

- 一、 Swanson 關懷照顧理念有五大要素：理解(knowing)、在旁陪伴(being with)、為他做某些事(doing for)、使他能夠(enabling)與維持信念(maintaining belief)。
1. 請描述一個您照護個案的護理過程，包含個案描述、護理評估、健康問題、護理目標、護理措施（15分），並陳述您照護的成效（5分）。
 2. 請運用關懷照顧理念的五大要素，論述您在過程中所提供的關懷照護（10分）。
- 二、 2026年初，《人工生殖法》修法，引發代理孕母議題的激烈爭論。假設台灣已合法開放代理孕母，而在臨床情境中，您負責照顧一位妊娠34週的代理孕母，她出現嚴重的子癩前症（preeclampsia）感到焦慮，並向您透露：「護理師，我真的後悔了…我覺得身體快撐不住，想要現在就剖腹，甚至是把小孩拿掉。可是那對夫妻一直逼我再撐兩個禮拜，說這樣對小孩比較好，還威脅我說如果不聽話，就要拿合約告我違約。」
1. 依據醫學倫理四原則（自主 autonomy, 行善 beneficence, 不傷害 non-maleficence, 正義 justice），您認為在此衝突中，醫療團隊的首要考量應為何？（10分）
 2. 作為護理師，您將如何在其間進行溝通與倡議？（10分）
- 三、 請閱讀下列一篇英文研究報告摘要（列印於第2頁）
- Arakawa, Y., Inoue, K., Haseda, M., Nishioka, D., Kino, S., Nishi, D., Hashimoto, H., & Kondo, N. (2025). Long-term effects of mHealth consultation services on postpartum depressive symptoms and the mediating role of loneliness: A follow-up study of a randomized controlled trial. *Psychological Medicine*, 55, e379.
<https://doi.org/10.1017/S0033291725102596>
1. 依下列標題順序，用中文敘述每一段標題及內容意涵。
 - (1) Background (5分)
 - (2) Methods (10分)
 - (3) Results (10分)
 - (4) Conclusions (5分)
 2. 請用中文評析此篇摘要的優缺點（10分）。
 3. 請用中文提出此研究結果對臨床照護之應用性（10分）。

見背面

**Long-term effects of mHealth consultation services on postpartum depressive symptoms and the mediating role of loneliness:
A follow-up study of a randomized controlled trial**

Abstract

Background: Although the short-term preventive effects of mHealth consultation intervention on postpartum depressive symptoms have been demonstrated, the long-term effects and role of alleviating loneliness on depressive symptoms remain unclear.

Methods: This follow-up study extended our previous trial, which ended at three months postpartum, by continuing observation to 12 months. Participants in the original trial were randomized to the mHealth group (n = 365) or the usual care group (n = 369). Women in the mHealth group had access to free, unlimited mHealth consultation services with healthcare professionals from enrollment through four months postpartum. The primary outcome of this study was the risk of elevated postpartum depressive symptoms at 12 months post-delivery (Edinburgh Postnatal Depression Scale score of ≥ 9). The mediation effect of alleviating loneliness on the primary outcome was also evaluated, using the UCLA loneliness scale at three months postpartum.

Results: A total of 515 women completed the follow-up questionnaires (mHealth group, 253/365; usual care group, 262/369; 70.2% of the original participants). Compared to the usual care group, the mHealth group had a lower risk of elevated postpartum depressive symptoms at 12 months post-delivery (36/253 [14.2%] vs. 55/262 [21.0%], risk ratio: 0.68 [95% confidence interval: 0.46-0.99]). Mediation analysis showed that reducing loneliness at three months post-delivery mediated approximately 20% of the total effect of the intervention on depressive symptoms 12 months post-delivery.

Conclusions: mHealth consultation services provided during the early perinatal period may help alleviate depressive symptoms at 12 months postpartum.