(Ref: RG2022/2023_A_07)Efficacy of mountain craft training at enhancing the resilience and physical and psychological well-being of children from low-income families: A pilot randomised controlled trial

INTRODUCTION

BACKGROUND

- Evidence shows that children from low-income families may have lower self-esteem and quality of life and exhibited more depressive symptoms than children from more affluent families.^{1, 2}
- Previous studies showed that by increasing children's resilience in the face of adversity, their psychological well-being and quality of life can be. ³⁻⁵
- Mountain craft training may be a strategy to achieve this, but its efficacy requires rigorous empirical scrutiny.

AIMS

To determine the feasibility, acceptability and preliminary efficacy of mountain craft training at enhancing resilience and selfesteem, reducing depressive symptoms and improving physical health of children from low-income families.





PARTICIPANTS

- 40 children in the Kwai Tsing District were recruited.
- Inclusion criteria: (i) Form 1 students, (ii) able to speak Cantonese and read Chinese
- and (iii) from low-income families. • Children with identified cognitive or
- learning problems, chronic illness or physical disabilities were excluded.

- ✓ Participants were invited to join the mountain craft training programme consisted of a 3-hour lecture. ✓ 6-day hiking training programme on
- weekends (at least 5 km and 4 hr each time)
- > The control group mimics the time and attention received by participants in the intervention group. Participants were asked to join six day-
- time leisure activities on weekends within a 3-month period organized by the Asbury Methodist Social Service, etc.).
- Free access to leisure activities (e.g.)
- cartoon film shows, handicraft workshops, including visits to museum or theme park.

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METHODOLOGY

STUDY DESIGN

• A pilot randomized controlled trial, two-group pre- and post-test within-subject design, was conducted.

INTERVENTION GROUP

PLACEBO CONTROL GROUP

MEASURES

- Resilience Scale-14 (RS-14)⁶ Chinese version of the Center for Epidemiologic Studies Depression Scale for Children (CES-DC)⁷
- Chinese version of the Rosenberg's Self-Esteem Scale (RSES)⁸
- A miniWright Standard Handheld peak flow meter ⁹⁻¹⁰

DATA ANALYSIS

- Resilience, self-esteem, depressive symptoms and were assessed at baseline, 3 months and 6 months after starting the intervention Peak expiratory flow rates were assessed at
- baseline and 6 months after starting the intervention
- The demographic and baseline characteristics of the participants between two groups were evaluated with chi-squared tests for categorical variables and independent sample t-tests for continuous variables.
- A mixed between-within-subject analysis of variance (ANOVA) was performed to determine whether the mountain craft training was effective in outcome variables.
- Post hoc comparisons using independent sample REFERENCES t-tests were conducted to assess the effect of the 1. Shek, D. T. L. (2003). A longitudinal study of parenting and adolescent adjustment in Chinese adolescents mountain craft training program on the outcomes with economic disadvantage. International Journal of Adolescent Medicine Health, 15(1), 39-49. 2. Shek, D. T. L., & Lee, T. Y. (2007). Family life quality and emotional quality of life in Chinese adolescents at 3 and 6 months. with and without economic disadvantage. Social Indicators Research, 80(2), 393-410 3. Hou WK, Law CC, Yin J, Fu YT. Resource loss, resource gain, and psychological resilience and
- dysfunction following cancer diagnosis: a growth mixture modeling approach. Health Psychol. 2010; • A process evaluation was conducted to 10 children 29(5):484. 4. Hjemdal O, Aune T, Reinfjell T, Stiles TC, Friborg O. Resilience as a predictor of depressive symptoms: a and parents randomly selected from the correlational study with young adolescent. Clin Child Psychol Psychiatr. 2007;12(1):91-104 5. Ye ZJ, Guan HJ, Wu LH, et al. Resilience and psychosocial function among mainland Chinese parents of intervention group. children with cancer: a crosssectional survey. Cancer Nurs. 2015;38(6):466-474. 6. Wagnild GM. The Resilience Scale user's guide for the US English version of the Resilience Scale and the 14-Item Resilience Scale (RS-14). Montana: The Resilience Center Google Scholar, 2009.



RESULTS

- 17 boys and 22 girls were included in the study. The mean age was 12.23 ± 0.77 years.
- The recruitment rate, response rate and retention rate were 91.49%, 93.02% and 94.74%, respectively, demonstrating the feasibility of implementing mountain craft training for children from lowincome families.
- Process evaluation further supported the feasibility, acceptability, and appropriateness of the intervention.
- At 3- and 6-month follow-up, the intervention group had higher levels of resilience, self-esteem, and peak expiratory flow rate than the control group, and had fewer depressive symptoms, although the differences were not statistically significant.
- The study found small to moderate effects on participants' outcomes, and these effects sustained at least six months after starting the intervention.

This study demonstrated the feasibility, acceptability, appropriateness, and potential efficacy of implementing mountain craft training to enhance resilience and selfesteem, reduce depressive symptoms and improve physical health in children from lowincome families.

The study findings support the need for a fully powered randomized controlled trial of mountain craft training to provide a rigorous empirical evaluation of its efficacy in this population.

		Baseline, M (SD)			At 3-month, M (SD)			At 6-month, M (SD)		
		Intervention (n = 19)	Control (n = 20)	Р	Intervention (n = 19)	Control (n = 20)	Р	Intervention (n = 19)	Control (n = 20)	Р
f	Resilience	59.63 (6.67)	58.55 (2.85)	0.15	63.21 (8.88)	57.40 (9.9)	0.15	63.53 (7.31)	58.80 (9.17)	0.08
	Self-esteem	16.95 (4.31)	16.35 (2.6)	0.14	17.84 (2.97)	16.45 (2.82)	0.14	19.05 (3.61)	27.80 (2.2)	0.11
	Depressive symptoms	26.26 (10.36)	26.25 (9.45)	0.27	23.21 (5.46)	25.75 (8.37)	0.27	21.63 (5.11)	25.45 (11.03)	0.18
	Peak expiratory flow rate	294.74 (56.60)	296.50 (49.45)	0.92				392.47 (48.81)	298.50 (39.24)	0.33

ACKNOWLEDGMENTS

This study was supported by NICHE research grant.

CONCLUSION

IMPLICATION

7. Li HCW, Chung OKJ, Ho K Y. Center for epidemiologic studies depression scale for children: psychometric testing of the Chinese version. J Adv Nurs, 2010, 66(11): 2582-

8. Li H C W, Chan S L P, Chung O K J, et al. Relationships among mental health, selfesteem and physical health in Chinese adolescents: An exploratory study. J Health Psychol; 2010, 15(1): 96-106.

9. Jones KP, Mullee MA. Measuring peak expiratory flow in general practice: comparison of mini Wright peak flow meter and turbine spirometer. BMJ. 1990; 300(6740):1629-1631. 10. Koyama H, Nishimura K, Ikeda A, Tsukino M, Izumi T. Comparison of four types of portable peak flow meters (Mini-Wright, Assess, Pulmo-graph and Wright Pocket meters). Respire Med. 1998: 92(3):505-51

