

## A randomized controlled trial of an adapted Illness Management and Recovery program for people with schizophrenia awaiting discharge from a psychiatric hospital

Lin, Esther Ching-Lan; Chan, Chin Hong; Shao, Wen-Chuan; Lin, Mei-Feng; Shiau, Shujen; Mueser, Kim T.; Huang, Shi-Chi; Wang, Hong-Song

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**Objective:** Most research on the Illness Management and Recovery (IMR) program for people with severe mental illnesses has focused on individuals with stable symptoms living in the community, with less attention to persons being treated in an inpatient setting. We evaluated the feasibility and effects of an IMR program adapted for individuals with schizophrenia who were awaiting discharge into the community.

**Method:** A randomized controlled trial was conducted at 2 hospitals in Taiwan to compare the adapted IMR program with treatment as usual (TAU). Ninety-seven individuals with schizophrenia were randomized to the adapted IMR program or TAU. Four outcome indicators including illness-management knowledge, attitudes toward medication, insight, and symptoms were assessed at baseline, posttreatment, and at a 1-month follow-up following discharge from the hospital.

**Results:** Participants in the adapted IMR group showed significantly greater improvements at posttreatment and 1-month follow-up in illness-management knowledge, attitudes toward medication, insight, and negative symptoms on the Brief Psychiatric Rating Scale (BPRS) than individuals in the TAU group. There were no significant differences between the 2 groups on other subscales of the BPRS.

**Conclusions and Implications for Practice:** This is the first controlled evaluation of a version of the IMR program in an East Asian culture, and the first to evaluate it in an acute care inpatient setting. Our findings support the feasibility and potential benefits of implementing an adapted IMR program, focused on the prevention of relapses and rehospitalizations, during the discharge period of an inpatient treatment stay to prepare individuals to reenter the community.