



The Occupational Therapy Process in Psychosocial Disorders: An Overview

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Citation: Sarsak HI (2018) The Occupational Therapy Process in Psychosocial Disorders: An Overview. Jr Neurology, Psy and Brain Res: JNPBR-113.

Received Date: October 23, 2018; **Accepted Date:** October 30, 2018; **Published Date:** November 8, 2018

Abstract

This article provides an overview of the process undertaken by occupational therapy practitioners (OT) when providing services for clients with psychosocial disorders. The occupational therapy process is the client-centered delivery of occupational therapy services. The process includes evaluation and intervention to achieve targeted outcomes. The stages of the process and the dynamic interactions among the different aspects of the process are emphasized. The occupational therapy process is a dynamic and evolving process with the targeted outcome of enhancing client's independence, safety, and quality of functional performance and improving engagement in meaningful and purposeful occupations. Understanding of its aspects and the dynamic interaction among them help occupational therapists develop clinical decision making reasoning skills and make occupational therapy services more effective.

1. **Keywords:** Psychosocial Disorders; Occupational Therapy; Occupational Therapy Practice Framework: Process
2. **Introduction**

Occupational therapy (OT) is a holistic and client-centered health profession concerned with promoting health and well-being through occupation. The primary goal of OT is to enable people to participate in the activities of everyday life. Occupational therapists achieve this goal by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement[1]. Psychiatric disorders are associated with a variety of pathological signs and symptoms and neuro-physical complications, such as delusions, hallucinations, disorganized speech, restricted emotions, a volition, anhedonia, attention impairment, etc.(American Psychiatric Association, 2013)[2]. OT has been used along with other medical treatments in treating patients with psychosocial disorders and proven to be useful and effective in managing symptoms and enhancing and/or maintaining functional performance[3].

When working with a client with a psychosocial problem, occupational therapists apply a variety of evidence-based assessments and interventions[4]. Once a thorough assessment has been conducted and adequate information has

been obtained, the therapist creates a personalized occupational profile. This profile is used for goal-setting, treatment planning, and implementation of treatment[5]. This process is called the occupational therapy process. The occupational therapy process is the client-centered delivery of occupational therapy services. The process includes evaluation and intervention to achieve targeted outcomes (AOTA, 2014)[6].

The purpose of this study was to provide a summary of the occupational therapy process as it is applied within the profession's domain based on the most recent version of the occupational therapy practice framework (OTPF) of 2014. This review identifies the stages of the process and illustrates the dynamic interactions among the different aspects of the process.

3. Methods

A research has been made in the following databases: Ovid, PsychINFO, MEDLINE, Global Health, CINAHL, and PubMed. Keywords and Search items used to search articles for our study were occupational therapy, psychosocial disorders, and occupational therapy practice framework: process. The most relevant evidence-based research documents related to the occupational therapy process and psychosocial disorders were identified and thoroughly reviewed. A summary of the occupational therapy process in psychosocial disorders was generated.

4. Results

Our review provided an overview of the occupational therapy process in psychosocial disorders. The OTPF describes the occupational therapy process as being linear. In reality, the process does not occur in a sequenced, step-by-step fashion. Rather, it is fluid and dynamic, allowing occupational therapy practitioners and clients to maintain their focus on the targeted outcomes while continually modifying the overall plan to accommodate new developments and needs as they may arise throughout the process (AOTA, 2014)[6]. (**Table 1**) summarizes the stages/aspects of occupational therapy process and (**Figure 1**) illustrates the dynamic interaction among them.

Table 1: Stages/Aspects of Occupational Therapy Process.

Stage / aspect	Brief description
Referral	Physician to OT
Screening	Determine further evaluation Collect information from medical file, brief interview
Evaluation	Determine patient needs, obstacles Create occupational profile (history and goals) Create analysis of occupational performance (limitations /strength in performance) Information collected from patient and other sources Administer structured assessment Synthesize, analyze, and document evaluation
Intervention planning	Create a plan based on evaluation results <ul style="list-style-type: none"> • Determine specific targeting outcomes, methods, and approaches • Long and short-term goals • Timeframes are determined • Specific Activities selected

Intervention implementation	Apply plan Documentation
Intervention review (reevaluation)	Continuously or at regular periods reevaluate plan, progress, changes Modify plan if needed
Transition planning	Work with client and family, recommendations, transition to school work, employment, continuing treatment, and referral.
Discontinuation of services	Discharge from program Achievement is discussed Conclude treatment outcomes and shortcomings Plan follow up(if needed)

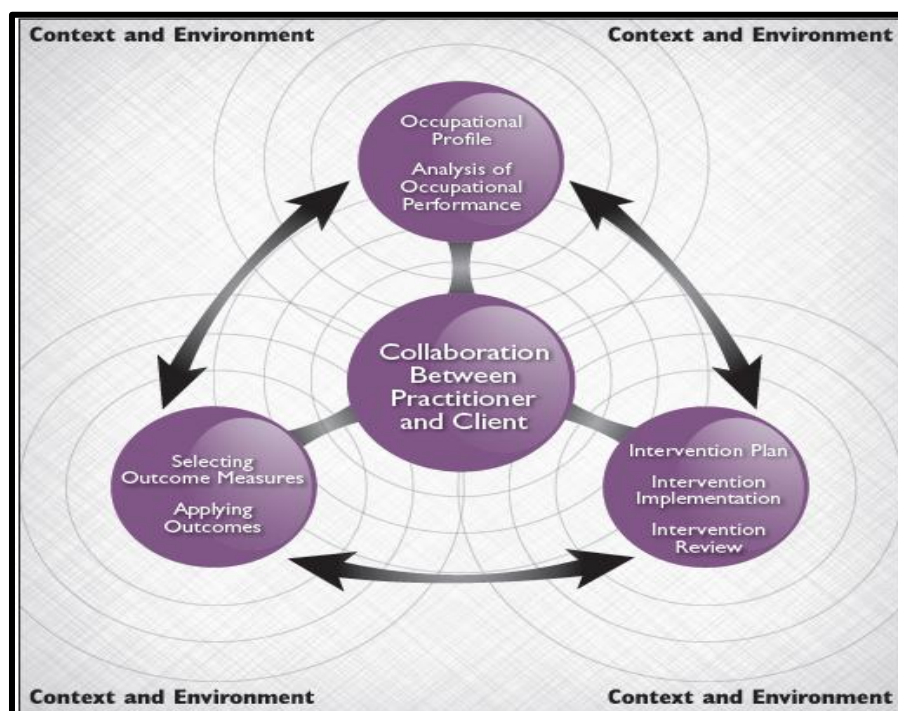


Figure 1: Dynamic Interactions among Aspects of the Occupational Therapy Process.

(Adapted from Occupational Therapy Practice Framework, 3rd edition, AOTA, 2014)

5. Discussion

Many professions use a similar process of evaluating, intervening and targeting intervention outcomes. However, only occupational therapy practitioners use therapeutically selected occupations and activities as primary methods of both assessment and intervention throughout the process when dealing with clients with psychosocial disorders. Occupations are those purposeful and meaningful functional activities of daily living (ADLs). They include ADL

(i.e., bathing, showering, dressing, feeding and personal care), instrumental ADL (IADL) (i.e., meal preparation, shopping, care of others, and communication and financial management), rest and sleep, education, work, play, leisure, and social participation. These occupations are considered an important aspect of the occupational therapy domain. Other aspects of the occupational therapy domain including client factors (i.e., values, beliefs, body functions, and body structures), performance skills (i.e., motor skills, process skills, and social interaction skills), performance patterns (i.e., habits, routines, and roles), and context and environment (i.e., personal, cultural, physical, and social environments), are of equal value, and together they interact to affect the client's occupational identity, health, well-being, and participation in life. Occupational therapists are skilled in evaluating all aspects of the domain, their interrelationships, and the client within his or her contexts and environments. Process and domain are central concepts that ground occupational therapy practice (**Figure 2**).

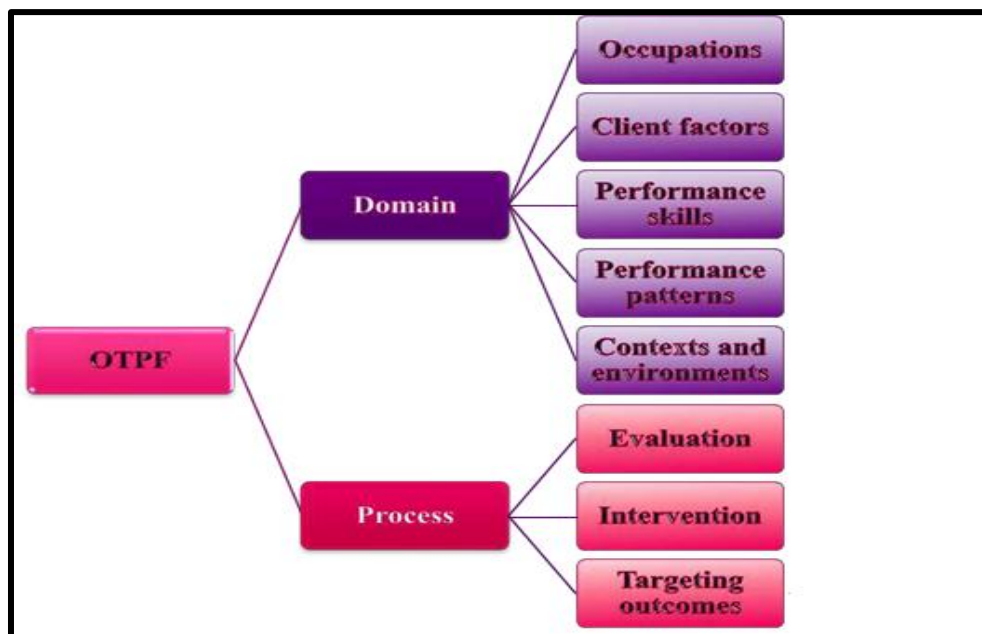


Figure 2: the Occupational Therapy Practice Framework (OTPF): Domain and Process.

The OTPF describes the link and the relationship between them. The aspects that constitute the domain and those that constitute the process exist in constant interaction with one another during the delivery of occupational therapy services (AOTA, 2014) [6]. An understanding of this relationship supports and guides the complex decision making required in the daily practice of occupational therapy. The occupational therapists knowledge and practice embrace a client-centered, holistic, and dynamic perspective of the person, the occupation, and the environment. This integrated practice approach makes occupational therapy's contribution to rehabilitation, recovery and health so effective (WFOT, 2016)[7].

6. Conclusion

The occupational therapy process is a way in which occupational therapy practitioners operationalize their expertise to provide services to clients with psychosocial disorders. The occupational therapy process includes evaluation, intervention, and targeted outcomes, occurs within the purview of the occupational therapy domain; and involves collaboration among the occupational therapist, occupational therapy assistant, and client. It is a dynamic and continuous process with the targeted outcome of enhancing client's independence, safety, and quality of functional performance and improving engagement in meaningful and purposeful occupations. An understanding of its aspects and the dynamic interaction among them help occupational therapists develop clinical decision making reasoning skills and make occupational therapy services more effective and beneficial for clients with psychosocial disorders.

7. Funding Details: No funding was required

8. Acknowledgements:None.

9. Conflict of Interests:Author declares that there is no conflict of interest

10. References

1. Stein F, Cutler S (2002) Psychosocial occupational therapy : a holistic approach. Albany, NY, USA: Delmar/Thomson Learning.
2. American Psychiatric Association (2013) Diagnostic and statistical manual of mental disorders : DSM-V. Washington, DC, American Psychiatric Association, USA.
3. Brown C, Stoffel VC (Eds.) (2011) Occupational Therapy in Mental Health: A vision for Participation (1st ed.). Philadelphia, PA, USA: F.A. Davis Company.
4. Hemphill-Pearson B (2008) Assessments in Occupational therapy Mental Health (2nded.). Thorofare, NJ: Slack Incorporated.
5. Cara E, MacRae A (2005) Psychosocial Occupational Therapy: A clinical practice (2nd ed.). NY, USA: DELMAR Cengage Learning.
6. AOTA (2014) Occupational Therapy Practice Framework: Domain and process. 3rd edition. The American Journal of Occupational Therapy 68, (S1), S1-S48.
7. World Federation of Occupational Therapists (WFOT). (2016). Minimum Standards for the Education of Occupational Therapists. Retrieved from.

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