考慮將 Pilates 作為一種選擇，並進一步研究其長期效果和最佳實施方式。

關鍵詞：皮拉提斯、慢性非特異性下背痛、疼痛

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阻力性運動介入應用於老年肌少症之文獻回顧

A Literature Review on the Application of Resistance Exercise Interventions for Sarcopenia in the Elderly

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簡介：台灣邁入超高齡化社會，肌少症成為重要老年議題，導致肌肉質量和力量減少，引起功能衰退，影響健康、生活品質及壽命。文獻指出，阻力運動介入能減少肌肉質量和肌力流失。本研究回顧近 5 年相關文獻，探討哪種類型的阻力運動能有效應用於肌少症。

方法：通過 PubMed 進行文獻檢索，篩選 2020-2025 年發表之文獻；納入條件為 65 歲以上肌少症患者的隨機對照試驗，分析不同型式的阻力訓練對肌少症的影響。

結果：納入 5 篇研究，發現使用不同磅數的彈力帶進行漸進式訓練能顯著增強上下肢肌力，上肢肌力平均增長約 10.5%，下肢肌力增長約 9%，且起身行走測試時間顯著改善。漸進式全身阻力訓練可有效增加股四頭肌的肌肉橫斷面積約 10%，並縮短行走時間約 8%。將阻力運動與平衡或有氧訓練結合，能顯著改善短物理表現量表的功能表現，標準差從 1.72 秒減少到 2.28 秒。

結論：阻力性運動介入顯示出顯著的潛力，可作為改善肌少症患者肌肉質量和功能的方法。彈力帶訓練和漸進式全身阻力訓練可增強肌力和改善日常功能表現，將阻力訓練與平衡或有氧

訓練結合，也能進一步提升患者的整體身體功能表現，因此建議在設計老年肌少症運動治療計劃時，考慮結合不同類型的阻力訓練以最大化效果。

關鍵詞：肌少症；阻力性運動介入

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兒童職能治療介入可信賴專業活動之評核頻率初探研究

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背景與目的：近年醫學教育以可信賴專業活動 (entrustable professional activities, EPAs) 的架構，作為評量學員學習成效並提供回饋的新趨勢。台灣職能治療學會於 2022 年發展兒童領域的 EPAs，共提出六個主題，評估規劃建議多元多點的原則安排，但是沒有明確指出觀察評估的次數與頻率。執行介入是臨床工作中佔比最高的業務，且所有教師都有機會評核學員，故本研究以「執行職能治療介入的 EPA 主題」，探討較適切的評核頻率，做為本院醫學教育規劃的依據。

研究方法：以新竹台大醫院兒童職能治療臨床教師，與 112 年第二梯至 113 年第一梯兒童實習生為研究對象，共計 5 名教師、9 名學員。教師分成實驗組與控制組，實驗組包含兩名教師，評核頻率為每周一次；控制組包含三名教師，評核頻率為每月一次，並在每梯實習結束後，填寫 google 問卷，了解該頻率在臨床執行時遇到的困難。所有學員接受兩種評核頻率，實習結束後填寫問卷，了解不同評核頻率是否影響學生學習成效。

研究結果：研究持續收案中，初步分析 112 年第二、第三梯學員的資料：90% 的教師與 60% 的學生認為使用 EPA 評核，有助於更有架構的提供回饋，但是不論教師或學員都表示使用 EPA 並不能提升討論的效率，85% 的教師與 70% 的學員也表示不能使用 EPA 取代與師生當面雙向溝通的討論。每次執行評核的教師表示對工作造成負擔；亦有 40% 的學員表示每次接受評核，造成的學習壓力較大。60% 的學員表示不論哪一種評核頻率，對學習的助益沒有差異。

討論與結論：教師與學員都認同 EPA 可以提供一個有架構的回饋，但是不能取代師生當面雙向溝通。學員指出不論哪一種評核頻率對他們的學習都沒有差異，但是每次評核卻會對教師與學員造成更大的壓力，因此建議評核頻率為每個月一次。

關鍵詞：職能治療教學、可信賴專業活動、模擬訓練

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初步探討職能治療師之同理能力與其臨床效能

Investigation of empathic skills in occupational therapists and its impact on clinical efficacy

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背景及目的：同理能力為職能治療師重要臨床技能之一。治療師之同理能力影響溝通效能、病人滿意度及醫療品質。迄今尚無研究探討職能治療師之同理能力、影響因素及其臨床效益。本研究目的為瞭解職能治療師之同理能力及影響因素，並探討同理能力與中風病人臨床效益之相關性。

方法：共有 55 位實習生及其病人參與研究。研究者於實習生治療/訪談過程進行錄音，並依據音檔及逐字稿內容，使用「治療師溝通技巧評估工具」之同理題目進行評估。同理能力相關因素部份，研究者收集實習生之人口學資料（性別、教育程度、年齡等）；臨床效益部份，研究者收集病人之立即及後續臨床效益變項（職能治療滿意度及參與度）。

結果：實習生之同理能力平均分數約 12 分（滿分 57 分），代表同理能力不佳。病人發病時間與實習生同理能力呈現中度負相關且達顯著 (Spearman's $\rho = -0.3$)。實習生同理能力與病人參與度呈現中度負相關且達顯著 ($\rho = -0.4$)。

結論：本研究初步結果顯示，實習生之同理能力不佳。發病時間及參與度與實習生同理能力呈現負相關。後續臨床教學建議強化實習生對於辨識不同發病時間病人之同理需求，以及有效提供同理支持之時機。本研究結果可供臨床教育及研究人員設計同理教學課程之參考依據。

關鍵詞：同理能力、中風病人、臨床效益、職能治療

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職能治療臨床副木教學之整合式線上學習平台

Integrated Online Learning Platform for Occupational Therapy Clinical Splinting Education

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背景：傳統的副木教學課程通常會由教師進行理論介紹及實作示範，隨後由學生進行副木製作練習並給予回饋，然而，此教學模式下學生的學習成效不一致，且教學過程中的臨床時間分配較為零碎，影響教學效率。因此，我們設計副木整合式線上學習平台，旨在提升學生的整體學習表現。

方法：副木整合式線上學習平台分成三個部分：前測、影片題組題(含副木教學影片)及後測。題型包含選擇題及配合題，學生填答後可立即得知答題狀況，教師亦可透過副木整合式線上學習平台的後台了解每位學生的作答表現。

結果：結果顯示，學生在後測的分數相較於前測有進步。

結論：與傳統教學模式相比，副木整合式線上學習平台有助於提升學生的自主學習能力和教學效率，同時方便教師掌握學生的學習進度和需求。

關鍵詞：職能治療、副木、傳統教學模式、教學、整合式線上學習平台

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運用勝任能力導向的醫學教育為教學架構，落實新進職能治療師之教學訓練

Implementing Competency-Based Medical Education as a Teaching Framework to Enhance the Training of Occupational Therapists

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新進職能治療師訓練旨在培養臨床實務能力、專業素養、醫病溝通能力及全人照護。傳統教學方法重知識傳授，忽略實際操作和勝任能力評估。本院運用勝任能力導向的醫學教育（CBME）提升新進職能治療師的綜合表現。

2022年9月，本院成立臨床能力委員會（CCC），基於中華民國職能治療師公會全國聯合會的二年期職能治療師（生）計畫為基礎，結合實證文獻，發展本院特色的培訓計畫。每位新進職能治療師會依照各自的進站時間，每半年召開一次CCC委員會，會議中聚焦受評學員之學習成果和具體表現，確認其專業工作能力並授權臨床業務的執行，須待加強部分，則以個別訓練計畫調整建議，並進行輔導。

CCC委員會進行前，委員先檢視學員學習歷程，收集多元評量資料，如病例導向討論評估表（CbD）及平時考核表等。會中委員提出觀察及具體表現，決議學員是否進入下一階段學習。會後整理建議並回饋，給予個人化學習計畫。

2022年9月至今，8位新進職能治療師採用CBME架構，共計召開14場實體CCC會議，完成15人次評核，4位新進職能治療師已完成訓練，達到獨立執行職能治療業務的階段。

透過CCC委員會的能力評量回顧，整合多項評量工具資料，掌握學員全方位學習軌跡，提供總和性回饋，形成個人化學習成長方向指引，強化學習成效。此外，提升教師回饋品質、增加評量可信度、協助訓練計畫及教師持續發展，確保新進人員獲得良好教育並發展優秀技能和能力。導入CBME策略幫助學員了解自身勝任能力，助教師調整學習計畫。目前配合台灣職能治療學會，納入兒童職能治療領域EPAs，未來預計階段性應用EPAs規範格式，全面落實本院的教學訓練。

關鍵詞：勝任能力導向的醫學教育（CBME）、臨床能力委員會（CCC）、二年期新進職能治療師訓練

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驗證職能治療實習生溝通技巧訓練成效

Effectiveness of communication skills training for occupational therapy fieldwork student

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背景及目的：溝通技巧是職能治療的重要臨床技能，直接影響治療成效及品質。提升溝通技巧於職能治療養成教育至關重要。然而職能治療目前尚無實證之溝通技巧訓練模式。本研究目的為驗證職能治療實習生之溝通技巧訓練成效。

方法：研究者於四家醫療機構招募 105 位職能治療實習生及其病人參與本研究。實習生接受溝通技巧教學後，於新接案病人的評估/訪談中過程進行錄音，共錄音二位病人。研究人員將錄音檔繕打為逐字稿，再以職能治療溝通技巧評估工具 (communication-skills assessment for occupational therapists, COT) 及 Gap-Kalamazoo Communication Skills Assessment Forms (GKCSAF)，對錄音檔及逐字稿內容進行實習生之溝通技巧評估。每次錄音結束後，研究人員對實習生進行個別溝通技巧回饋。成效驗證部份，研究者以配對樣本 t 檢定及效應值 (Cohen's d) 比較實習學生評估/訪談二位病人之溝通技巧差異。

結果：實習生於 COT 各向度分數皆顯著提高 ($p < 0.006$)，且效應值為中至大 (Cohen's $d = 0.28-0.70$)；實習生之 GKCSAF 各題目分數亦顯著提高 ($p < 0.022$)，效應值為中至大 (Cohen's $d = 0.25-0.70$)。

結論：溝通技巧訓練可有效提升職能治療實習生之溝通技巧。本研究可做為後續溝通技巧訓練研究及臨床教學之參考。

關鍵詞：溝通技巧，職能治療，實習生，成效

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從評估中尋找實習生參與共同決策的線索

Seeking clues of fieldwork students' participation in shared decision-making from assessments

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背景：醫病共享決策 (Shared decision-making, SDM) 為醫療人員與病患共同參與醫療決策的決策模式。臺灣職能治療領域的相關研究非常有限，影響 SDM 在臨床實務的應用程度。本研究旨在從職能治療初評中尋找實習生參與共同決策的線索。

方法：本研究為次級資料分析，對象為生理領域實習生。研究者聆聽及檢閱實習生對新病人的評估錄音和逐字稿，從中挑選出符合病人參與醫療決策的觀察 5 (Observing patient involvement in shared decision making5, OPTION5) 各項目意義的對話，進行編碼，並為

OPTION5 的各評分等級提供相應的範例。藉此探尋實習生參與共同決策的線索及表現。

結果：OPTION5 有 5 個項目，每個項目分 5 個等級。經分析，研究者認為 5 個項目均符合職能治療評估情境。由於評分標準較模糊，本研究為每個評分等級建立明確說明及相應對話範例。以項目 1 為例，其意義在於表達決策討論的必要性。該項目 4 分之說明為「不僅提到做決策的需求，也說明為何需要做決策及如何進行決策」，範例為「剛剛看起來主要是某功能比較弱。等等會問一些問題，然後我們討論治療目標，找到一個一起努力的方向，可以嗎？」。

結論：本研究為 OPTION5 建立符合職能治療情境的評分說明及範例，並確認 OPTION5 對於實習生的 SDM 表現具有鑑別度。本研究提供職能治療場域中執行 SDM 的基本認識及實證基礎。

關鍵詞：共享決策；醫病溝通；職能治療

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核心能力導向醫學教育 (Competence-based Medical Education (CBME))

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社區職能治療可信賴專業活動建置與實務操作

Establishment and Practice of Entrustable Professional Activities about the Community-based Occupational Therapy

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目的：醫學教育近年來開始以能力為導向(competency-based medical education, CBME)進行住院醫師能力訓練，導入的評量方式稱為可信賴專業活動(entrustable professional activities, EPAs)。其架構包括學習任務、核心能力及里程碑，它強調以能力為導向來訓練學習者，在職能治療實習與二年期職能治療養成教育中尚處於發展階段。本實務分享社區職能治療可信賴專業活動建置，可以透過結構化的描述及格式促進學員在臨床業務與任務的表現，提供未來不同領域職能治療可信賴專業活動之參考。

方法：參考社團法人臺灣職能治療學會公布之指引，職能治療可信賴專業活動領域大致可分為(1)執行職能治療評估，(2)訂定職能治療計畫，(3)執行職能治療介入，(4)提供衛教與諮詢，(5)撰寫職能治療紀錄，(6)參與跨領域團隊合作，(7)執行職能治療副木或輔具等相關服務。由職能治療組內 5 位臨床教師與教學計畫主持人進行會議，針對(1)、(3)、(5)、(6)及(7)進行可信賴專業活動建置。

結果：112 年 11 月至 12 月間建置完成 5 個可信賴專業活動指引，並於 113 年 2 月至 3 月間二年期職能治療師社區職能治療站外訓執行並逐步調整。

結論：針對社區職能治療領域建置的可信賴專業活動對於實習及二年期醫事訓練學員獨立執行臨床業務有正向的效益。未來可針對其他領域繼續建置相關活動內容。

關鍵詞：可信賴專業活動、核心能力導向醫學教育、社區職能治療

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體驗式活動促進醫學院學生同理心之成效探討

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目的：在現今醫療發展進步的社會下，醫療品質逐漸的被大眾所重視。醫事人員須具備更多的同理心，方可達到良好醫病關係以及醫療品質。本研究透過體驗式活動/情緒辨識影片答題比較受試者同理心及情緒辨識能力是否因體驗活動而提升。

方法：體驗式活動為本研究之主要介入項目，共分成四種體驗方案，所體驗之患者為盲人、偏癱患者及高張患者。採用四種評估工具進行評量，分析是否因體驗式活動介入其同理心及情緒辨識能力之提升。本研究以 excel 將收集到之資料進行編碼與整理，再使用 spss22.0 版進行統計分析。此外以變異數分析(ANOVA)比較四種介入方式對於三項評估工具前後測差分數是否存在差異。

結果：本研究共 50 位受測者參與，以職能治療學系大三為主。情緒辨識整體進步 1.06%。傑佛遜同理心量表整體同意程度較前測分數增加 1 分。同理心建構量表整體後測分數皆提高。不同組別對評估工具之前後測均無顯著差異。

結論：透過互動性的體驗活動，讓受試者體驗個案日常生活中的不便處。於介入後發現受試者整體的同理心與情緒辨識能力有所進步。未來研究可以增加介入時長與頻率，並探討介入與結果之間的相關性。

關鍵詞：同理心、核心素養能力、職能治療人員、醫學教育

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建構虛擬實境輔助活動情境訓練系統提升體驗式學習成效

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隨著虛擬實境 (Virtual Reality, VR) 技術在醫學教育中的應用研究顯示，VR 技術能顯著提升學生學習體驗與成效。本研究旨在應用當前虛擬實境技術，研發針對治療環境的活動團體 VR 訓練系統，以提升初學者在學習活動團體帶領的體驗性與學習效果。研究系統分為四個階段：自學活動理論架構、使用 VR 系統自主學習，獲得體驗式學習知能、結合擴增實境技術完善系統。

目前，本研究已完成系統的初步開發與測試。通過與生成式 AI 的協作，我們成功解決系統中在言語辨識方面的挑戰。具體來說，我們利用 GPT、API，實現了對參與者自我介紹及

活動環節的言語內容辨識功能，顯著提升了系統在聽覺辨識上的準確度。然而，在動作辨識方面，系統仍然存在一些挑戰。系統雖能辨識參與者，但在分辨其具體動作如暖身、介紹或活動時，準確度尚待提升。我們正嘗試結合視覺與聽覺資訊，以改進系統的整體辨識能力，進一步優化使用者體驗。

本研究最終目標是將 VR 與 AR 技術成功導入職能治療的團體帶領教學中，透過實證性的專業實務訓練與評估模組，顯著提升學習者的體驗式學習效果，特別是在團體動力及解決問題能力上的提升。未來的研究將持續優化系統，解決當前面臨的視覺與聽覺整合問題，並進行實證研究以驗證與回饋系統的有效性。

關鍵詞：3D 虛擬實境 (Virtual Reality, VR)、問題導向學習 (Problem-Based Learning, PBL)、醫學教育、生成式人工智慧、體驗式學習

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創新技術應用 (Application of Innovative Technology)

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3D 列印應用在斷指之功能型義肢-案例報告

3D printing applied to functional prostheses for fingers amputation

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前言：在臨床上斷指大多發生在因機械操作不慎所致，其次是交通意外事故所造成。斷指會造成生活及工作上的不便，因此常會製作美觀型或功能型義指來增加手部功能。傳統上功能型義指製作繁複且價格昂貴，往往造成患者的不便且製作時間較長(約 2-3 週)。近年來 3D 掃描及 3D 列印技術發展快速，也廣泛的被應用在各個領域中，包括醫療上。運用這些技術不但可以較快速的製作出手指義肢，也可以避免因製作過程中接觸換這斷指造成的不適甚至感染情況發生。

方法：

- 1.3D scanner (行動 3D 掃描器)掃描患者的手部，掃描後存檔。
- 2.將掃描好的檔案在 meshmixer3D 圖檔編輯軟體中進行編輯。
- 3.將列印檔傳輸至 3D 列印機印出。
- 4.列印出的義肢再經由砂紙磨平。
- 5.在患者身上試戴後再修改。
- 6.最後讓患者試戴看是否需要再修改並執行手功能活動訓練。
- 7.訓練完成後即可讓患者穿戴日常使用。

結果：此方法第一個應用在一位因工作受傷斷指的患者。製作時間大約 5 個工作天完成，讓患者可以較快穿戴訓練並使用。穿戴後除抱怨穿戴太久(半天)會不舒服外無其他問題。目前已經回到職場可做負重較輕的工作。

討論：此方式相較於傳統的製作方式有很大的不同。在製作的時間減少、也不需直接接觸患者、也沒有空間上的限制，成本上也減少很多。目前最大的缺點是繪圖需要較長時間。

關鍵詞：finger prosthesis ,3D printing , Vocational rehabilitation

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分析一般貼布及動態貼布用於狹窄性肌腱滑膜炎之成效比較

Analyze the comparison of the effectiveness of Kinesio ®and dynamic taping for De Quervain's tenosynovitis.

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研究背景：橈骨莖突狹窄性肌腱滑膜囊炎為重複性拇指動作而造成肌腱發炎、腫脹，嚴重時肌腱滑動受限，導致關節活動度受限影響生活品質。一般肌內效（Kinesio®）貼布可有效改善疼痛、水腫、協助功能動作，以貼布彈性製造皺褶使伸拇短肌、拇指外展長肌放鬆，而動態貼布（Dynamic Tape）為新型治療方式，材質具高度回彈力，其目的為幫助肌肉及組織吸收外力並降低組織耗能，透過調整人體動作控制模式降低受傷組織做工，進而改善運動傷害不適感及加速受傷組織恢復，降低伸拇短肌肌腱和外展拇長肌肌腱之負荷以輔助此兩條肌腱做工，但過去無動態貼布應用於橈骨莖突狹窄性肌腱滑膜囊炎研究，也無動態貼布與一般貼布應用於橈骨莖突狹窄性肌腱滑膜囊炎比較之研究，因此本研究希望可探討橈骨莖突狹窄性肌腱滑膜囊炎個案經過動態貼布介入後之成效及與一般貼布成效之比較。

方法：研究蒐集台灣北部某醫院復健科之罹患橈骨莖突狹窄性肌腱滑膜囊炎個案資料，由受過肌內效C級及動態貼布等級1訓練之職能治療師執行貼紮。在一般貼布或動態貼布介入前及介入後當下評估指捏力及握力；手腕關節自我評估問卷以評估疼痛及執行日常生活活動困難度，評估時點則為介入前及介入後24小時以電話訪談取得資料，以獲得個案實際執行日常生活活動後之數據。

結果：結果顯示經過一般貼布或動態貼布治療後，受測者在握力、捏力、手腕關節自我評估問卷-疼痛、疼痛頻密程度、功能及慣常活動並無顯著改善。

結論：初步研究顯示使用一般貼布或動態貼布介入對於橈骨莖突狹窄性肌腱滑膜囊炎雖無顯著差異，但個案對握力、捏力、疼痛及執行生活活動困難度均具有正向效果且對效果感到滿意。

關鍵詞：肌內效、動態貼布、橈骨莖突狹窄性肌腱滑膜囊炎

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結合人工智慧科技於司法精神病人社交技巧訓練之應用

The application of Artificial Intelligence in Occupational Therapy Activities about Social Skill Training for Inpatients in Forensic Psychiatric Setting

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前言：回顧本院司法精神病房病人於過往生活經驗、或觀察現於病室內之行為表現，可發現其在人際相處上容易遇到問題，而近年人工智慧技術興起，因而引發筆者將其結合於職能治療活動中。

目的：簡介如何使用人工智慧技術於本院司法精神病房病人之社交技巧訓練活動，以作為未來應用人工智慧技術於職能治療活動設計之參考。

方法：參與人數為病房全數病人、共計 30 人。為追蹤病人社會認知功能進展，平時會定期評估臉部情緒辨識電腦適性測驗(CAT-FER)、電腦化弦外之音測驗(COTIME)、社會知識電腦適性測驗(CAT-SK)。本次活動職能治療師使用『MyEdit』軟體中的 AI 工具之文字轉換語音功能，將需求文字輸入後選取語音生成之語言、性別、說話風格(情緒)，性別選項中涵蓋不同年齡層，說話風格選項則包含預設、憤怒、愉悅、害怕、難過、嚴肅及友善。治療師將文字內容轉換成不同說話風格後播放給團體參與者聆聽，引導病人如何從說話者之抑揚頓挫推測其情緒、討論日常生活中如何針對他人談話情緒做出適切社交回應，並瞭解溝通過程中自身的語氣表達方式如何影響他人感受。

結論：使用人工智慧軟體將文字轉換為語音後，可發現部分生成語音之語氣較為生硬或是說話風格無明顯差異，故治療師仍需初步篩選、挑選出較有差異性之情緒語音作為活動使用。此應用為一次性團體之運用，雖難以透過平時定期評估測驗推論介入前後之成效相關性，仍可藉此活動發現病人確實容易錯誤解讀他人說話風格，尤以區辨憤怒、害怕及嚴肅情緒出現較多困難，另有個案回饋發現自身說話平淡語氣可能會引起他人誤以為處於憤怒情緒。整體而言，人工智慧技術可能存在部分人性限制，但仍可成為未來治療師在治療活動設計上之運用媒材。

關鍵詞：人工智慧、職能治療、司法精神病房、社交技巧訓練

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Efficacy of High-Definition Transcranial Electrical Stimulation on Upper-Extremity Motor Function in Patients with Subacute Stroke: Study Protocol for an RCT

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Background: A leading cause of death and disability worldwide, stroke leaves many patients struggling with motor function impairment in their upper extremities, even in the subacute stage. Plasticity plays the key roles in the recovery of stroke patients. Non-invasive brain stimulation, such as transcranial direct current stimulation (tDCS), induces plasticity-like after-effects in the human brain, thereby promoting the restoration of motor function. High-definition transcranial electrical stimulation (HD-tES) is an innovative neuro-modulatory device that focally targets specific brain areas with special waveforms for more focused and efficient modulation of brain activity compared to tDCS. However, the efficacy of HD-tES for improving motor function of the upper extremity in patients with subacute stroke still remains unknown.

Objective: This study aims to assess the efficacy of HD-tES on upper extremity (UE) motor function in patients with subacute stroke.

Methods: A double-blinded, randomized controlled study will be conducted. Forty participants will be recruited and randomly assigned to either the active HD-tES group or the sham HD-tES group. Both groups will receive a total of 60 minutes of conventional upper extremity (UE) rehabilitation, five times a week for three weeks. During the first 20 minutes of each rehabilitation session, patients will simultaneously receive 2mA active/sham HD-tES stimulation over the M1 cortex. Outcome measures will be assessed at baseline and post-intervention. The primary outcome will include the change in the Fugl-Meyer Assessment of Upper Extremity after the intervention. The secondary outcome will include changes in the Action Research Arm Test, Motor Activity Log, Stroke Impact Scale 3.0, and Modified Ashworth Scale. Paired t-tests were conducted to examine changes within both groups and the difference in the effects between two groups will be analyzed using analysis of covariance (ANCOVA).

Expected results and contribution: We expect that the HD-tES will effectively improve upper limb motor function in patients with stroke. The findings of this study will demonstrate the potential of HD-tES to augment neurorehabilitation in stroke rehabilitation.

關鍵詞： stroke; high-definition transcranial electrical stimulation; non-invasive brain stimulation; upper extremity; motor function

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虛擬實境對中風患者姿勢控制療效之回顧

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中風患者常見症狀之一為姿勢控制問題，近年來，新興技術虛擬實境似乎在改善上肢功能、步態、平衡和生活品質方面有著不錯的潛力，然而，虛擬實境治療針對姿勢控制的改善尚未定論。透過回顧相關文獻結果發現，虛擬實境能有效改善平衡，提供多感官刺激幫助患者感

知身體和環境，並提供即時反饋，增加訓練動機，透過運動再學習和模擬日常情境提升患者的步態能力。關於上下肢粗大動作，虛擬實境能促進上肢運動再學習和功能性訓練，並對下肢有正面影響，包括提高運動控制和協調性。除此之外虛擬實境可改善步行能力，但回顧之文獻當中均未涉及虛擬實境對於痙攣和肌力的改善。我們也發現，Wii 有助於改善動態平衡、上肢功能和移動性，非沈浸式虛擬實境在步態改善上較有優勢，沈浸式虛擬實境對上肢功能改善效果較小。由於部分文獻樣本數少於 30 人，限制了結果的普遍性。而針對高功能或急性期患者，部分文獻未追蹤長期效果，無法確定療效的持久性且中風參與者年齡跨度過大 (>40 歲)，影響了治療效果的確定性。未來研究應著重個人化、遠端和長期效果評估，以推動虛擬實境在中風復健中的應用。

關鍵詞：虛擬實境、中風、姿勢控制

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行銷、政策與行銷 (Administration, Policy, and Marketing)

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探究影響全人照護之職能治療品質-集體效能與病人增能量表之驗證

Investigation of Quality of Occupational Therapy in Holistic Health Care-Validation of Collective Efficacy and Patient Enablement Instrument

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研究背景與目的：全人照護就是透過滿足病人的身體、情感、社會和精神需求，恢復他們的平衡，使他們能夠面對疾病，從而改善他們的生活。也是復健醫療服務的核心。而集體效能被認為是影響團隊工作績效的重要因素，它決定了團隊對目標的執行任務過程中付出的努力程度，以及遇到困難時集體表現出的堅持程度。國內關於集體效能的理論和實證研究主要集中在教育、社區治理、團隊溝通的理論探索。國外研究證實集體效能可促進健康照護團隊之照護結果，例如：可減少侷限護理照護(rationing of nursing care) 現象，增進護理照護品質，但尚未見於復健醫療之職能治療領域，而探究復健醫療團隊之職能治療品質，集體效能量表之驗證是首要步驟。因此，本研究目的是轉譯與驗證中文版的集體效能(Collective Efficacy) 量表。

研究方法：本研究透過量表調查法，於 2023 年 7 月到 2024 年 7 月在南臺灣某醫學中心對職能治療師與病人進行指標量表施測，量表形式以四點計分方式蒐集受試者意見，並進行整理、分析量表 Cronbach's alpha 值及效度，調整量表指標，以形成正式量表。

結果：共收集到 8 份治療師問卷及 29 份病患問卷，治療師對於工作部門的整體照護品質平均為 8.38

關鍵詞：集體效能，病人增能，全人照護，服務品質

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職能理論與臨床實務 (Occupational Theory and Clinical Practice)

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以羅序模型解析中風個案能力、表現與自覺功能之關聯性

Mapping the relationships among ability, performance, and self-perceived difficulty of activities of daily living in persons with stroke

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背景及目的：中風個案受到動作與平衡等方面之損傷影響，常有執行日常生活活動 (activities of daily living, ADL) 之困難，從而降低自我效能與生活品質。理論上，ADL 可分為能力 (標準情境之執行狀況)、表現 (生活情境之執行狀況或依賴程度) 與自覺功能 (自覺/預期執行之難度) 三種向度，他們分別貢獻不同 ADL 向度之資訊，從而提升臨床與研究人員對個案 ADL 功能損傷情形之全面性瞭解。然而，傳統評估工具僅能量化個案於各 ADL 向度之程度 (例如能力分數高時，表現分數亦高)，但難以確認該程度與具體行為表現之關聯性 (例如當個案進食之「能力」好時，其「表現」與「自覺功能」是好是壞)。羅序模型得以機率模型預測特定程度下之個案，於各已知難度題目之反應，有助於檢視上述 ADL 能力、表現與自覺功能之關聯性。本研究之目的為應用羅序分析檢驗中風個案 ADL 能力、表現與自覺功能之對應關係。

方法：使用昔日研究之數據進行羅序分析，以檢驗巴氏量表 (Barthel Index, BI) 與其補充量表 (BI-based Supplementary Scales) 之題目難度，並以散佈圖呈現 ADL 能力、表現與自覺功能之關係，並計算各 ADL 能力水準時，其能力與自覺功能題目之預期反應。

結果與討論：刪除適配度不佳的題目後，剩餘題目皆有良好的模型適配度，支持羅序分析結果的有效性。三者間呈現與昔日研究相同的高度相關 ($r = 0.79-0.97$)，支持此評估結果的收斂效度。散佈圖顯示，同一能力分數可對映到較少的表現分數，而同一表現分數可對映到較多種能力分數，此結果支持先有能力才有表現的關係。於能力與自覺困難方面，同一自覺困難分數可對映到非常多種能力分數，但同一種能力分數僅可對映到相對少數的自覺困難分數，此結果支持自覺困難的評分具有高度異質性，且不一定與能力有關。於表現與自覺困難方面，同一種自覺困難分數可對映到非常多種表現分數，但同一種表現分數可對映到相對少數的自覺困難分數，此結果除支持自覺困難具有高異質性，也支持個案應先有表現而後能判斷其困難程度。

結論：能力、表現與自覺困難提供不同的資訊，故完整評估應同時包含三者，以取得完整 ADL 的狀態。同時，宜留意自覺困難具有高度異質性，且此感覺未必與能力與表現相關，故如個案反應其有困難時，宜進一步確認其具體遭遇的困難，因此結果未必是能力不足或表現不佳所致。

關鍵詞：關鍵字：中風、日常生活活動、羅序分析、散佈圖

通訊作者：歐育如

發表編號：C_OTP061

投稿編號：1130157

人類職能模式介入對早發型思覺失調症個案之成效

Applying Model of Human Occupation to an Early-Onset Schizophrenia Client

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背景與目的：思覺失調症對個人於社交、職業及其他重要領域的功能造成嚴重損害，並帶來家庭和社會經濟上的負擔。文獻指出，發病年齡早是預後不良的預測指標。此外，認知障礙可能在症狀緩解時仍持續，進而造成疾病的失能。循此脈絡，及早介入復健性治療及工作訓練尤為重要，以提升疾病症狀的控制，並重新與社會連結，促進職能適應。

研究方法：個案為20歲女性，診斷為思覺失調症，因精神症狀影響於大學一年級休學，就醫治療期間正性症狀逐漸緩解，負性症狀仍持續影響日常生活功能，112年1月至精神康復之家接受復健活動。本個案報告以人類職能模式（Model of Human Occupation, MOHO）為架構，於112年1月至113年6月進行介入及資料蒐集，以（1）復健功能評估問卷及質化資料、（2）認知及人際評估測驗，追蹤個案在期間之變化。

結果與討論：藉由人類職能模式為架構之復健性治療及工作訓練介入，個案之負性症狀緩解，生活獨立性、人際互動、認知及職業功能提升。顯示透過人類職能模式介入，對早發型思覺失調症個案於社交、職業及生活重要領域促進之有效性。

關鍵詞：早發型思覺失調症、人類職能模式、工作訓練、負性症狀

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發表編號：C_OTS037

投稿編號：1130143

精神疾病診斷患者用於工作復健訓練之評估工具初探

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工作是精神領域中重要的復健媒介，即職業復健。復元活動的選擇是職能治療專業的核心臨床技能。治療師以個案為中心的觀點，進行職業復健中，需提供個案全人觀點的評估與介入。然而，關於進行職業復健時常用的評估工具的相關文獻資料十分缺乏。

本研究透過電子郵件向全台灣療養院寄發問卷，調查精神科職能治療師在進行工作復健時經常使用的評估工具。調查內容包括職能表現”領域”和”要素”。調查結果顯示，”職能表現領域”評估中，日常生活領域，以會談、加拿大職能表現測驗（COPM）、日常生活活動量表（ADL）、褚氏日常生活功能量表(3rd)和職能自我評估表（OSA）使用率最高，皆佔75%；工作及生產性活動100%使用褚氏日常生活功能量表(3rd)；玩或休閒活動，100%使用興趣量

表。而”職能表現要素”的評估，認知能力 100%採用艾倫認知測驗；心理社會技巧與心理，亦 100%使用完句測驗、興趣量表，和職能治療綜合評量表（COTE）；而感覺動作能力，常用羅文斯坦職能治療認知測驗（LOTCA）和 COTE，皆佔 75%。

本研究初步了解了療養院內進行職業復健時經常使用的評估工具現況，並為進一步探究本土現行精神職業復健職種的適用性提供了參考依據。這些結果將有助於在推薦訓練個案相關工作職種時，提供重要的參考資訊。

關鍵詞：職業復健，工作復健，評估工具

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COVID-19 相關主題 (COVID-19 Related Topics)

發表編號：C_OTP062

投稿編號：1130030

新冠肺炎期間家長健康識能與焦慮情形

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2020 年 1 月 21 日台灣第一起境外移入 COVID-19 案例，影響台灣人的生活，民眾如何去搜尋、了解和使用相關健康資訊之能力，為健康識能(health literacy)。先前研究結果發現有良好的健康識能之民眾，面對 COVID-19 影響其生活時，其焦慮感較低，然而目前較少研究關於接受早期療育孩童之照顧者健康識能及焦慮感，亦無早期療育孩童之照顧者在 COVID-19 期間健康識能及焦慮感之研究。本研究目的為(1)發展傳染性健康識能問卷，並邀請專家對所有題目進行適切性審題和識能層級判定。(2) 預了解政府公告三期警戒開始 5 月至 8 月，有帶孩童來做早期療育復健及未帶者，其健康識能、傳染性健康識能和焦慮情形。共 25 家長/照顧者參與研究，暫停療育者有 11 人，持續療育者有 14 人，受試者以高健康識能層級居多，占 88.0%。結果顯示，有無持續接受療育兩組之健康識能、傳染性健康識能和焦慮程度皆沒有顯著差異，然健康識能高低與焦慮感有顯著差異。受疫情影響，其樣本數少，研究結果顯示需注意家長/照顧者健康識能及焦慮狀況，並提供相關照護。

關鍵詞：健康識能、焦慮感、嚴重特殊傳染性肺炎、早期療育、照顧者

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其他 (請具體說明主題) (Other (please specify the theme))

主題：醫療品質改善

發表編號：C_OTP063

投稿編號：1130007

病人使用手腳運動機導致受傷事件及後續改善

Adverse Events and Subsequent Improvement in Patients Utilizing Upper Limb Cycle Ergometer

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主被動手腳運動機為復健科職能治療常用來訓練個案肢體動作的儀器。一名頸椎損傷的個案，接受職能治療並使用此儀器搭配彈性繃帶及彈簧式懸吊帶固定、支撐上肢進行訓練，於療程結束時，發現手部破皮流血。後續透過 PDCA 的管理手法，進行改善。

運用魚骨圖搭配真因驗證(1)繃帶使用情形(2)彈簧式懸吊及無重力懸吊搭配儀器的差異，找出事件可能造成原因，歸類並擬定改善方向。

1.PLAN

改善計畫分別為(1)新增不同寬窄彈繃及無重力懸吊、(2)主被動手腳運動機搭配彈繃操作標準化、(3)懸吊類型及適用情境內部訓練、(4)類似受傷事件不再發生。

2.DO

於設定期限內新增設備、進行繃帶操作職員訓練及標準化、懸吊適用情境之職員訓練。

3.CHECK

確實新增設備、進行內部訓練且於前後測呈現明顯進步。後續無類似事件。

4.ACT

有效提升同仁使用該儀器安全警覺性、將相關教育訓練列入新進人員必修，並每月定期稽核繃帶操作標準化流程正確率。

透過此改善專案，針對幾項可能造成受傷風險部分進行介入，提升同仁對於儀器操作警覺性，創造共同留意及監督儀器操作相關安全性的單位文化。盼可以繼續維持，以提升安全及促進品質。

關鍵詞：手腳運動機、懸吊帶、PDCA、醫療品質改善

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主題：職災勞工工作強化

發表編號：C_OTP064

投稿編號：1130053

下肢骨折職災勞工於工作強化訓練成果與分析

The outcomes and analysis of work hardening training for occupational accident laborer with lower limb fracture

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目的：職災勞工在重返職場過程中常面臨許多困難，藉由工作強化訓練協助個案恢復工作能力；此研究探討下肢骨折患者於工作強化過程的評估與分析、訓練。

個案問題：個案為一名物流中心理貨員，在工作場所內執行揀貨作業，搬重物從棧板下地面時踩空跌倒，左足挫傷併左跟骨骨折(未開刀)，傷後二個月進行物理治療，未能回復工作所需能力，故於三個月後轉至職能復健機構進行工作強化訓練。

職能治療評估及處置：個案的職務內容為進貨準備、理貨檢貨、盤點、退貨工作，評估後未能達其工作需求的能力有：無法維持連續蹲站與行走、無法完成距離高的上下抬舉、棧板平

衡能力不足、異常代償動作與疼痛情形。針對評估結果，進行工作模擬(貨品堆疊、打標、輸送帶檢貨、物流箱搬運)、工作適能(關節角度與穩定度、肌力與肌耐力、姿勢調整)、職務再設計(鞋墊與壓力襪使用、減壓地墊、滑輪椅使用)。

結果及討論：個案返回職場後可完成整天工作但偶會疼痛到需休息，回家後也有疼痛產生。因此建議持續接受物理治療，調整鞋墊並追蹤。未來針對下肢骨折患者可多進行跨專業討論其他潛在風險與疼痛問題；職務再設計過程，無法調整其休息時間，可進一步思考輔助工具和技術支援。

關鍵詞：職災勞工、工作強化、職能復健機構

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主題：Assessment

發表編號：C_OTIS038

投稿編號：1130158

羅文斯坦職能治療認知評量視覺知覺與視覺動作組織次量表的信度分析及文化相關作答差異探討

Reliability Analysis and Cultural Response Differences in the Visual Perception and Visuomotor Organization Subscales of the Loewenstein Occupational Therapy Cognitive Assessment

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前言：羅文斯坦職能治療認知評量(LOTCA)是職能治療師常用以作為認知行為檢查的評估工具，由以色列發展，然研究顯示在不同文化下執行時信度具爭議，尤其在視覺知覺(Visual Perception, VP)與視覺動作組織(Visuomotor Organization, VO)等項目的評分。

目的：本研究以台灣樣本為基礎，詳盡記錄參與者 LOTCA 評估與作答過程，分析各項目信度及作答錯誤的因素，藉以作為多元族群使用時的建議。

方法：參與者共 67 位(男：32.8%，女：67.2%；平均年齡：56.4 歲；MMSE：24-30 分)。測驗含 VP 與 VO 七個次項目。資料收集過程為先確認參與者的簡易認知狀態與基本資料，再進行 LOTCA 測驗，過程中錄音錄影和紀錄觀察筆記。資料分析含描述性統計與信度分析，依據參與者表現編碼與分類。

結果：七項目 Cronbach α 分布於 .034-.803。其中形狀辨認、重疊圖形、物品恆定性次項目信度較低。20-30 歲參與者作答速度快；教育程度愈高得分較高；50 歲以上參與者多使用台語作答，語言限制與差異易產生答案模糊與錯誤。根據答題內容分析，產生錯誤的原因為：1.文化與時代背景落差(49.2%)、2.答題習慣(35.8%)、3.語言限制(28.3%)、4.圖片誤導(13.4%)。

結論：文化差異將影響評估結果，使測驗信度下降。本研究建議 LOTCA 應調整為與測驗當

地文化相關以利精確評估，包含題目物件選擇、出題觀點、評分標準等，以達多樣與平等的精神。

關鍵詞：Loewenstein Occupational Therapy Cognitive Assessment (LOTCA), Visual Cognition, Visual Motor, Cultural Diversity, Reliability

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主題：芳香療法

發表編號：C_OTSO39

投稿編號：1130190

芳香療法對乳癌個案不適症狀的介入療效文獻回顧

A Literature Review on the Effectiveness of Aromatherapy for Alleviating Symptoms in Clients with Breast Cancer

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背景：乳癌個案於治療期間常有許多身心不適，如疼痛、焦慮、抑鬱和疲勞。芳香療法為一種具有潛力的輔助療法，但少有文獻彙整芳香療法用於緩解乳癌個案身心不適之療效。

目的：本研究欲以系統性文獻回顧的方式，彙整芳香療法對乳癌個案不適症狀（如疼痛、焦慮、抑鬱和疲勞）的療效。

方法：作者於PubMed、EMBASE、華藝線上圖書館資料庫搜尋以下關鍵字：oil, essential oil, aromatherapy, breast neoplasms/breast cancer，檢索2000年至2023年芳香療法應用於乳癌個案之介入研究。

結果：本研究共納入12篇符合條件的文獻，涵蓋乳癌早期（I~III期）和不分期個案，共有1316名受試者，年齡範圍為18-85歲，樣本數介於24-280人。研究的介入時間介於1-12週。結果顯示，芳香療法在緩解疼痛、焦慮、抑鬱和疲勞方面效果顯著。使用含有酯類化合物的精油效果尤為明顯，但成效未顯著優於其他輔助療法。

結論：芳香療法對於緩解乳癌個案的不適症狀具一定程度的療效，特別是在疼痛、焦慮、抑鬱和疲勞方面。未來研究應考慮設計更具個別化的精油配方，並探討芳香療法與其他治療方法的結合使用，以期達到最佳治療效果。

關鍵詞：芳香療法、乳癌、不適症狀、療效評估

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海報發表摘要 Poster presentation abstract

英文發表場次(English presentation session)

兒童與青少年 (Children and Adolescents)

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自閉症類群障礙症家長執行情緒行為介入回顧

Parent-Implemented Emotional Regulation Interventions for Preschool Children with ASD: A Systematic Review

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Background: Children with Autism Spectrum Disorder (ASD) are more prone to experiencing emotional and behavioral challenges than their neurotypical peers. They often face delays in developing emotion regulation strategies. These challenges, frequently linked to emotional dysregulation, affect social interactions, overall development, and daily functioning. Given the crucial role of daily parent-implemented interventions for preschoolers with ASD, it is concerning that no systematic reviews have summarized the evidence on their effectiveness in improving emotional regulation and addressing challenging behaviors by parent-implemented. Therefore, this systematic review aims to fill this gap by evaluating the existing research on parent-implemented interventions and their impact on emotional and behavioral outcomes in preschool children with ASD.

Method: This systematic review examines emotional regulation and challenging behavior interventions for preschoolers with ASD, with a focus on parent-implemented. Using keywords related to emotional regulation, challenging behaviors, parent-implemented, preschool children, and ASD, studies published from 2014 to 2024 were searched in PubMed, Medline, CINAHL, EMBASE, Web of Science, and Cochrane databases. Inclusion criteria encompassed studies targeting emotional regulation interventions through parents for preschoolers with ASD, employing empirical methodologies, detailing intervention techniques, reporting relevant outcomes, and publishing in peer-reviewed sources, available in English. Exclusions involved studies focusing on older individuals, lacking intervention specificity or outcome measurement, and inaccessible texts. This review aims to synthesize evidence-based emotional regulation practices for preschoolers with ASD.

Results: In total, eleven studies on parent-implemented emotional regulation and challenging behavior interventions were included in this systematic review. The intervention included Functional Communication Training (FCT), Prevent-Teach-Reinforce (PTR), Stress and Anger Management Program (STAMP), and parenting training. More than half of the studies utilized FCT, which was

shown to reduce escape-maintained problem behaviors and improve communication. Additionally, FCT was found to be effective when delivered via telehealth. STAMP focused on providing strategies for managing stress and anger, contributing to improved emotional regulation. The parenting training combined different strategies to manage disruptive behavior, enhancing overall emotional and behavioral outcomes. However, eight studies had small sample sizes, and only three studies provided effect sizes: FCT (Cohen's $d=1.57$), PTR (partial $\eta^2=0.18-0.27$), and parent training (effect size=0.62).

Conclusions: This systematic review highlights the effectiveness of parent-implemented interventions in improving emotional regulation and reducing challenging behaviors in preschool children with ASD. Interventions such as FCT and STAMP show promise, particularly when adapted for telehealth delivery. Despite the small sample sizes in many studies, the reported effect sizes suggest meaningful improvements. Future research should focus on larger sample sizes and long-term outcomes to further validate these findings and enhance the evidence base for parent-implemented interventions in this population. Additionally, there is a need for more comprehensive reporting of intervention techniques and outcomes to facilitate replication and practical application.

關鍵詞： children, autism spectrum disorder, emotional regulation, behavioral problems, parent-implemented, intervention

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Development of the Autism Mealtime Behavior Questionnaire for Children with Autism Spectrum Disorder

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Introduction: Feeding problems are common among children, affecting both typically developing kids and those with developmental disabilities. Children with Autism Spectrum Disorder (ASD) often experience feeding difficulties, which might link to their core syndromes (sensory sensitivities, behavioral rigidity, and social challenges). These problems can exacerbate health issues and developmental delays. In order to gain a more comprehensive understanding of the eating behaviors of children with autism, the purpose of this study is to develop a valid and reliable assessment, named Autism Mealtime Behavior Questionnaire (AMBQ).

Methods: The AMBQ comprises 23 items assessing various mealtime behaviors such as eating characteristics, picky eating, behavioral issues, and mealtime flexibility. Each item includes scores for behavior frequency and parental distress level related to that behavior. 50 participants with children aged from 2 to 7 years and diagnosed with ASD were recruited. Internal consistency, test-

retest reliability, and convergent validity were evaluated. The Brief Autism Mealtime Behavior Inventory (BAMBI) served as a criteria measure for assessing convergent validity.

Results:The AMBQ demonstrated excellent internal consistency for both frequency (Cronbach's alpha = 0.908) and distress (Cronbach's alpha = 0.917) scores. Test-retest reliability was excellent for frequency (ICC = 0.937) and good for distress (ICC = 0.874). Convergent validity was supported by moderate to large significant correlations with BAMBI ($r = 0.579$, $p < 0.001$ for frequency; $r = 0.825$, $p < 0.001$ for distress).

Conclusion:The findings confirm that the AMBQ is a reliable and valid questionnaire-based assessment tool for measuring mealtime behaviors and corresponding parental distress level in children with ASD.

關鍵詞：feeding, assessment, psychometric properties

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嬰幼兒按摩於早產兒及其照顧者之效益初探

Exploring the Benefits of Infant Massage for Preterm Infants and Their Caregivers: A Preliminary Study

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Background and Objectives: Infant massage, which integrates principles of massage, yoga, and reflexology, has been shown to offer numerous benefits for both infants and caregivers by providing nurturing touch. However, there is limited research specifically addressing the benefits of infant massage for preterm infants. This study aimed to investigate the effects of infant massage on preterm infants and their caregivers.

Methods: This study was conducted by an occupational therapist certified by the Infant Massage Association, who organized an "Infant Massage Group." The participants included preterm infants with a corrected age of under one year, along with their caregivers. The group sessions lasted five weeks, with each session lasting two hours and covering introductory activities, icebreakers, hands-on massage techniques, theory, discussions, and wrap-up. Preterm infants participating in the group also received regular occupational therapy. A self-developed questionnaire, comprising the "Infant Massage Questionnaire" and "Satisfaction Questionnaire," was used to assess the effectiveness of infant massage and caregivers' satisfaction. The Infant Massage Questionnaire consisted of two parts: one for infants and one for caregivers. Infant-related questions covered sleep and wake patterns, frequency of gastrointestinal issues, environmental sensitivity, emotional stability, verbal and non-verbal communication, and muscle condition. Caregiver-related questions included

understanding of the baby's temperament, intimacy and attachment with the baby, and confidence in caring for the baby. Responses were rated on a seven-point Likert scale and administered before and after the group sessions by caregivers. The Wilcoxon Signed-Rank Test was used to assess the differences between pre- and post- test results of Infant Massage Questionnaire. The Satisfaction Questionnaire evaluated caregiver satisfaction with the group activities and collected qualitative feedback.

Results: Seven parent-infant pairs participated in the group and completed the questionnaires. Infant ages ranged from 0.5 to 6 months. Results of the Infant Massage Questionnaire showed a significant improvement in "overall emotional stability" from 4.86 to 6.00 ($p = 0.038$). Although other scores did not reach statistical significance, post-session scores showed an increasing trend compared to pre-session scores. Results of the Satisfaction Questionnaire indicated that all seven caregivers were highly satisfied with the group. Qualitative feedback highlighted infants' enjoyment of massage, increased sleep duration, and improved tactile sensitivity, relaxation, and bonding between caregiver and infant.

Conclusion and Discussion: The findings suggest that infant massage provides numerous benefits for premature infants and their caregivers, with a significant effect on improving infant emotional stability. Other positive outcomes, such as improved sleep patterns, reduced sensitivity, and enhanced parent-child attachment, although not statistically significant, were evident from qualitative feedback. All participating caregivers expressed high satisfaction with the massage group. Infant massage could be considered as an adjunctive intervention alongside standard occupational therapy for premature infants to enhance emotional stability, sleep patterns, environmental adaptation, and caregiver confidence. However, given the small sample size and subjective nature of questionnaire responses, future research could incorporate randomized controlled trials and standardized assessments to further validate efficacy.

關鍵詞： Infant massage, Preterm infants, Caregivers, Benefits, Occupational therapy

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Facial Emotion Recognition in Children with Autism Spectrum Disorder: Perspectives from Weak Central Coherence Theory

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Background： Facial emotion recognition (FER) is crucial for understanding others' emotions. It poses challenges for individuals with autism spectrum disorders (ASD) due to their preference for

local visual processing over global patterns, a cognitive style explained by weak central coherence (WCC). Previous research suggests that ASD children who adopt less local-oriented strategies may perform better in FER tasks, highlighting the impact of visual processing styles on emotion recognition. However, these findings lack comprehensive and naturalistic experimental settings. This study aims to compare FER performance between children with ASD and their age-matched peers and explore how WCC theory interprets differences in their performance.

Methods : School-aged children with typical development and ASD participated in a FER task involving three conditions: baseline, uncovered (emphasizing whole-face processing), and covered (featuring limited facial features). Performance was assessed based on accuracies and reaction times recorded during the task.

Results : Fifteen school-aged children with ASD and typical development (TD) were recruited. Significant differences in accuracies were observed between groups, particularly in the baseline and uncovered conditions, where the TD group performed better than the ASD group. No significant group difference was found in covered condition. Additionally, there were no significant differences in reaction times across any of the conditions

Discussion This study investigated how school-aged children with ASD differ from their TD peers in recognizing facial emotions. Children with ASD showed lower accuracy in identifying complete facial expressions, which aligns with the WCC theory. They tended to focus more on analyzing isolated facial features rather than integrating overall emotional cues. This suggests that interventions could capitalize on these analytical strengths to improve social interaction skills in children with ASD. Further research with larger samples is needed to refine therapeutic approaches based on these findings.

關鍵詞 : facial emotion recognition, autism spectrum disorders, weak central coherence

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腦性麻痺孩童觸覺功能與上肢動作品質之關聯

Relationship Between Tactile Function and Quality of Upper Limb Movement in Children with Cerebral Palsy

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Children with Cerebral Palsy (CP) often encounter sensorimotor challenges that impact their daily activities. Sensory function, particularly tactile functions, is crucial for motor performance. Recently,

the Manual Ability Classification System (MACS) has become crucial in evaluating these movement challenges, targeting interventions, and improving outcomes. Thus, the purpose of this study was to investigate the relationship between tactile function and upper limb movement in children with CP, using MACS for classification.

Eighty-nine children with CP (42 girls, 47 boys, aged 5 to 13, average 8.72) participated in this study. Participants were categorized by their MACS level into two groups: mildly impaired group (MACS I) and impaired group (MACS II-VI). Tactile function was assessed by the Semmes-Weinstein monofilament (SWM), moving and static two-point discrimination (MTPD, STPD), and the Tactile Perception Test (TPT) for investigating stereognosis, roughness, hardness, and heaviness. Upper limb movement function was measured by the Melbourne Assessment 2 (MA2) which consists of four domains: range of motion (ROM), fluency, accuracy, and dexterity. Stepwise multiple linear regression analyses were conducted to investigate if various types of tactile function could explain the variance of upper limb movement quality in children with CP.

In the mildly impaired group, roughness accounted for 10% of the variation in ROM, hardness for 7% of the variation in dexterity, and both stereognosis and hardness together explained 21% of the variation in fluency. In the impaired group, STPD and stereognosis explained 67% of the variation in ROM and 63% of the variation in dexterity. Additionally, hardness, STPD, and SWM together accounted for 81% of the variation in accuracy, and STPD, stereognosis, and heaviness explained 67% of the variation in fluency.

This study indicates that different aspects of tactile function contribute to explaining the variance in upper limb movement quality in children with CP. In the impaired group, both stereognosis and STPD, as forms of spatial perception, significantly influence overall upper limb movement quality. In the mildly impaired group, unique texture perceptions like hardness partially explain variations in upper limb movement. These findings highlight the need for intervention plans to consider and address specific tactile functions based on the child's MACS level. These insights are crucial for guiding clinical assessments and developing targeted treatment strategies for children with CP.

關鍵詞：Sensory, Motor Performance, Pediatric

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The Impact of Home Environment Enrichment on Visual Function Development in Preterm Infants

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Background and Objectives: Visual is crucial for babies as they explore and gather information about their environment and themselves. The development of visual functions is influenced by the enrichment of their surroundings. This study examines the visual function at 31 to 37 weeks of PMA, 1 month and 3 months CA in premature infants, as well as the correlation between their home environment and visual development.

Methods: 56 participants underwent visual function assessments in the NICU. Among them, 38 were tracked for visual function development at one month of CA, and a total of 42 participants completed visual assessments and filled out a questionnaire about the enrichment of their home environment at three months of CA.

Results: Over 90% of preterm infants showed a mature pattern of ocular movements, fixation, horizontal tracking, and tracking colored targets at the age before 37 weeks of PMA. Over time, participants' visual functions developed further, particularly in vertical and arc tracking, stripe discrimination, and attention at distance. In addition, greater diversity of stimuli in the environment significantly correlated with improved distant attention.

Discussion and Conclusion: The findings reveal that preterm infants aged between 34 and 37 weeks of PMA exhibit mature ocular movements, fixation, tracking horizontally and tracking colored targets. It is primarily associated with subcortical functions. Vertical and arc tracking also relies on subcortical functions, potentially involving extraocular muscles whose development can be accelerated with increased visual experience. Stripe discrimination and attention at distance, however, are likely associated with cortical functions, which mature alongside enhanced visual interaction and cerebral cortex development as infants grow older. Enhancing the richness of the home environment may contribute to the development of visual function in premature infants. However, further investigation is required to determine whether the way or frequency of exposure to the environment or toys influences visual function. In summary, this study provides information about visual function of preterm infants in Taiwan. Future research should expand sample sizes and explore potential interactions between visual experience, neurological development, and enrichment of home environment. This will enable us to offer more precise interventions and home recommendations that support comprehensive development in preterm infants.

關鍵詞： preterm infants, visual test battery, visual function, visual perception, enrichment of home environment

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不同動作遲緩嚴重程度孩童於優化電動車訓練中之環境知覺訊息

Perceived Environmental Information during Optimal Ride-on Car Training in Children with Different Severity Levels of Motor Delays

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Introduction: Modified ride-on car (ROC) facilitates children with motor delays to perceive environmental information without limitation. Previous studies have evidenced the benefits in mobility, social functions, and goal achievements with different postures. This study aimed to investigate what children perceive during the training and to compare training effects based on motor delay severity.

Method: Eight participants completed the training, utilizing different posture modes based on their severity of motor delays: the ROC-Stand(Mild) group (n=2), the ROC-Stand25 (Mod) group (n=4), and the ROC-Sit(Sev) group (n=2). The head-mounted eye tracker was used to collect visual perception. Their mobility, social functions, and goal achievements were evaluated with the Chinese Version of the Pediatric Evaluation of Disability Inventory and Goal Attainment Scaling.

Results: With behavioral coding, their looking behaviors increased after training, particularly in their exploratory and social looking. The correlation analysis showed no direct relationships between their visual fixations and mobility and social functions. Besides, all participants improved in their mobility (p=.001), social functions (p=.004), and goal achievements (p<.001), without significant between-group differences.

Conclusion: ROC training tended to facilitate visual exploration and social looking for children with motor delays. The optimal training based on the severity of motor delays seemed equally beneficial in their mobility, social functions, and goal achievements. Further research should consider a larger sample size and higher quality of eye-tracking recording for profound insight into this topic.

關鍵詞： head-mounted eye tracking, ride-on car training, motor delay, perception-action framework

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Investigating the association between maternal coping behaviors and early childhood development: A study protocol

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According to Fetal Programming Hypothesis and Bronfenbrenner's Bioecological System Theory, mothers can have substantial impacts on their babies in multiple domains through the prenatal and postnatal connection. The present work reports a study protocol in investigating three types of maternal coping behaviors on early childhood outcomes.

The benefit of physical activity is well-documented: Previous evidence indicated that no association was found between physical activity during pregnancy and 'clinically' low or high birthweight of infants. But maternal physical activity was reported to associate with cardiopulmonary function, motor development and personal-social skills of infants. Additionally, the intensity and timing of exercise were reported to influence infants' anthropometric measures (e.g., body composition or head circumference).

'Technoference' refers to parental smartphone use that interrupts the parent-children interaction. Infants who experienced technoference were reported with higher negative affect, including protest behavior and externalizing behavior, and these changes were irreversible even after regaining the parents' attention. Additionally, parental smartphone use may evoke the psychophysiological stress response by increasing heart rate of infants. Moreover, technoference was reported to influence the critical language development factors, which may impact the language development of children. Eating disorder (ED) includes anorexia nervosa, bulimia nervosa, binge eating disorder and eating disorder not otherwise specified of purging type. Maternal ED was correlated with infants/children's difficult temperament of high anxiety levels, negative affectivity, lower extraversion and effortful control. Moreover, symptoms of ED were associated with infants' feeding difficulties and could be further mediated by maternal psychological distress. Importantly, infants with ED mothers were more likely to have poor language, motor and neuropsychological development.

Considering that the influence of these maternal coping behaviors may substantially impact the development of their offspring, sufficient intervention is needed to foster a healthy children growth. Currently, the present authors are working on a study longitudinally investigating the associations between maternal psychological factors (i.e., depression, anxiety, stress, trauma, and fear), maternal coping behaviors (i.e., physical activity, smartphone addiction, social media addiction, and eating disorder), and infant/children's developments (i.e., temperament, sleep, language, cognition, motor, social skill and food responsiveness). Questionnaires and instruments will be used for assessments at prepartum (third trimester) and postpartum (six months after delivery). Linear mixed-effect models and structural equation modeling will be employed to examine the relationships between study variables. The results are expected to provide comprehensive evidence of (i) how maternal psychological changes impact mothers' postpartum behaviors and (ii) how maternal coping behaviors affect infants' developmental outcomes. With long-term evidence, the findings may inform the development of strategies to improve maternal psychological health and strengthen the mother-infant relationship, subsequently enhancing the childhood development and reducing the burden of childcare.

關鍵詞：maternal psychological distress, coping behavior, physical activity, smartphone use, eating disorder, early childhood development

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探討學齡前自閉症兒童睡眠障礙、感覺處理與焦慮之關係

Relationship between Sleep Disturbances, Sensory Processing and Anxiety in Preschool Children with Autism Spectrum Disorder.

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Rest and sleep are essential activities in our daily lives, enabling us to perform optimally. Children with Autism Spectrum Disorder (ASD) are particularly vulnerable, with up to 89.7% experiencing sleep disturbances. Additionally, sensory sensitivities are commonly observed in children with ASD and have been linked to anxiety. Given the high prevalence of sleep disturbances, sensory sensitivities, and anxiety, a single person can exhibit all these problems. Therefore, this study aims to investigate the relationship between sleep disturbances, sensory sensitivities, and anxiety in preschool children with ASD in Taiwan.

We recruited 25 preschool children with ASD (21 boys and 4 girls) whose scores were above 30 ($M = 33.7$) on the Childhood Autism Rating Scale-Second Edition (CARS-2, standard version) and above 70 ($M = 101.68$) on the Peabody Picture Vocabulary Test-Revised (PPVT-R). We detected different types of sleep disturbances using objective and subjective assessments such as actigraphy and the Children's Sleep Habits Questionnaire (CSHQ). We used nonparametric methods for data analysis.

The results showed that sensory sensitivities, anxiety, and night wakings are highly correlated. Sensory sensitivities show a moderate correlation with anxiety ($r = 0.564$, $p = 0.003$), while anxiety is also correlated with night wakings ($r = 0.608$, $p = 0.001$). Furthermore, sensory sensitivities are correlated with night wakings ($r = 0.453$, $p = 0.023$). The mediation analysis demonstrates that sensory sensitivities significantly directly influenced Children's Sleep Habits Questionnaire (CSHQ) Sleep Anxiety. Heightened sensory sensitivities were associated with a 36% increase in CSHQ Sleep Anxiety levels. Sensory sensitivities are also linked to more frequent night wakings, accounting for 42% of the variations in night wakings. Furthermore, the frequency of night wakings, when controlling for sensory sensitivities, is significantly related to higher CSHQ Sleep Anxiety levels, explaining approximately 42% of the variations in CSHQ Sleep Anxiety. The indirect effect of sensory sensitivities on CSHQ Sleep Anxiety through night wakings is statistically significant, indicating that night wakings significantly mediate the relationship between sensory sensitivities and CSHQ Sleep Anxiety.

This study shows the importance of considering sensory processing difficulties and sleep disturbances when concerning anxiety among preschool children with ASD. Sensory sensitivities are associated with CSHQ Sleep Anxiety both directly and through the occurrence of night wakings, with night wakings playing a significant mediating role. Therapeutic interventions are required for preschool children with ASD to consider the presence of sensory sensitivities and sleep disturbances among some children with ASD to address their anxiety.

關鍵詞：#ASD #Sleep Disturbances #Sensory Sensitivities #Anxiety #Preschool Children

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Chinese Handwriting Legibility and Character Processing Skills in Children with Autism Spectrum Disorder

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Handwriting is a crucial task for school-aged children, but it often presents challenges for those with autism spectrum disorders (ASD). An atypical processing pattern identified as weak central coherence (WCC) potentially affects the legibility of handwriting. However, there is limited research on the legibility of Chinese handwriting and WCC phenomena in children with ASD. Thus, this research study aimed to: (1) compare Chinese handwriting legibility between children with ASD and typically developing (TD) children, and (2) investigate the phenomenon of WCC in recognizing Chinese characters and the interaction between groups and character familiarity. This study included 30 children with ASD and 30 TD children from first or second grade. The Chinese Handwriting Legibility Assessment for Children evaluated handwriting legibility, and the Character Processing Test measured WCC effects on character recognition. Results indicated that children with ASD exhibit poorer legibility in Chinese handwriting, particularly in radical proportion and spacing ($p = 0.009$ and 0.046). Children with ASD exhibited a local-focused processing pattern when handling unfamiliar characters ($p = 0.004$), while processing of familiar characters did not significantly differ between groups.

關鍵詞：autism spectrum disorders, handwriting legibility, visual processing, weak central coherence

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Outcome in children with stroke: A population-based cross-sectional study.

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Strokes can happen at any age, and it is named pediatric stroke when it happens in children or adolescents. Pediatric stroke can be mainly categorized into two types depending on the time of onset: perinatal if stroke occurs before one year of age, and childhood if stroke occurs between one to 18 years old. The aim of the study is to investigate the actual motor, cognitive, and psychological status and performance of childhood stroke survivors in Hong Kong. The relationships between different performance aspects would be explored. Childhood stroke survivors who age between 6 and 18 years old are recruited into the study. Using standardized motor, cognitive, and psychological measures, an occupational therapist and researchers utilized the Bruininks-Oseretsky Test of Motor Proficiency Second Edition (BOT-2) as a primary outcome measure for motor function, the Conners Continuous Performance Test 3rd Edition (CPT 3) and Raven's Progressive Matrices as cognitive outcome measures, Strength and Difficulties Questionnaire (SDQ) and the Pediatric Quality of Life Inventory (PedsQL) as psychological measures. This study is believed to provide valuable insights for healthcare professionals in the assessment and treatment of children with stroke, which could lead to improved outcomes and quality of life of this population.

關鍵詞：Stroke, Children, Motor, Cognitive, Psychological, Outcome

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年輕成人握筆方式與手指捏力的初步研究

Handwriting Grip Patterns and Finger Pinch Strength in Young Adults: A Preliminary Study

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Purpose: Handwriting is essential for school-age children to learn Chinese characters and adapt academically. Grip patterns are crucial for occupational therapists assessing motor development. However, studies on adult pen grip patterns are limited. This study investigates grip patterns and finger pinch strength in young adults.

Method: Twenty young adults (average age 20.1, SD = 5 years) were recruited using convenience sampling, with an equal gender ratio. Participants copied 50 characters using a ballpoint pen while their writing process was recorded on video. Three researchers classified grip patterns from the recordings. Finger pinch strength was measured using a B&L pinch gauge.

Results: Pinch strength measurements were as follows: lateral pinch (mean 7.7 kg, SD 2.0), palmar pinch (mean 7.4 kg, SD 2.2), and thumb adduction (mean 4.6 kg, SD 1.4), aligning with previous literature. Six grip patterns were identified: Dynamic tripod (5.0%), Lateral tripod (5.0%), Static tripod (5.0%), Locked grip with thumb tuck (55.0%), Locked grip with thumb wrap (5.0%), Lateral pinch grip (10.0%), Lateral quadrupod grip (5.0%), and Other (10.0%).

Conclusion: The most common grip pattern was the locked grip with thumb tuck, followed by the lateral pinch grip. This differs from children's grip studies, which often identified the Dynamic tripod as the most common. This study provides data on grip patterns in young adults grip patterns, useful for clinical training of adult patients. However, these findings cannot be generalized due to the small sample size, indicating a need for further research with larger samples.

關鍵詞： Handwriting; Grip type; Young adult

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生理領域 (Physical Dysfunction)

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Caregiver-Assisted Rehabilitation with Strategy Training (CAR-ST) for Stroke Survivors with Functional Limitations: Protocol for A Multi-Center, Randomized Trial

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Introduction and objectives: There is a critical need for high-quality evidence to enhance post-stroke activity performance, particularly in real-life settings. Although intensive inpatient rehabilitation has proven effective, sustaining an optimal treatment regimen as patients transition to home remains challenging. Integrating caregivers into home-based, evidence-supported rehabilitation shows potential benefit, but its efficacy requires rigorous evaluation. This study aims to assess the efficacy of caregiver-assisted rehabilitation with strategy training (CAR-ST) in enhancing activity performance among stroke survivors.

Methods: A single-blinded, three-arm randomized controlled trial will compare CAR-ST, strategy training, and attentional control through education. Eligible stroke survivors and their caregivers will be recruited from hospitals in Northern Taiwan and randomly assigned to one of the three groups in a 1:1:1 ratio. Evaluations will take place at baseline, post-intervention, and at 3- and 6-month follow-ups, using the Activity Measure for Post-Acute Care (AM-PAC) as the primary outcome. Secondary outcomes will include the Participation Measure-3 Domains, 4 Dimensions (PM-3D4D), EuroQol-5D (EQ-5D), Stroke Self-Efficacy Questionnaires (SSEQ), Fugl-Meyer Assessment (FMA), and Montreal Cognitive Assessment (MoCA). Following modified intention-to-treat principle, data will be analyzed with repeated-measured ANCOVA. Post-intervention interviews will explore participant

experiences and satisfaction, analyzed through thematic analysis.

Discussion: This study endeavors to provide critical evidence on the immediate and long-term benefits of the CAR-ST program in reducing activity limitations for stroke survivors. The anticipated findings are expected to endorse the implementation of caregiver-assisted intervention in rehabilitation practice and inform future research development.

關鍵詞： Stroke, Caregiver-assisted rehabilitation, Strategy training, Activity limitation

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Effect of Mirror Therapy Combined with Task- vs. Impairment-oriented Intervention in Patients with Stroke

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Background: Mirror therapy (MT) has gained popularity in stroke rehabilitation and may be combined with interventions such as task- and impairment-oriented practice. MT combined with task- and impairment-oriented practice may yield differential benefits for recovery from stroke.

Objectives: This study examined the effects of MT combined with task- (MT-TOT) vs. impairment-oriented (MT-IOT) therapy, relative to TOT in combination with IOT (TOT-IOT) in patients with stroke.

Methods: This is a single-masked, pilot clinical trial. Sixteen participants with stroke were randomized into 1 of 3 groups, i.e., MT-TOT, MT-IOT, or TOT-IOT. Each intervention session was 90 minutes/day, three days/week, with a transfer package for home practice for five days/week. The outcome measures included the Fugl-Meyer Assessment – Upper Extremity (FMA-UE) and the Chedoke Arm and Hand Activity Inventory (CAHAI). Treatment outcomes were studied based on minimal clinically important difference (MCID) and minimal detectable change (MDC).

Results: All participants demonstrated improvement immediately after treatment. Most of the participants receiving MT-TOT achieved the threshold of MCID in the FMA-UE. Approximately fifty percent of the participants receiving the MT-TOT or MT-IOT achieved MDC in the CAHAI.

Conclusions: The preliminary findings suggest that MT-TOT and MT-IOT may improve motor impairments and bilateral upper-limb dysfunction. Further study with a larger sample is needed to study the differential benefits of these combinatory interventions.

關鍵詞： stroke, mirror therapy, task-oriented practice, impairment-oriented practice

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Comparative Effects of Somatosensory-Motor and Somatosensory-Oriented Training on Somatosensory Function in patients with chronic stroke: Protocol for an RCT

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Background: Stroke is a leading cause of disability globally, about half of patients experiencing impaired somatosensory function, influencing their quality of life. Studies have shown that active sensory intervention strategies can enhance cortical reorganization and may help restore patients' somatosensory functions. In addition, given the constant two-way conversation between somatosensory and motor cortices, the intervention targeting sensorimotor integration may lead to better acquisition of motor skills. The somatosensory-motor training program emphasizes that patients receive different sensory stimulations while actively engaging in task-oriented tasks. However, limited research has explored the efficacy of somatosensory-motor training program on somatosensory function.

Purposes: This project aims to compare the effects of somatosensory-motor training and somatosensory-oriented training on somatosensory function in patients with chronic stroke.

Methods: This study will recruit 58 patients into a single-blind (evaluator-blind) randomized controlled trial. After receiving the pre-test assessment, the patients will be randomly assigned to the somatosensory-motor treatment group or the somatosensory-oriented training group according to stratified blocks. Patients will receive a total of 15 hours of treatment over five weeks (3-5 hours per week) and post-test assessments within one week after the completion of the treatment. The primary outcome will include somatosensory function, assessed by the Revised Nottingham Sensory Assessment and the Rivermead Assessment of Somatosensory Performance. The secondary outcome will include daily activity function and quality of life, assessed using the Barthel Index and the World Health Organization Quality of Life. Within each group, paired t-tests will be employed to analyze the effectiveness of training before and after intervention. The differences between the two groups will be compared using an independent t-test.

Expected results and contributions: We expect that the somatosensory-motor training will have a superior effect to the somatosensory-oriented training on the somatosensory function in patients with chronic stroke. The findings of this study will help therapists to choose treatment approaches for optimizing somatosensory recovery for patients with chronic stroke.

關鍵詞：stroke, somatosensory, somatosensory-motor training

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高齡駕駛在交通的視而不見現象：系統性回顧

The looked-but-failed-to-see errors in older drivers: A systematic review

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Introduction: Looked-but-failed-to-see (LBFTS) in traffic scenarios occurs when a driver fails to detect a distinctly visible stimulus ahead. Crash database analysis showed that this error accounts for 69-80% of crashes at intersections. As a perceptual-cognitive error, older adults may be more likely to commit this error compared to middle-aged drivers due to normal functional decline or multiple medical conditions. Yet, no review studies have been done to examine whether aging is a factor of the LBFTS error. This systematic review study aims to synthesize findings to examine whether older drivers have a higher risk of making looked-but-failed-to-see (LBFTS) errors compared to younger drivers.

Method: The search was conducted in Web of Science, Scopus, Embase, MEDLINE (Ovid), and Cochrane CENTRAL trials. The inclusion criteria of the studies were: (1) studies comparing older (aged ≥ 65 years old) and younger drivers' LBFTS errors, (2) the LBFTS performance was presented by the detection rate of critical road objects or hazards, and (3) written in Chinese or English. Studies were excluded if (1) participants were diagnosed with degenerative disorders (e.g., dementia, Parkinson's disease), or (2) participants were required to engage in additional distracting tasks unrelated to driving. The final search was conducted on March 24, 2024. Data were extracted using a predetermined form to collect the features of study participants and instruments to test the LBFTS error. The main outcome was the detection rate of critical road objects or hazards in traffic scenarios. The risk of bias was evaluated using the JBI assessment tool. The article screening, data extraction, and quality assessment were conducted by two researchers. Any conflicts were discussed for consensus.

Result: Eight-eight articles were identified from the search. After screening and removing duplications, three articles met the selection criteria, including 60 older drivers and 50 younger drivers in total. The LBFTS performances were presented using the detection rates between pairs of original and edited static traffic scenarios. The detection rate of older drivers (mean= 44.5-57.4%) was lower than younger drivers (mean= 69.2-75.0%). These studies had high risk of selection and measurement bias with poor quality.

Discussion: The three included studies consistently presented that older drivers' critical traffic object detection rates were lower than younger drivers, indicating the LBFTS errors may be a contributing

factor to crashes involved in older adults. However, strong conclusions could not be made due to the low number of studies included and their poor quality. Future studies can be expended to study the relationship between aging, perceptual-cognitive ability, and LBFTS errors in traffic, and further investigate the risk factor of crashes involving older drivers.

關鍵詞：Looked-but-failed-to-see, older driver, systematic review, change blindness

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不同工作訓練型態對慢性精神病人增強權能影響之初探

Preliminary Exploration of the Impact of Different Job Training Types on Empowerment of Patients with Chronic Mental Illness

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Objective: Empowerment is a multifaceted process that involves enhancing personal, interpersonal, and political power. It enables individuals, families, and communities to improve their circumstances proactively. However, chronic mental illness patients often experience diminished self-empowerment due to symptoms and social stigma. This reduced sense of empowerment can lead to decreased motivation for daily activities and a perceived lack of control over their lives, impacting their overall quality of life. Existing research has highlighted the positive impact of work training on self-efficacy in chronic mental illness patients. However, few studies have compared different work involvement approaches in empowerment. This study aims to explore the relationship between various work training modalities and the empowerment of chronic mental illness patients.

Methods: The study employed a cross-sectional design, recruiting participants from a day-ward within a regional teaching hospital in northern Taiwan from April to June 2022. Participants were divided into three groups based on the services they received: (1) Ward Routine Services, (2) Ward Routine Services + Work Rehabilitation Training, and (3) Ward Routine Services + Sheltered Employment. The Empowerment Questionnaire assessed total empowerment scores and specific subscales, including self-efficacy, internal locus of control, external control, interpersonal communication skills, interpersonal self-assertion, and social self-assertion.

Results: 44 chronic mental illness patients completed the Empowerment Questionnaire significant differences were found among the three groups in terms of age, age of onset, diagnosis, gender, educational level, or religious belief ($p > 0.060$). Significant differences were observed in the total score, self-efficacy, internal locus of control, and external control subscales ($\eta^2 > 0.167$, $p < 0.024$). Post-hoc comparisons revealed that the sheltered employment group had the highest total score

(96.6), followed by the work rehabilitation training group (90.3), and the day-ward routine services group (83.1). Only the sheltered employment group showed a statistically significant difference compared to the standard ward services group ($p = 0.004$). Both the vocational rehabilitation training group and the sheltered employment group achieved identical scores in self-efficacy and internal locus of control (both 23.1), significantly surpassing the standard ward services group ($p < 0.013$). The sheltered employment group scored significantly higher in the external control subscale compared to the other two groups ($p = 0.043$), with no significant difference between the other two groups (both 13.6).

Conclusion: This study highlights a positive correlation between work training and empowerment in chronic mental illness patients. Both the work rehabilitation training group and the sheltered employment group demonstrated higher self-efficacy and internal locus of control scores. However, only the sheltered employment group showed higher external control scores. Future research with larger sample sizes is needed to validate these findings. Additionally, selecting optimal work training programs based on empowerment status can enhance outcomes in day-ward rehabilitation plans

關鍵詞： Empowerment, Work Training, Chronic mental illness

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運用情緒辨識策略及敘述性書寫對於慢性精神病人情緒調節效果之初探

A Preliminary Exploration of the Effects of Emotional Recognition Strategies and Narrative Writing on Emotion Regulation in Patients with Chronic Mental Illness

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Objective: Chronic mental illness patients frequently struggle with recognizing and regulating their emotions, often resulting in alexithymia and a predilection for negative emotion regulation strategies. These difficulties can lead to interpersonal conflicts and a diminished quality of life. While prior research indicates that observing and recording self-emotions can improve self-awareness and facilitate the selection of appropriate emotion regulation strategies, most evidence is derived from studies on healthy adults, leaving the specific effects on chronic mental illness patients unclear. This study aims to evaluate the impact of emotion recognition strategies and narrative writing on the emotional regulation of chronic mental illness patients.

Methods: The study recruited 54 chronic mental illness patients from the day ward of a regional teaching hospital in northern Taiwan. Participants were instructed to observe their facial expressions in the mirror weekly, document the life events that elicited these expressions along with their coping mechanisms, and discuss their observations with an occupational therapist every Monday. The study

was from January to July 2023. to examine the change of Alexithymia and emotional expression conflicts by the Toronto Alexithymia Scales and the Achievement Emotions Questionnaire, before and after the intervention.

Results: Participants' average age was 50 years old, with equal gender distribution. Nearly 90% were diagnosed with schizophrenia, and the average age of onset was 25 years old. The findings revealed a significant and moderate-to-large reduction in emotional expression conflicts following the intervention involving emotion recognition strategies and narrative writing (partial $\eta^2=0.085$, $p=0.031$). However, there was no significant change in alexithymia (partial $\eta^2=0.005$, $p=0.626$).

Conclusion: The results suggest that employing emotion recognition strategies and narrative writing may effectively reduce emotional expression conflicts in chronic mental illness patients, though it does not significantly affect alexithymia. Future research should incorporate more rigorous randomized controlled trials to validate the effectiveness of these methods in mitigating emotional expression conflicts, thereby providing a robust evidence base for their implementation in day wards to improve emotional regulation in chronic mental illness patients

關鍵詞：Chronic mental illness patients, emotional expression conflicts, narrative writing.

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阻力性訓練於思覺失調症之介入成效—文獻回顧

The effects of resistance training in patients with schizophrenia: A literature review.

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Background： The patients with schizophrenia were affected by symptoms, resulting in apathy, decreased motivation, loose daily life, and lower activity levels. As age increases, muscle mass and strength will decline, and the risk of Sarcopenia is higher than normal. Walking, stair up-and-down, sit-to-stand, and balance will become difficult.

Objective： We aim to explore the effects of resistance training in patients with schizophrenia.

Method： The researchers conducted a literature search in the past 10 years (from 2012 to 2021) through PubMed in January 2022. The keywords “schizophrenia”, “resistance training”, and “strength training” were used. Fifty-nine studies were obtained, and Fifty-three non-randomized controlled trials were excluded. Finally, the abstract were screened and 4 of them were included.

Results： Resistance training can improve the positive symptoms and negative symptoms of the patients with schizophrenia, increase muscle strength performance, and improve mobility functions such as sit-to-stand. The results of quality of life are inconsistent.

Discussion： Although the resistance training used in the literature is different, the results show that it can effectively improve muscle strength, and thereby improve functional fitness performance and

symptoms of the clients with schizophrenia. In the experimental group, there was no specific mention of whether to add aerobic exercise, but previous studies showed that aerobic exercise does not affect the muscle strength.

Conclusion : Antipsychotics combined with resistance training are more effective for the patients with schizophrenia. There were some differences of resistance training, but the patients can be improved on muscle strength and endurance. Resistance training has significant effects on both psychological and physical intervention in schizophrenia. In the future, longer-term resistance training in improving quality of life can be explored.

關鍵詞 : schizophrenia, strength, resistance training

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Exploring the Impact of Lifestyle Interventions on Individuals with Mental Illness

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Objective: Individuals with mental illness are at a heightened risk of lifestyle-related diseases such as cardiovascular disease, cancer, and diabetes, resulting in increased morbidity and mortality rates compared to the general population. Lifestyle factors, including physical activity and diet, may serve as protective factors against depressive symptoms. Encouraging lifestyle modifications could offer an effective approach to managing and treating depression in this population. This review aims to investigate the efficacy of lifestyle interventions for individuals with mental illness.

Methods: A systematic search was conducted on PubMed for articles published between January 2014 and March 2024. Only randomized controlled clinical trials were included, with search terms focused on "Lifestyle Intervention" or "Lifestyle Modification" in conjunction with "Mental Illness." Initially, 67 articles were retrieved. Following screening of titles, abstracts, and full texts, only three articles met the eligibility criteria for inclusion in the review, as they specifically investigated lifestyle interventions in individuals with mental illness.

Results: Three studies, all conducted by researchers from Spain, met the eligibility criteria. Participants included individuals with mental illness, including major depression, and those meeting metabolic syndrome criteria. Interventions varied, encompassing community-based nurse-led lifestyle-modification, lifestyle modification programs, and lifestyle change written recommendations. Assessment dimensions included physical health and psychosocial outcomes. One study reported significant improvements in physical health indicators, such as BMI and physical activity. Regarding psychosocial outcomes, two studies found enhancements in quality of life. However, two studies reported no significant difference in depression scores between intervention and control groups.

Conclusions: The findings suggest that lifestyle interventions hold promise for improving health outcomes among individuals with mental illness, particularly in enhancing physical health and quality of life. These interventions may aid in mitigating the high prevalence of lifestyle-related diseases and reducing associated morbidity and mortality rates. Further research is warranted to fully elucidate the long-term effects and optimal implementation strategies of lifestyle interventions in this population.

關鍵詞： lifestyle intervention, lifestyle modification, mental illness, depression, metabolic syndrome

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Effectiveness of Interventions Targeting Walking Speed in Individuals with Schizophrenia: A Systematic Review

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Objective: Objective: Walking speed is an objective and effective measure used to assess an individual's walking ability and performance. Reduced physical activity among individuals with schizophrenia can result in impaired physical function, potentially affecting their walking speed and activities of daily living. Hence, walking speed plays a pivotal role in assessing physical function and rehabilitation progress in schizophrenia patients. This review seeks to assess the effectiveness of walking interventions for individuals diagnosed with schizophrenia.

Methods: A systematic search was conducted on PubMed for articles published up to April 2024. The search utilized the keywords (schizophrenia[tw]) AND (walking speed[tw] OR mobility[tw] OR gait[mh]). Articles of the type RCT or clinical trial were targeted. Initially, 12 articles were identified. Following the screening of titles, abstracts, and full texts, two articles met the eligibility criteria for inclusion in the review.

Results: Two studies conducted by researchers from Taiwan and the United States, respectively, met the eligibility criteria. Interventions varied, encompassing animal-assisted therapy (AAT) and a videogame-based physical activity program using the Kinect for Xbox 360 game system. Assessment dimensions included walking speed, with the first study also including communication and interaction skills. The first study reported significant improvements in lower extremity strength and social skills. The other study showed improvements in walking speed. However, neither of these two studies demonstrated significant improvements in walking speed between the intervention group and the control group.

Conclusions: While interventions targeting walking speed in individuals with schizophrenia, such as animal-assisted therapy and videogame-based physical activity programs, have shown promising

outcomes in terms of improving lower extremity strength, social skills, and walking speed, it's important to note that these improvements were not statistically significant when comparing the intervention and control groups. Despite these findings, the potential benefits of such interventions warrant further exploration through larger-scale studies with longer follow-up periods to better understand their impact on individuals with schizophrenia. Currently, there is limited research specifically targeting walking speed in individuals with schizophrenia, despite its association with functional impairments. Therefore, future studies could focus on interventions aimed at improving walking speed and assess whether enhancements in physical and functional abilities result from improvements in walking speed.

關鍵詞：schizophrenia, walking speed, mobility, gait, intervention

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Frailty and Walking Speed Interventions in Mental Illness

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Objective: Walking speed serves as an objective and reliable metric for evaluating an individual's mobility and physical performance. Additionally, it is closely linked to frailty, reflecting the level of physical function and frailty severity. Individuals with mental illness often exhibit reduced walking speed and are prone to early onset of frailty. This review seeks to examine the effectiveness of interventions targeting frailty and walking speed among individuals with mental illness.

Methods: A systematic search was conducted on PubMed for articles published until April 2024. The keywords used were (frailty[tw] OR sarcopenia[tw]) AND (walking speed[tw] OR gait[mh]) AND (mental illness[mh] OR schizophrenia[tw]) NOT geriatric. Initially, 47 articles were retrieved. After screening titles, abstracts, and full texts, none of the articles met the eligibility criteria for inclusion in the review. Instead, only one article was selected to discuss the findings, with the aim of informing potential interventions for mental illness in the future.

Results: The only relevant article found in the systematic search, titled "Effects of High-Speed Power Training (HSPT) on Neuromuscular and Gait Functions in Frail Elderly with Mild Cognitive Impairment (MCI) Despite Blunted Executive Functions: A Randomized Controlled Trial," aimed to evaluate whether HSPT could enhance physical function despite the presence of blunted executive functions commonly observed in MCI. The results indicated that HSPT yielded positive effects on physical function.

Conclusions: Although the identified study focused on frail elderly individuals with MCI, its findings underscore the importance of investigating interventions targeting physical function in individuals with mental illness, particularly those vulnerable to frailty. Despite the study's focus on

older adults with MCI, its implications extend to other populations, including individuals with mental illnesses such as schizophrenia. Further research is warranted to explore the effectiveness of similar interventions tailored to individuals with mental illness in addressing challenges related to physical function and frailty in this population.

關鍵詞： mental illness, schizophrenia, frailty, walking speed

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Impact of Walking Activity on Walking Speed and Frailty Among Individuals with Mental Illness: A One-Year Follow-Up Study

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Objective: Walking speed is a crucial indicator of frailty, especially among individuals with mental illness who often experience reduced mobility and are prone to early frailty. This study aims to assess the impact of a 20-minute weekly walking activity on walking speed among individuals with mental illness over the course of one year. Additionally, the study aims to explore potential interventions to enhance walking speed and overall mobility in this population.

Methods: Participants were recruited from a psychiatric hospital in northern Taiwan. The intervention involved participating in a 20-minute walking activity once a week for one year. Participants attending the sessions at least 50% of the time were assigned to the walking group (G1), while the remaining participants were designated as the control group (G0). Walking speed was assessed using the Time Up and Go test (TUG) at the pre-test (T0) and one year later at the post-test (T1). Generalized estimating equation (GEE) analyses were conducted to evaluate the intervention effects.

Results: A total of 34 male patients (G1: n=28; G0: n=6) with an average age of 51.41±9.29 years were included in the analysis. The majority (94.1%) had a diagnosis of schizophrenia, and 47.1% had completed high school. At T0, the TUG score was 7.49±0.86 in G1 and 5.98±0.15 in G0. At T1, the scores were 9.34±1.28 in G1 and 7.39±0.48 in G0. No participants in G0 were frail at either T0 or T1. In G1, 5 participants were frail at T0, and the same number remained frail at T1. However, there was no significant difference in the TUG score between G1 and G0 at T1, indicating no significant effectiveness of the walking activity intervention.

Conclusions: Despite our efforts to investigate the impact of walking activity on walking speed among individuals with mental illness over a one-year period, our findings did not reveal a significant difference in walking speed between G1 and G0. Possible reasons for this lack of significant improvement may include low intervention duration and frequency, a small number of participants recruited, and other potential factors not considered in the analysis. However, the

number of frail participants did not increase compared to one year ago, suggesting that walking activity may help mitigate the progression of frailty. Future studies could consider larger sample sizes and longer intervention durations to provide more robust evidence regarding the effectiveness of interventions aimed at improving mobility in individuals with mental illness.

關鍵詞： mental illness, schizophrenia, walking speed, frailty, one-year follow-up

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The Impact of Resistance Exercise on Mental Illness: A Systematic Review of Recent Randomized Controlled Trials

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Objective: Individuals with mental illness are often significantly impacted by their condition, affecting their participation in daily activities, leisure pursuits, and work, which makes independent living in the community challenging. Exercise is a commonly used clinical intervention, and many studies have documented its positive effects on individuals with mental illness. However, there is limited literature on the efficacy of resistance exercise for this population. Therefore, this study aims to investigate the effects of resistance exercise on individuals with mental illness.

Methods: A systematic search was performed on PubMed for articles published within the past decade, up to July 2024. The search terms used were (schizophrenia[mh] OR mental illness[mh]) AND (elastic band[tw] OR resistance band[tw] OR resistance exercise[tw]). The focus was on identifying RCTs and clinical trials. The initial search yielded 51 articles. After screening the titles, abstracts, and full texts, six articles were deemed eligible for inclusion in the review.

Results: Six studies were conducted by researchers from different countries, including Taiwan, the United States, Turkey, and other countries. The participants had various diagnoses: two studies focused on schizophrenia, two on Generalized Anxiety Disorder (AGAD), and the others on PTSD and dementia. The interventions varied, encompassing resistance band exercises, equipment-based resistance exercises, resistance exercise movements, and ball exercises. The intervention frequency was 2-3 times a week, lasting 25-60 minutes. All studies assessed symptoms related to the participants' diagnoses. Additional assessment dimensions included behavioral problems, functioning, and quality of life. All studies found that resistance exercise improved symptoms of mental illness. Specifically, resistance exercise decreased behavioral problems in dementia, improved social and occupational functioning in schizophrenia, and enhanced muscle strength and quality of life in schizophrenia.

Conclusions: The findings of this review suggest that resistance exercise has beneficial effects on individuals with mental illness. It can reduce behavioral problems, improve social and occupational

functioning, and enhance muscle strength and quality of life. These positive outcomes indicate that resistance exercise is an effective intervention for improving various aspects of health and well-being in this population. Given the limited literature on this topic, further research is needed to strengthen the evidence base and explore the long-term benefits of resistance exercise for individuals with different types of mental illness.

關鍵詞：resistance exercise, elastic band, mental illness, schizophrenia, clinical intervention

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Music rhythm reduced movement abnormalities in people with psychotic experiences: A randomized controlled trial

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Background: People with psychotic experiences (PE) exhibit slow movements and uncontrolled/involuntary movements, which cause negative consequences on people's work/school performances and social expressive behaviors. Additionally, movement abnormalities are associated with subsequent increased risk of the onset of psychotic diseases. Only few studies have developed early intervention for these initial abnormalities in the psychosis continuum.

Aims: This pilot randomized controlled trial was to examine if the use of classical music rhythm (MR), an attractive and promising technique of neurologic music therapy, incorporated in functional movement training reduced severity of slow movements and uncontrolled movements in people with PE.

Methods: Fifteen people with PE were randomly allocated to receive 21-day and daily 40-minute functional movement training (picking up beads) with the aid of MR or to receive the same training without the aid of MR. This study adopted motion analysis to measure severity of movement abnormalities at pretest and posttest. This study also recruited 15 age- and gender-matched people without PE to provide reference data of movement performances.

Results: MR incorporated in dominant-hand movement training may reduce severity of slow movements and uncontrolled movements at both hands in people with PE.

Conclusions: Rich neural connections between auditory and motor cortices in humans may explain powerful influences of MR on movements in people with PE, who have basal ganglia alterations and thus possibly affected motor control. This study offers initial evidence of efficacy of music-related non-pharmacological early intervention that tackles initial abnormalities in the psychosis course.

關鍵詞：Early intervention; motor skills; music; psychosis; psychotic-like experience

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Effects of Resistance Exercise on Frailty in Individuals with Schizophrenia: A Randomized Controlled Trial

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Objective: Clinically, individuals with schizophrenia often exhibit low motivation, reduced physical activity, decreased muscle strength, and frequent falls, which may be related to frailty. Previous research has indicated that resistance exercise can enhance muscle strength, improve occupational functioning, and increase the quality of life in patients with schizophrenia. However, there is limited literature on the efficacy of resistance exercise for this population concerning frailty. Therefore, this study aims to investigate the effects of resistance exercise on frailty in individuals with schizophrenia.

Methods: Sixty participants with schizophrenia will be recruited from the rehabilitation ward at Taoyuan Psychiatric Center, Ministry of Health and Welfare in Taiwan. The participants will be randomly assigned to either the resistance exercise program (REP) group or the treatment as usual (TAU) group. The REP will consist of 30-minute sessions, held twice a week for three months. Each session will include warm-up exercises (5 minutes), resistance band exercises (20 minutes), and stretching exercises (5 minutes). According to Fried frailty indicators, the following five components will be measured: slow walking speed (measured by the Timed Up and Go test, TUG), low handgrip strength (men: ≤ 26 kg, women: ≤ 18 kg), weight loss (≥ 3 kg in the preceding year), low physical activity, and depression (measured by the Center for Epidemiologic Studies Depression Scale, C-ESD). Participants will be classified as frail if they have three or more positive indicators, pre-frail with one or two indicators, and non-frail with no positive indicators. Self-reported outcome measures, including the Brief Psychiatric Symptom Rating Scale (BSRS) and the Schizophrenia Quality of Life Scale Revision 4 (SQLS-R4), will be assessed. Measurements will be conducted at three time points: pre-test, post-test, and one-month follow-up. Generalized estimating equation (GEE) will be used to examine the effects of the resistance exercise program on frailty, psychiatric symptoms, and quality of life.

Expected Results: Individuals with schizophrenia who participate in the REP group are expected to show significant improvement in frailty, psychiatric symptoms, and quality of life compared with the control group. The REP is anticipated to reduce health decline, promote well-being, and be a feasible addition to rehabilitation programs for people with schizophrenia. Based on the expected results of this study, it is recommended to incorporate and promote sustained resistance exercise within rehabilitation programs for individuals with schizophrenia.

關鍵詞 : schizophrenia, frailty, resistance exercise, psychiatric symptoms, quality of life

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Exploring the Relationship Between Burnout and Stigma in Psychiatric Occupational Therapy Practitioners in Taiwan

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INTRODUCTION : Mental health professionals strive to eliminate stigma associated with mental illness. However, research has indicated that these professionals may themselves hold stigmatizing attitudes. One manifestation of this stigma is maintaining social distance from individuals with mental illness. Unawareness of their own stigmatizing behaviors could undermine treatment outcomes. Research from other countries suggests that burnout may be a significant factor contributing to the stigma mental health professionals hold towards mental illness. In Taiwan, psychiatric occupational therapy(OT) practitioners are dedicated to enhancing the health and well-being of individuals with mental illness. Despite their commitment, these practitioners are currently experiencing severe burnout. There is a lack of research exploring the relationship between burnout and stigma towards mental illness among psychiatric OT practitioners in Taiwan. This study aimed to investigate the relationship between burnout and the preferred social distance toward mental illness among psychiatric OT practitioners in Taiwan.

METHODS : This cross-sectional study recruited licensed OT practitioners working in psychiatric settings through regional OT unions. Data were collected using online questionnaires, which included questions on demographics, the Oldenburg Burnout Inventory(OLBI) and the Social Distance Scale(SDS). The OLBI consists of two subscales: Exhaustion (i.e., exhaustion resulting from work) and Disengagement(i.e., emotional distancing from one's work), with higher scores indicating greater burnout. The SDS assessed stigmatization by gauging participants' willingness to engage in social interactions with individuals with mental illness, with higher scores indicating a greater preference for social distance. Pearson correlation tests were utilized to analyze the data.

RESULTS : A total of 124 psychiatric OT practitioners completed the questionnaire. The results indicated that the demographic characteristics(e.g., ages, years of experience) of psychiatric OT practitioners was not significantly correlated with social distance. However, higher level of burnout was associated with greater preference for social distance. Disengagement and exhaustion were weakly but significantly correlated with social distance (Disengagement: $r = .218$; $p = .015$; Exhaustion: $r = .191$; $p = .033$).

CONCLUSION : The results suggest that psychiatric OT practitioners who experience greater

emotional distancing and exhaustion resulting from their works would have lower willingness to interact with people with mental illness. The results highlight the importance of managing burnout and mitigating stigmatizing behaviors.

關鍵詞： burnout, stigma, psychiatric occupational therapy practitioners, mental illness

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Enhancing Recovery: A Journey in Psychiatric Hospital Care

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Introduction: In the dynamic landscape of psychiatric care, the journey towards recovery-focused models represents a significant paradigm shift. This abstract chronicles the transformative initiative undertaken at a psychiatric hospital in Singapore from September 2020 to November 2023, aimed at infusing recovery-focused care into acute ward settings.

Building Awareness and Knowledge: Central to our initiative was the development of comprehensive training courses. These courses were designed to impart essential knowledge and foster awareness among healthcare staff. By equipping them with the tools to understand and implement recovery-focused approaches, we aimed to cultivate a culture of empowerment and collaboration.

Empowering Service Users: Empowerment lies at the heart of recovery. We devised recovery booklets, empowering service users to take charge of their own journey towards wellness. These booklets served as invaluable resources, providing guidance and support as individuals navigated the complexities of their mental health challenges.

Piloting Recovery-Focused Wards: Two pilot wards emerged as the focal point of our endeavour. Here, staff underwent specialized training, embracing the principles of recovery-focused care under the guidance of occupational therapists (OTs). Through dedicated efforts and a commitment to holistic wellbeing, these wards became beacons of innovation and progress within the psychiatric hospital. Recognizing the diverse needs of service users, we adopted a multifaceted approach to group sessions. OTs, together with doctors, peer support specialist, and nurses, implemented programmes to initiate the recovery journey.

Structured and Unstructured Group Sessions: Group sessions were conducted to empower service users to gain confidence and skills (e.g. Instrumental activities of daily living skills, social skills) to work towards their goals. Furthermore, group sessions allow them to build routine and give them the autonomy to choose their preferred leisure activities. For instance, service users were involved in planning and preparing events like ‘carnival day’ where they made movie tickets and

prepared snacks. Unstructured leisure sessions were conducted weekly. Service users can choose activities like craft, games and puzzles, from the resource trolley.

Impact and Challenges: The impact of our initiative reverberated throughout the psychiatric hospital. Increased awareness of recovery care and mental health rehabilitation was evident, with positive feedback from service users underscoring the effectiveness of our approach. Moreover, referrals to psychiatric rehabilitation wards surged in the pilot wards, signalling a tangible shift towards holistic, recovery-focused care.

However, our journey was not without its challenges. Schedule conflicts and manpower issues posed logistical hurdles, while resistance among staff towards the recovery care model necessitated ongoing education and support. Yet, these challenges served as catalysts for growth, galvanizing our resolve to overcome obstacles and forge ahead on the path towards enhanced psychiatric care.

Conclusion: In retrospect, our initiative stands as a testament to the transformative power of recovery-focused care. Through strategic training, empowerment, and the cultivation of innovative practices, we have ushered in a new era of psychiatric care characterized by instilling hope, compassion, collaboration and building resilience. As we continue to navigate the complexities of mental health, let us remain steadfast in our commitment to fostering recovery, one step at a time.

關鍵詞： Rehabilitation, mental health, recovery program, psychiatric hospital

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正向思考訓練對住院慢性精神病患者心理健康的成效

The Effectiveness of Positive Thinking Training on the Mental Health of Hospitalized Chronic Psychiatric Patients

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Purpose: Chronic psychiatric patients often experience negative emotions, exacerbating their mental health issues, especially after stress-inducing situations such as pandemic isolation. This study aims to investigate the impact of positive thinking training on the mental health of chronic psychiatric patients, focusing on their well-being, self-esteem, and self-efficacy.

Method: From June to September 2022, a convenience sampling method was used to recruit hospitalized chronic psychiatric patients for participation. A total of 26 subjects completed the study, with an average age of 51 years; 76.92% were diagnosed with schizophrenia, and 61.53% were male. Each subject participated in 12 sessions, attending at least 10 sessions. Each session lasted 60 minutes. For the first 5 minutes, participants meditated, focusing on their breath or listening to music to achieve inner calm. This was followed by 25 minutes of reading positive encouraging words, with four A4-sized pages containing about 20 positive thinking sentences each, and sharing these

thoughts. Next, participants engaged in 25 minutes of writing positive thoughts, ending with a 5-minute sharing session of the most resonant positive thoughts. Each session included 20 positive statements selected by the therapist from Jing Si Aphorisms or online platforms to foster positive thinking. Well-being, self-efficacy, and self-esteem were assessed using the WHO-5 Well-Being Index, GSES scale, and RSE scale, respectively. Statistical analysis was conducted using paired sample t-tests.

Results: The study found that after 12 weeks of positive thinking training, there was no significant improvement in the well-being ($p=0.119$), self-esteem ($p=0.218$), and self-efficacy ($p=0.662$) of chronic psychiatric patients.

Conclusion: Although the study did not show significant improvements in the mental health of chronic psychiatric patients through positive thinking training, participants expressed high satisfaction with the activities, noting a relaxation and uplift in their mood. This suggests that positive thinking training may impact patients' emotions and self-perception. Future research should employ more comprehensive assessment tools to evaluate the effects of positive thinking training on mental health. Encouraging patients to cultivate a positive mindset and self-affirmation could help them better cope with life's challenges and stress, enhancing their psychological resilience and self-regulation abilities.

關鍵詞： Positive thinking training, chronic psychiatric patients, mental health, well-being, self-esteem, self-efficacy, psychological resilience

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園藝團體應用於慢性精神疾患個案之療效初探

The Effects of Horticultural Activities on Patients with Chronic Mental Disorders: A Pilot Study in Northern Taiwan

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Background and Objectives: The belief in the healing power of plants is commonly held, attributed not only to their vigorous vitality, but also to the rich sensory stimulation provided by their diverse colors, forms, and fragrances. Horticultural therapy activities involve the use of plants and gardening activities. They serve as a medium to facilitate physical, mental, and emotional well-being through interactions between individuals and plants. This study aimed to explore the effects of a series of horticultural activities applied to individuals with chronic mental disorders.

Methods: Participants were recruited from a psychiatric day care unit in a hospital in northern Taiwan. Occupational therapists designed and led a five-week series of horticultural group activities.

The series included: Week 1: Introduction to plant classification and basic plant care; Week 2: Succulent plant arrangement and potting; Week 3: Plant Hunt Game; Week 4: Gardening from Seeds; Week 5: Making Seed Art. The Horticultural Therapy Well-being Questionnaire and Group Satisfaction Questionnaire were used to assess the effectiveness of the group. The Horticultural Therapy Well-being Questionnaire, administered before and after the series, consisted of seven dimensions: physical health, leisure activities, sense of achievement, mood status, cognitive function, social skills, and horticultural cultivation skills, each rated on a scale from 1 to 5. The Group Satisfaction Questionnaire evaluated participants' satisfaction with the group activities on a scale from 1 to 4, and open-ended questions were used to collect subjective feedback. Statistical analysis involved paired sample t-tests to analyze differences in scores on the "Horticultural Therapy Well-being Questionnaire" before and after the group sessions, and descriptive statistics and qualitative data were used to present the results of the "Group Satisfaction Questionnaire."

Results: A total of 59 participants took part in the horticultural activities. In the Horticultural Therapy Well-being Questionnaire, there was a significant increase in the "mood status" dimension score from 3.03 (± 0.93) to 3.32 (± 0.89), $p = 0.031$, and in the "understanding of horticultural cultivation techniques" dimension score from 2.17 (± 0.97) to 2.81 (± 0.89), $p < 0.001$. However, there were no significant differences in the scores of other dimensions between pre-test and post-test. The average satisfaction score on the Group Satisfaction Questionnaire was 3.05/4 (± 0.68). Qualitative feedback from participants included comments on the lively and enjoyable activities, sense of achievement, and learning about the knowledge of caring plants.

Conclusion and Discussion: This study demonstrates the positive effects of horticultural activities on participants, particularly in terms of mood status and horticultural cultivation skills. Although other dimensions did not show significant improvements, this may be attributed to the relatively short duration of the group sessions. Most participants expressed satisfaction with the group activities, highlighting the relaxed atmosphere and sense of achievement, and expressed a desire to participate in similar themed groups in the future. Future research could explore extending the duration of group sessions, incorporating standardized assessment measures, and conducting multi-center studies in different hospitals and rehabilitation facilities to further validate the therapeutic effects.

關鍵詞： Horticultural therapy, Chronic mental disorders, Psychiatric day care, Well-being, Group therapy

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Relationships between sensory processing patterns and sleep quality in individuals with mental illness in Taiwan

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Introduction: Previous studies have shown the relationships between sensory processing patterns and sleep quality among other populations, such as college students, and individuals with Autism (Lane et al., 2022; Chang et al., 2019). However, less is known about the exhibit of sensory processing patterns in individuals diagnosed with mental health diagnoses as well as its relationship with sleep quality. Yet, it is apparent that sensory processing patterns may be a factor contributing to poor sleep, which could negatively impact health conditions and increase the risk for heart disease, stroke, and diabetes (Akinseye et al., 2016; Altman et al., 2012). Thus, the purpose of the study was to examine the associations between sleep issues and sensory processing patterns in individuals diagnosed with psychiatric disorders.

Methods: A cross-sectional survey study was used. Eligible adults who received a diagnosis from the psychiatrist and aged 18-64 from the rehabilitation wards, day wards, halfway house, and outpatient department at a psychiatric center in southern Taiwan were recruited. They must be able to read the questionnaire in traditional Chinese independently and/or completed elementary school. The survey includes 1) demographic questions, 2) the Adult Sensory Processing Measure-Taiwanese version (ASPS-TW); and 3) the Pittsburgh Sleep Quality Index - Chinese version (CPSQI).

Results: Out of 274 eligible participants recruited, 203 completed the survey with a 74% response rate. Most were males (66.7%), and the average age was 48.4 ± 9.13 years, showing no significant differences in age between genders. The average sleep hour was 8.0 ± 1.4 hours, and the average sleep efficiency reached 92% (67 - 100%). However, more than 77% had CPSQI global scores above 5, indicating significant sleep disturbances that may require further thorough sleep evaluation. The CPSQI sleep global score is significantly correlated with the majority of the sensory processing factors, including over-responsive to auditory, visual, and touch (all $p < .01$) as well as overall under-responsiveness, auditory seeking, under-responsive to touch (all $p < .05$). It is worth noting that of those who were hospitalized, all of them had sleep schedule regulated by the ward nurses requiring them to get up between 6-7 AM and lights out at 9-10 PM. They had at least four other roommates.

Discussion: Results suggest that sensory processing patterns and preferences should be considered when developing an individualized sleep treatment plan, as sensory processing patterns are significantly correlated with global sleep scores and some sleep components. Sleep is complex, and it remains unclear whether their sleep impacts daily routines as most of them have their daily occupations scheduled per hospital schedule. Also, it is unknown whether their home sleep environment (roommates, lighting, etc) differs from the hospital environment. Hence, it is important to form a team approach (e.g., psychiatrists, nurses, and occupational therapists) for better sleep results and provide home evaluation upon discharge. For occupational therapists, it is recommended to consider sensory processing preferences when addressing sleep in the evaluation and treatment plans.

關鍵詞： sleep quality, sensory processing patterns, mental illness

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Validation and exploring the relationship between internet-related instruments among Ghanaian university students

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The present study evaluated the psychometric properties of six instruments for assessing internet use-related disorders: the Gaming Disorder Test (GDT), Gaming Disorder Scale for Adolescents (GADIS-A), Bergen Social Media Addiction Scale (BSMAS), Smartphone Application-Based Addiction Scale (SABAS), Internet Gaming Disorder Scale-Short Form (IGDS9-SF), and Nomophobia Questionnaire (NMP-Q), along with their association with time spent on internet-related activities and psychological distress. The study recruited 520 university students (59.2% females, mean age 19.55 years) through purposive sampling. Cronbach's alpha and McDonald's omega were utilized to test the internal consistency of the instruments. Confirmatory factor analysis (CFA) was conducted with fit indices including comparative fit index (CFI) and Tucker-Lewis index (TLI) to examine construct validity, while Pearson correlation was employed to evaluate the relationship between the instruments. The results indicated satisfactory levels of internal consistency as shown by Cronbach's alpha (0.81-0.97) and McDonald's omega (0.81-0.97). The unidimensional structure was confirmed for GDT (CFI = 1.000; TLI = 0.999), BSMAS (CFI = 1.000; TLI = 0.999), SABAS (CFI = 0.998; TLI = 0.997), and IGDS9-SF (CFI = 0.999; TLI = 0.998); a two-factor structure was confirmed for GADIS-A (CFI = 0.998; TLI = 0.997); and a four-factor structure was confirmed for NMP-Q (CFI = 0.998; TLI = 0.998). Scores from instruments measuring gaming disorders, smartphone addiction, social media addiction, and nomophobia are all closely related ($r = 0.10-0.96$; $p < 0.009$). The study's findings demonstrate that the six instruments are reliable and valid for assessing internet-use disorders among university students in Ghana, and they indicate a link between all the instruments, indicating a strong relationship between these different forms of internet-related disorders.

關鍵詞： internet addiction, problematic internet use, social media, internet use disorder, factor analysis, psychometric validation

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Factors Influencing Caregiver Burden in Long-Term Care 2.0: Insights from the Long-Term Care Case-Mix System

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Background: As the global demographic shifts towards an older population, the demand for elderly care services has intensified, leading to increased pressure on primary family caregivers.

Understanding the dynamics of the caregiving environment is essential for alleviating caregiver burden and enhancing their support mechanisms. This study investigated the determinants of caregiver burden within the framework of Long-Term Care 2.0, using data from the Long-Term Care Case-Mix System (LTC-CMS).

Methods: This study utilized secondary data from the “Care Service Management Information Platform,” focusing on caregivers of recipients aged 65 and older who have a designated primary caregiver. The analysis explored how care recipients' self-care capabilities, demographic factors, and the caregivers' living conditions and support networks affect caregiver burden. Hierarchical linear regression models assessed the effects of Activities of Daily Living (ADLs), Instrumental Activities of Daily Living (IADLs), and various caregiver-related environmental and support variables.

Results: We analyzed 1,059 records corresponding to 653 care recipients. Controlled for sex, age, educational level, and marital status, key factors influencing caregiver burden included IADLs, the ability of care recipients to stay home alone for 1-3 hours, having more than one caregiver, health status over the past month, and overall quality of life. The results suggest that higher IADL scores and the ability of care recipients to stay home alone for short periods significantly reduce caregiver stress. Conversely, increased caregiving demands, worsening health of caregivers, and declines in their overall quality of life notably increase caregiver burden.

Conclusion: The study highlights that caregiver burden is lessened when care recipients can independently perform more complex activities. Regular, stable intervals between care evaluations also correlate with reduced caregiver burden. These insights underscore the importance of supporting caregivers through improved care recipient independence and structured support systems.

關鍵詞： Long-Term Care 2.0, caregiver burden, home-based services

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銀髮健身俱樂部第二年計畫於中部某精神專科醫院執行評價分析

Evaluation and Analysis of the Second Year Program of the Silver Fitness Club at a Psychiatric Hospital in Central Taiwan

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Objective : In response to the rapid aging of the population, the Ministry of Health and Welfare launched the Silver Fitness Club program in 2020. A psychiatric hospital in central Taiwan began implementing this project in 2022, focusing on serving patients with mental illness, elderly individuals, and their caregivers. The primary objective is to promote self-health, reduce frailty, and incorporate healthy lifestyle concepts to enhance physical and mental well-being while encouraging social participation.

Method : A silver fitness club was established at a psychiatric hospital in central Taiwan. To effectively delay and improve frailty, the program primarily focuses on resistance strength training and precise monitoring of exercise intensity. Equipment for group exercise heart rate monitoring, resistance training, and air bikes for cardio endurance training was set up. The primary beneficiaries are patients with mental disorders at the hospital. In addition to utilizing the designated space, instructors also bring exercise equipment to various units for group physical training. The main goal is to provide fitness services that improve strength and muscular endurance, along with a series of training courses for staff on leading exercises for special populations.

Results : Since the program's inception, the number of elderly users (aged 65 and above) has grown significantly, with 105 participants in 2022 and a cumulative total of 1,440 to date. An analysis of participants from August 2022 to September 2023 reveals noteworthy improvements in functional fitness performance. Except for static balance, all other assessed parameters showed over 50% improvement. Additionally, the muscle mass index of participants improved and was maintained at a rate of 57%. Notably, six individuals achieved muscle mass indices indicative of reversing sarcopenia.

Conclusion : The Silver Fitness Club Project exemplifies an innovative approach to elderly health promotion within a psychiatric setting. By leveraging the unique characteristics of the hospital environment, this initiative not only enhances the physical well-being of its participants but also fosters social engagement and improves overall quality of life. Future research should focus on expanding this model to further enhance its impact on vulnerable populations.

關鍵詞 : Senior Fitness Club, mentally ill patients, physical fitness activities

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The Phenomenon of Repeated Participation in Vocational Training among Individuals with Mental Disorders

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Objective: To investigate the phenomenon, reasons, and employment outcomes of repeated participation in vocational training programs among individuals with mental disorders.

Methods: This retrospective study analyzed the case data of individuals with mental disorders who participated in vocational training programs at a psychiatric hospital over the past 20 years. The study aimed to understand the background information of the participants, the time interval between training sessions, employment status, and the differences between the first and second training sessions.

Results: Out of 240 participants in vocational training programs over 20 years, 7 (2.9%) participated in the training programs multiple times. The average age of these 7 participants was 34.4 ± 5.4 years old (range: 29-44 years old) at the time of their first participation and 42.0 ± 5.6 years old (range: 34-50 years old) at the time of their second participation. The average time interval between the two training sessions was 7.6 years (range: 4-11 years). A paired t-test revealed a statistically significant difference in the average age between the first and second participation ($t = -7.257$, $p = 0.000$). The severity of the participants' disabilities was mainly mild to moderate, with only one participant experiencing an increase in the severity of their disability (from mild to moderate) during the second training session. Among the 7 participants, 4 chose different vocations to learn new skills in their second training session (with a 100% completion rate for both training sessions, a 75% employment rate after the first training session, and a 25% employment rate after the second training session). The remaining 3 participants chose the same vocation in both training sessions (with a 33% completion rate for the first training session and a 100% completion rate for the second training session; a 66% employment rate after the first training session and a 33% employment rate after the second training session). The overall completion rate for the first training session was 71.4%, and the completion rate for the second training session was 100%. The employment rate after the first training session was 71.4%, and the employment rate after the second training session was 28.6%.

Conclusion: The study found that repeated participation in vocational training programs among individuals with mental disorders may be related to age, the need for different skills, or a preference for specific vocations. Repeated participation may help to improve the completion rate of training programs but may not necessarily improve employment outcomes.

Keywords: individuals with mental disorders, vocational training, repeated participation, employment rate

關鍵詞： individuals with mental disorders, vocational training, repeated participation, employment rate

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Exploring the Roles and Challenges of Occupational Therapists in Community Mental Health Centers in Taiwan

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Objective: This study aimed to explore the role positioning, work content, challenges, and professional development needs of occupational therapists (OTs) working in community mental health centers (CMHCs) in Taiwan.

Method: A qualitative research design was employed. Semi-structured questionnaires were used to collect data from seven OTs working in CMHCs (with an average of 6.5 years of experience). Thematic analysis was used to analyze the data.

Results:

- Roles of OTs: OTs are primarily responsible for client assessment and consultation, leading therapeutic groups, assisting clients with employment, and linking clients to community resources.
 - Work content: OTs' work encompasses mental health promotion, mental illness prevention, case management, and community rehabilitation.
 - Challenges:
 - o The role of OTs is ambiguous, and other professionals lack understanding of occupational therapy, which makes referrals and collaboration difficult.
 - o Resources are insufficient, including human resources, funding, space, and equipment.
 - o Interprofessional collaboration is difficult due to the lack of a communication platform and consensus.
 - o Limited support from supervisors who may not understand or value the occupational therapy profession.
 - Professional development needs:
 - o Enhance professional knowledge and skills, particularly in the field of community mental health.
 - o Expand service models and develop more diverse and innovative service content.
 - o Strengthen interprofessional collaboration by establishing effective communication and collaboration mechanisms.
 - o Advocate for more resources and support, including human resources, funding, and policy support.
- Conclusion:** Occupational therapists in CMHCs play a crucial role in mental health promotion and mental illness prevention in Taiwan, but they face numerous challenges. Future efforts should focus on strengthening professional training for OTs, raising awareness of occupational therapy in society,

establishing interprofessional collaboration models, and advocating for more resources and support to facilitate the development of community mental health services.

關鍵詞：Community Mental Health, Occupational Therapy, Role Challenges

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Impact of Aging Attitudes and Psychological Distress on the caregiving burden of Family Caregivers of Older Adults

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Purpose: Understanding the factors associated with the burden on family caregivers of older adults is crucial, including their attitudes and beliefs toward aging. There is ample evidence showing the adverse effects of psychological distress on the health and well-being of older adults, as well as the negative impact of ageism on their health, which subsequently leads to increased healthcare costs. However, research focusing ageism on family caregivers remains scarce in this context.

Methods: Eligibility for this study required family caregivers currently caring for older adults. Recruitment approaches included two types: online and in-person. Community members were recruited via an online flyer containing a survey link distributed to older adults and their caregivers. In-person recruitment was carried out in inpatient wards and outpatient clinics. Family caregivers (N = 93, mean [SD] age = 69 [7.2]; 51 [54.8%] women) answered survey questionnaires assessing attitudes toward ageing (via Attitude and thoughts Toward Older People Scale), burden (via Zarit Burden Interview), psychological distress (via Depression Anxiety Stress Scale-21), and quality of life (QoL) (via World Health Organization Quality of Life Questionnaire-Brief, WHOQOL-BREF).

Results: The caregivers, on average, provided care for 57.89 months (SD = 49.2). Sixty caregivers lived with family members with disability, five reported poor health in the past month, two rated their overall quality of life as very poor, and 11 had ceased working to provide care, affecting their employment. Bivariate correlations indicated that caregivers' self-directed ageism correlated with caregiver burden ($r = 0.261, p < .001$); institutional ageism correlated with caregiver burden ($r = 0.298, p < .001$), physical QoL ($r = -0.288, p < .001$), psychological QoL ($r = 0.033, p = 0.677$), social QoL ($r = -0.161, p = 0.041$), environment QoL ($r = -0.086, p = 0.277$), and psychological distress ($r = 0.274, p < .001$).

Conclusion: Family caregivers' ageism significantly associated with caregiving challenges. Future

support and education should emphasize positive caregiving aspects, clarify normal and atypical aging, and dispel negative stereotypes to enhance family caregivers' adaptation and resilience.

關鍵詞：caregiver; ageism; burden; psychological distress

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職能治療教育 (Education in Occupational Therapy)

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案例式教學、角色模擬與自我反思於職能治療系大一學生溝通能力之教學效果

Enhancing Clinical Communication Skills in First-Year Occupational Therapy Students through Case Method Teaching, Role-Playing and Self-reflection

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Effective clinical communication skills are the cornerstone of a occupational therapist's professional competence. Good patient-therapist communication can enhance patient trust, promote patient engagement, and ensure that treatment plans meet patient needs. However, research on the effectiveness of clinical communication skills training is quite limited. This study explores the effectiveness of combining case method teaching, role-playing and self-reflection strategies to improve the communication skills of 20 first-year students. The course included three weeks of case method teaching (CMT) and role-playing, followed by four weeks of field practice.

In the case method teaching, the instructor provided three clinical cases and role-play dialogues. Students were divided into groups of three to analyze real cases, taking turns to play the roles of the therapist, elderly patient, and observer. The observer provided feedback to the students playing the therapist and the elderly patient. This process fostered the students' critical thinking, communication, and group dynamics. During the field practice, students visited a day care center to conduct occupational profiles and complete the Canadian Occupational Performance Measure with elderly

individuals. After the field practice, students completed four self-reflection reports. Students completed a communication skills questionnaire before and after the teaching sessions. The questionnaire was a 5-point Likert scale. After the course, students also completed a course satisfaction questionnaire, also on a 5-point Likert scale. Results showed that the average pre-test score for the communication skills questionnaire was 3.0 (SD = 0.8), and the post-test score was 3.5 (SD = 0.8), indicating significant improvement ($p < .001$). The average score for the course satisfaction questionnaire was 4.31 (SD = 0.75). Qualitative feedback from students' reflection journals included comments such as, "I have changed my perception of elderly patients. I used to think they were rigid and difficult to communicate with, but after the visits, I found their mindset to be very young," and "Interacting more with the elderly has increased my empathy." In conclusion, case method teaching, role-playing and self-reflection effectively could enhance first-year students' clinical communication skills. Future studies should increase the sample size and use randomized controlled trials for further validation.

關鍵詞：communication skills, case method teaching, role-playing, self-reflection, education

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創新技術應用(Application of Innovative Technology)

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Site effects of combining non-invasive brain stimulation with mirror therapy on motor functions post-stroke

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Introduction： Mirror therapy (MT) has been demonstrated to improve the motor function of the paretic upper extremity (UE) in stroke patients. Transcranial direct current stimulation (tDCS), a non-invasive brain stimulation technique, can enhance the effects of MT. The primary motor cortex (M1) has been a tDCS target for being the main motor output site. However, M1 would be damaged in the infarction or hemorrhage of the middle cerebral artery, which is highly prevalent in stroke populations. The premotor cortex (PMC) could be an alternative tDCS site for its essential role in motor learning/planning and for its being less affected by stroke.

Objectives： This study aims to investigate the effects of tDCS at PMC versus M1 combined with MT on motor functions in chronic stroke.

Method： This study was a double-blinded, randomized controlled trial. Thirty-three chronic stroke patients were randomly assigned to one of three groups (PMC, M1, or Sham). All participants received 20 intervention sessions (90 min/session, 3-5 sessions/week). Clinical assessments were

performed before and after interventions to evaluate changes in motor functions. Outcome measures were motor impairment by the Fugl-Meyer Assessment Scale-UE (FMA-UE), grip and lateral pinch strength by the Jamar Hydraulic Hand Dynamometer, and UE motor ability by the Wolf Motor Function Test (WMFT). Mixed ANOVA was conducted to analyze the effects regarding group, time, and their interaction.

Results : A significant interaction effect was shown in the grip outcome ($F_{2,30}=4.23, p<.05$). The post hoc analysis showed significant improvements after intervention exclusively in the PMC group but not in the other groups. For the rest of the outcomes, only significant time effects were demonstrated in the FMA-UE ($F_{1,30}=26.59, p<.05$), lateral pinch ($F_{1,30}=4.44, p<.05$), bimanual grip ($F_{1,30}=12.37, p<.05$), and WMFT-functional ability scale (FAS) ($F_{1,30}=20.61, p<.05$). The post hoc analysis showed different improvements for the three groups. The TMC group exhibited significant improvement in FMA-UE ($p<.05$), grip ($p<.05$), bimanual grip ($p<.05$), and WMFT-FAS ($p<.05$). The M1 group exhibited significant and marginal improvement in FMA-UE ($p<.05$), lateral pinch ($p<.05$), bimanual lateral pinch ($p<.06$), and WMFT-FAS ($p<.05$). The Sham group only exhibited significant improvement in FMA-UE ($p<.05$).

Conclusion : Our results support the advantage of either PMC or M1 tDCS with MT in improving motor functions in chronic stroke. Applying tDCS on different sites exhibited different effects. Applying PMC tDCS with MT seems more beneficial for enhancing the grip of the paretic or bilateral UE, while M1 tDCS with MT appears to be more effective in improving the lateral pinch of the paretic or bilateral UE. Both tDCS protocols can improve motor impairment and motor ability of the paretic UE for stroke patients. The combined mode of tDCS at PMC and M1 with MT to facilitate motor functions should be considered in future clinical applications.

關鍵詞 : Stroke, transcranial direct current stimulation, premotor cortex, primary cortex, mirror therapy

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The therapeutic effects of mirror therapy sequentially combined with robot-assisted therapy on motor and daily function and self-efficacy in stroke

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Introduction : Robot-assisted therapy promotes upper limb function in stroke survivors through intense, repetitive practice. Mirror therapy improves motor function of the upper limb after stroke by mirror-induced visual illusion to facilitate neuroplasticity. Combining these two interventions might yield greater therapeutic effects.

Objectives : We aimed to examine whether mirror therapy would augment the therapeutic effects of robot-assisted therapy on motor function, daily function, and self-efficacy in chronic stroke survivors.

Materials & methods : A single-blinded randomized controlled trial was conducted in this study. Thirty-seven individuals with chronic stroke were randomly assigned to the experimental group receiving mirror therapy prior to robot-assisted therapy and the control group receiving sham mirror therapy prior to robot-assisted therapy during an intervention session. All participants received 18 intervention sessions (60 min/session, 3 sessions/ week). Outcome measures were evaluated at baseline and after the 18-session intervention. Motor function was assessed using the Fugl-Meyer Assessment. The daily function was assessed using the Nottingham Extended Activities of Daily Living Scale. Self-efficacy was assessed using Stroke Self-Efficacy Questionnaires and the Daily Living Self-Efficacy Scale. Data was analyzed using mixed model analysis of variance.

Results : Both groups showed significant improvements in motor and daily function, but there were no significant differences between the two groups. Participants receiving mirror therapy prior to robot-assisted therapy experienced greater improvements in self-efficacy measures compared to those receiving sham mirror therapy.

Conclusion : Our findings suggest that robot-assisted therapy improved upper limb function and daily independence in chronic stroke survivors. Combining mirror therapy with robot-assisted therapy could further enhance self-efficacy post-stroke.

關鍵詞 : stroke, robot-assisted therapy, mirror therapy, combination

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電子化旋轉後眼球震顫測驗設備開發與信效度建立

The reliability and validity study of motorized post-rotary nystagmus test

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ABSTRACT : Research background and purpose: A valid assessment result depends on accurate processes and good reliability and validity. Post-rotary nystagmus test is a physiological indicator commonly used in occupational therapy to evaluate children's sensory integration and vestibular function. The traditional assessment process requires manual rotation at a constant speed (one revolution every 2 seconds, 30 rpm) for ten revolutions and then the observation of nystagmus. However, during the rotation process, it is often difficult to control the rotation speed and the same speed throughout the process due to the weight of the child and the difference in rotation tools. It is

usually impossible to control the stimulation intensity of the entire rotation process, which affects the evaluation results.

Methods: A rotating test table was developed in this study. The table size is 35 cm high and 80 cm in diameter. The table includes upper cover, iron plate and base. The base includes mechanism, motor, power supply, driver and microprocessor controller. The examiners can use their smartphones to control the rotating test table, can set different rotation speeds, and can choose the rotation direction. Under a load of 80 kg, the rotating test table can reach the set speed in 2.0 seconds. Preliminary study on reliability and validity: This study recruited 22 subjects and recorded the post-rotary nystagmus period. Different speeds (normal speed and slow speed, 30 RPM and 15 RPM respectively), rotation modes (electric and manual), and directionalities (clockwise and counterclockwise) were applied as control variables. After each rotation test, the nystagmus was videotaped for further analysis. In addition, to test the test-retest reliability, each subject received clockwise and counterclockwise assessments on the same day. The testing order of rotation direction was counterbalanced in the 22 subjects.

Research results: A total of 22 subjects participated in the experiment completed the tests. The average age was 21 years old. The average nystagmus duration of normal speed rotation was 14.37 (sd=3.43) seconds, the average of slow rotation was 11.26 (sd=2.55) seconds, and the average of manual rotation test was 11.02 (sd=3.02) seconds. ANOVA was used to test the mean differences among the three protocols. The results showed that there was a significant difference between the protocols ($F=26.494$, $p<.001$). The nystagmus duration of the normal speed test was significantly longer than that of the slow rotation test ($p<.001$) and manual rotation test ($p<.001$).

In the test-retest reliability test, the same subjects were tested for clockwise and counterclockwise rotation at normal speed. The mean difference was $-.25$ (sd=2.20) seconds ($p=0.440$), and the correlation coefficient was $.86$ ($p<.001$).

Conclusion: This study found that a motor-driven rotary platform can provide quantitative vestibular stimulation. In such a standardized rotary platform, the post-rotary nystagmus test is more reliable and valid when compared with a manually propulsive platform.

關鍵詞： post-rotary nystagmus, precision measure, validity, reliability

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探索 BDNF 基因型對中風復健中大腦功能性連接性的影響：一項前驅研究

Unravelling the Impact of BDNF Genotype on Functional Brain Connectivity in Stroke Rehabilitation: a pilot study

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Background: Neuroplasticity is crucial for stroke rehabilitation, and brain-derived neurotrophic factor (BDNF) provides the key biological foundation for forming new connections between neurons, supporting recovery. It has been found that BDNF can predict upper extremity outcomes three months after a stroke (Hyuk et al., 2017). Despite the association between physical outcomes and BDNF, the exact mechanisms remain largely unknown. Recent developments in neuroscience have employed network-based approaches to examine the rehabilitation process (Latifi & Carmichael, 2024). Notably, graph theory, a mathematical approach, has been used to describe changes in functional connectivity using different graph metrics during recovery after a stroke. Therefore, we hypothesized that BDNF would affect the formation of brain networks, reflected in graph-related metrics. We predicted that genotype would affect functional connectivity differently, particularly in the damaged hemisphere.

Method: 20 chronic stroke patients with mild cognitive impairment were classified by BDNF genotype: Val/Val (n=5), Val/Met (n=13), or Met (n=2). They underwent pre- and post-treatment assessments and engaged in exercise-cognitive training for 60 minutes/day, 3 days/week, over 12 weeks. EEGs were recorded during a cognitive task, and physical outcomes, such as the upper limb Fugl-Meyer assessment (FMA-UE) and Rivermead Mobility Index (RMI), were also measured. EEG preprocessing was done using custom EEGLAB scripts, and graph metrics were analysed with the Brain Connectivity Toolbox. Functional coupling was computed for theta (4-8 Hz), alpha (8-12 Hz), and beta (13-30 Hz) frequency bands, focusing on global and local metrics in the damaged hemisphere (F3/F4). A mixed-ANOVA with Genotype (Val/Val, Val/Met, Met) and Time (pre vs. post) was separately applied to each combination of graph metrics and frequency bands.

Results: There was a significant interaction in FMA ($p < .01$), primarily driven by elevated FMA scores in both Val/Val ($p = .01$) and Met ($p < .01$) groups. For RMI, a marginal Time effect was detected ($p = .08$). Regarding graph metrics, the results showed a significant interaction in global efficiency ($p = .04$) and degree ($p = .01$) at the alpha band. Follow-up post-hoc analysis revealed a reduced degree in the Val/Met group after training. Although other post-hoc results were not significant, all genotypes showed a decreasing trend. Additionally, there was a significant main effect of Time on local efficiency ($p = .02$) and betweenness centrality ($p < .01$) at the theta band. Post-hoc analysis of local efficiency showed no significant difference after training, but a trend of reduced values across all genotypes. Conversely, betweenness centrality showed a non-significant trend of increasing values in all groups.

Discussion: The reduced global efficiency may indicate a modular process, where the frontal lobe decreases its integration of information from distributed brain regions after training. Similarly, local efficiency-related metrics, including degree and betweenness centrality, showed a declining trend post-training, suggesting that the frontal network initially forms several connections but gradually trims irrelevant ones during training. This study highlights the use of graph theory in understanding

functional changes during rehabilitation concerning genotypes and may provide insights into personalized stroke treatments.

關鍵詞：BDNF genotype, Stroke Rehabilitation, graph theory, EEG

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職能理論與臨床實務 (Occupational Theory and Clinical Practice)

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探索成人的遊戲經驗

Do you play? Exploring Adult Play Experience

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Background: Play has been viewed as a critical occupation supporting health since the founding of occupational therapy, but the complexity of play presents challenges to scholars who study adults. Researchers in occupational science and occupational therapy often address the experiential qualities of occupations, including those considered to be play. However, the literature lacks clear descriptions of what constitutes adult play and the experiences of adults during preferred activities. We refer to these activities as adult play because they contain experiential qualities of play described in key play literature.

Methods: This is a cross-sectional survey study. A 31-item survey, the Daily Occupational Experience Survey–revised (DOESr), was uploaded to Qualtrics for data collection. Snowball sampling was used to recruit participants aged 18–64. Exploratory factor analysis was used to extract the most prevalent patterns of play experiences reported. Internal consistency and content validity were also examined.

Results: 491 participants completed the survey. The factor analysis yielded an optimal solution of five factors representing distinct patterns of adult play experiences: Creativity–Adventure, Restoration, Deep Engagement, Ludos, and Mastery.

Conclusions: The five factors identified by the DOESr represent distinct patterns of adult play experiences. The DOESr demonstrated acceptable internal consistency for three factors and the overall tool.

關鍵詞：Occupation, Play, Evaluation and Assessment

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認知訓練對重度憂鬱症成人的有效性：統合分析

The Effectiveness of Cognitive Training in Adults with Major Depressive Disorder: A Meta-Analysis

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Abstract :

Purpose : Cognitive training (CT) has been increasingly explored as a therapeutic intervention for improving cognitive functions and reducing depressive symptoms in adults with Major Depressive Disorder (MDD). This meta-analysis aims to evaluate the effectiveness of CT compared to placebo or other treatments in enhancing cognitive functions and alleviating depressive symptoms in this population. By employing a meta-analysis approach, this study synthesizes the existing evidence on the impact of CT in adults with MDD.

Method : A comprehensive search was conducted in PubMed, Embase, and Cochrane databases up to July 2024 to identify studies on cognitive therapy for MDD patients. The inclusion criteria were randomized controlled trials (RCTs) with a clinically defined current or lifetime history of MDD, using established criteria such as the Diagnostic and Statistical Manual of Mental Disorders 5th edition guidelines (DSM-5). Given the variability in medication use, dosage, and baseline risk among participants, a random-effects model was employed to pool the included studies. The meta-analysis was performed using R, and the quality of evidence was assessed using the GRADE framework.

Results : A total of 21 RCTs involving 1007 participants were included. The meta-analysis revealed that cognitive training had a modest but significant effect on reducing depressive symptoms (Hedge's $g = 0.25$, $I^2 = 69.2\%$, 95% CI [0.03, 0.48]). Additionally, significant improvements were observed in executive function (Hedge's $g = 0.45$, $I^2 = 42.31\%$, 95% CI [0.26, 0.63]), and working memory (Hedge's $g = 0.38$, $I^2 = 71.14\%$, 95% CI [0.11, 0.65]). However, the effect on verbal learning was less conclusive due to high heterogeneity (Hedge's $g = 0.64$, $I^2 = 93.86\%$, 95% CI [-0.01, 1.30]).

Conclusions : According to the best available evidence, cognitive therapy for patients with Major Depressive Disorder (MDD) demonstrates statistically significant effects. MDD is a debilitating condition that significantly impairs cognitive functions and daily living activities. Cognitive training (CT) has emerged as a valuable intervention for enhancing cognitive abilities and alleviating depressive symptoms in adults with MDD, highlighting its potential as a complementary treatment in clinical practice. The results of this study underscore the effectiveness of CT in improving executive function and working memory, supporting the holistic approach of occupational therapy in addressing both cognitive and emotional aspects of MDD. As professional occupational therapy managers, we recognize the importance of integrating CT into clinical practice to enhance

therapeutic outcomes for individuals with MDD, and encourage occupational therapists to consider CT as a viable option for improving cognitive and emotional well-being in patients.

關鍵詞：Cognitive Training、Major Depressive Disorder、Occupational Therapy、Meta-Analysis

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腎臟損傷重症患者譫妄症之神經電生理特性:事件相關電位研究

Electrophysiological characteristics of delirium in critical care patients with renal dysfunction: An event-related potential study

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Background: Delirium is a prevalent and severe complication in critically ill patients, often associated with increased mortality, prolonged ICU stays, and cognitive decline. The pathophysiological mechanisms underlying delirium are not fully understood and can be associated with a variety of diagnoses. Current diagnostic tools, such as the CAM-ICU, have limitations, particularly in patients who are sedated or comatose, making accurate and timely identification of delirium challenging. Mismatch negativity (MMN) is an electrophysiological indicator that reflects the brain's functional integrity of sensory memory and involuntary attention switching. It offers objective and quantifiable assessments of neural processing and is sensitive to various cognitive and neurological conditions, making it a valuable tool for evaluating brain function in critically ill patients. Thus, the present study aimed to examine the electrophysiological characteristics, as indexed by MMN, in ICU patients with and without delirium. Furthermore, the relationship between the severity of delirium and MMN responses were explored.

Methods: Since patients with renal-related conditions have been reported to be at a higher risk of developing delirium, we recruited ICU patients with renal dysfunction who were hemodynamically stable and monitored for delirium. Subjects were assigned to either the delirium (n = 14, age 71.8 ± 2.3 years) or non-delirium (n = 13, age 62.5 ± 3.6 years) group based on CAM-ICU results. MMN recordings and Confusion Assessment Method-Severity (CAM-S) were conducted within 24 hours of ICU admission using an auditory oddball paradigm. This paradigm involved presenting a sequence of frequent 'standard' auditory stimuli interspersed with infrequent 'deviant' stimuli, designed to elicit the MMN response. All ICU patients were monitored twice daily until discharge. Due to the fluctuating nature of delirium, subjects were allocated to the non-delirium group only if they had no

history of positive results from the CAM-ICU. Thirteen healthy adults were also recruited as the controlled group. The parametric analyses were applied when the data were normally distributed; otherwise, non-parametric analyses were utilized.

Results: ICU patients had significantly smaller MMN peak amplitudes compared to healthy controls ($p = 0.017$). Additionally, delirious patients showed significantly prolonged MMN peak latency compared to non-delirium patients ($p = 0.005$). It was also interesting to note that the MMN peak latencies were positively correlated with the scores of CAM-S across all the ICU patients ($r = 0.369$, $p = 0.029$), suggesting that more severity of delirium was associated with slower information processing in the brain.

Conclusions: Aberrant MMN responses were clearly observed during episodes of delirium in ICU patients. Our data provided an in-depth understanding of the impact of delirium on the brain function.

關鍵詞： delirium, intensive care unit, renal dysfunction, mismatch negativity (MMN)

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