Action Over Inertia: An update on research and practice

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Megan Edgelow, Dr. Terry Krupa, (Queen's University), Dr. Shu-Ping Chen (University of Alberta)
Overview

- Review of the workbook
- New developments
- Continued research
- Expansion of content to new populations
Action Over Inertia

- Created at Queen’s in collaboration with community OTs in 2007, published by CAOT in 2010
- What’s in a name?
- Who was the workbook developed for?
- Who might benefit from participation?
Dimensions of Activity Engagement

- Occupational balance
- Physical activity
- Structure and routine
- Meaningfulness of activity
- Satisfaction derived through activity
- Social interaction
- Accessing community environments

(Bejerholm, Hansson & Eklund, 2006; Bejerholm & Eklund, 2007)
What is unique about Action Over Inertia?

- Its activity health and participation focus
- Articulates the many benefits in daily activity participation
- Draws on existing evidence base related to time use and activity participation
- Focused and assertive engagement of clients in activity participation
- Tailored to clients’ needs- time on the various chapters can be shortened or lengthened
- Relies on occupational therapists’ expertise and clinical reasoning to tailor the program to the clients’ needs
New Developments

- AOI has been translated into French, Hebrew, Mandarin and German
- Training has been held across Canada and internationally
- Featured as a psychosocial intervention in Australia’s Mental Health Professional On-line Development (MH-POD) Program
Book Reviews

**Reviewed in PRJ,** December 2010, 35(1)
- “Of particular benefit are the worksheets related to helping consumers first chart their activity level and type through daily logs, assessing the balance of their activities, i.e. where and how they spend the greatest amount of their time, examining the intersection of physical activity, routine and structure on a daily basis, and then exploring the amount of meaning, satisfaction and social interaction these activities afford them.” —Melanie Kinley, BA, trainer/consultant Thresholds, Chicago, IL.

**Reviewed in BJOT,** April 2011, 74(4)
- “I…would recommend this workbook to any occupational therapist who works in mental health rehabilitation or recovery, whether in an inpatient or a community setting.” —Robert White, Lead OT, West London Mental Health NHS Trust

**Reviewed in CJOT,** February 2012, 79(1)
- “Overall, this is an excellent resource guide offering occupational therapists or mental health professionals worksheet exercises and resources. Although it has been specifically designed for use with individuals with a serious mental illness, it would likely also be of value for those with a serious physical illness/disorder where increasing engagement in activities also enhances physical and psychological well-being.” —Dr. (Hedy) Anna Walsh, OT, SW, LLB
RCT Pilot Study

- Published a randomized controlled pilot study of the Action Over Inertia intervention

- Pilot tested 18 participants who had a serious mental illness and a history of extreme activity disengagement

- Treatment group increased time spent in activity engagement by 47 minutes per day on average after 12 weeks

- All treatment participants gave positive feedback and would recommend the program to others with similar challenges

- Changes seen:
  - Normalized sleep patterns
  - Volunteer work
  - Participation in leisure and social programming
  - Improved home management
  - Participation in spiritual activities
Change in Sleep

* results statistically significant at $p \leq 0.05$
1. Balance in my life: I could benefit from more balance between my self-care, leisure, productivity, and rest activities. 
   Rate how true this statement is for you.
   
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2. Physical activity: I could benefit from more “physical” activity in my life.
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3. Structure/routine: I could benefit from more structure and routine in my day.
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4. Meaning: I could benefit from more activities that I find meaningful in my day.
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5. Satisfaction: I could benefit from more satisfaction from activities in my day.
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6. Social interactions: I could benefit from having more social interactions through my daily activities.
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7. Accessing community environments: I could benefit from activities that take me to a broader range of community environments.
   Rate how true this statement is for you.

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Ratings:
Fill in the scores that you assigned to each area above. A lower score in any area suggests that the area could benefit from direct attention and perhaps be given a higher priority for change.

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<th>Area of activity engagement</th>
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Continued Research-Activity Engagement Measure

- Chik, Krasko, Lin & Zaman, 2015

- Initial psychometric testing of the Activity Engagement Measure, an AOI outcome measure, has yielded positive results

- 25 individuals with SMI and 25 individuals from the general population

- Expert agreement related to experience of health through activity

- Measures one factor

- Good internal consistency

- Acceptable test-retest reliability

- Results in preparation for dissemination
Do-Live-Well Framework

- New Canadian tool that was developed by occupational therapists to capture evidence linking a range of activity patterns to health and well-being outcomes.

- Positive health promotion approach designed to empower individuals to recognize changes in activity patterns and health, and to identify ways to restore or revitalize their patterns of activity engagement.

- AOI contributed to theoretical formulation of this framework, one of seven OT sources used in the development.
Figure 1 – Do Live Well Framework (English)

German Study

- Andreas Pheiffer, OT working in an in-patient/out-patient setting in Dusseldorf
- 22 participants with mental illness
- 10 treatment and 7 control completed the study
- Initial T-test results showed highly positive results for the treatment group
- Results currently undergoing analysis with planned dissemination over the next year
- German translation of AOI available this year
Israeli Study

- Dr. Lena Lipskaya-Velikovsky, OT

- Pilot study with 10 subjects in a pre-post test design showed positive results

- 12 week RCT of a short-term intervention in an in-patient mental health setting

- Participants have serious mental illness

- 2 sites, 33 participants and 30 participants (evenly divided between treatment and control)

- Analysis of results currently underway with dissemination planned within the next year
Chronic Pain Study

- Collaborators Dr. Émilie Lagueux (Sherbrooke), Megan Edgelow (Queen’s), Dr. Yannick Tousignant-Laflamme (Sherbrooke)
- Planned mixed methods study, 12 week pre-post intervention with control group
- Testing a chronic pain version of Action Over Inertia
- Study timeline: Sept 2016-June 2017
- Results dissemination Fall 2017/Winter 2018
Multi-site International Study

- Dr. Shu-Ping Chen, OT (University of Alberta)

- Research proposal for multi-site RCT in Canada (Alberta & Ontario) and Australia (Melbourne area)

- Community mental health setting

- 3 year project with 287 participants with SMI and activity disengagement, with an 8 month treatment period and 6 month follow up

- Awaiting funding decision
Expanding the AOI Content

- Work is ongoing to expand the workbook content for additional populations with collaboration of Queen’s OT students

- Content has been developed for:
  - Dementia
  - Anxiety
  - PTSD
  - Chronic pain
  - At-risk youth

- 3 more topics planned for development in 2016/17

- Proposal in to CAOT to publish as an “add-on” to the original workbook
Questions/Comments

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References


