

The image features a minimalist design with a dark blue rectangular frame. Inside this frame, there is a smaller, horizontally-oriented rectangle with a green border. The word "ABSTRACTS" is centered within the green rectangle. The letters are dark blue and have a slight 3D effect, appearing to float slightly above the green background. The overall composition is clean and modern.

ABSTRACTS

The Effect of Integrated Neurocognitive Therapy on Daily Functioning and Quality of Life for Individuals with Schizophrenia

By Mihikaa Roy



Art by Lyljana Amely Nieto

Introduction

Schizophrenia is a disabling psychiatric disorder characterized by positive (e.g., hallucinations) and negative (e.g., apathy) symptoms accompanied by impairments in processing thoughts, perceptions, emotions, and social interactions (Correll & Schooler, 2020; NIMH, n.d.). Schizophrenia is associated with difficulty in functioning, which contributes to the economic burden of the illness (Kadakia et al., 2022). Impairment in functioning may also

contribute to health-related dissatisfaction, leading to poor quality of life (QoL) that deteriorates as the disease progresses. Integrated Neurocognitive Therapy (INT) is a novel psychosocial group treatment that uses cognitive remediation to improve symptoms and functioning in persons with schizophrenia (PWS) (Roder & Müller, 2015). Few studies have been conducted on the impact of INT on functioning and QoL outcomes. The present study aims to investigate whether INT can impr-

ove daily functioning and QoL outcomes in PWS.

Methods

Persons with schizophrenia were recruited from the Schizophrenia Outpatient Clinic at St. Joseph's Healthcare Hamilton West 5th Campus. 30 Integrated Neuro-cognitive Therapy sessions were conducted which began with a group discussion on a cognitive domain followed by exercises to strengthen cognitive skills. Exercises included computer-based skill building using CogPack®, paper and pencil activities, scenarios, and role-plays. Functional outcomes and poor quality of life were assessed pre- and post-INT using the World Health Organization Disability Assessment Schedule 2.0 (WHODAS 2.0) and the Quality-of-Life Enjoyment and Satisfaction Questionnaire (Q-LES-Q-18), respectively.

Results

The pre- and post-intervention assessments of 11 participants were explored using descriptive statistics and paired t-tests. No significant differences were found in the anticipated WHODAS 2.0 domains of cognition, getting along, and par-

ticipation and the Q-LES-Q-18 domains of subjective feelings and social relationships.

Discussion

This study did not find INT to improve QoL and functional outcomes in PWS, although previous studies have shown improvements in functional outcomes (Mueller et al., 2015; Roder et al., 2011). Potential contributors to these findings include the small sample size, high variability, difference in functioning measures used, and nontreatment factors. Future studies can explore other domains of functioning, QoL, or use an ANOVA model to integrate follow-up scores.

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