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If Veterans don't help Veterans, who will?

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REHABILITATION AND PROSTHETIC SERVICES

OCCUPATIONAL THERAPY FACT SHEET: MENTAL HEALTH

The Department of Veterans Affairs (VA) provides occupational therapy services to Veterans and Servicemembers for prevention and treatment of mental health issues. Occupational Therapy (OT) brings rehabilitation and habilitation perspective to mental health services to foster an emphasis on recovery and function directed toward participation in daily life occupations. As a part of an interdisciplinary team, OTs focus on maximizing Veterans' engagement and meaningful participation in desired life roles. OT evaluation and treatment support Veterans' engagement in everyday life activities that affect health, well-being, and quality of life by addressing physical, cognitive, psychosocial, sensory, and other areas that could affect performance (1).

HISTORICAL ROOTS IN MENTAL **HEALTH**

The unique military ties for OT date back to World War I when OTs, known as reconstructive aides, began treating soldiers with physical and mental health needs. OT arose within moral treatment and mental hygiene movements at the beginning of the 20th century, officially becoming a profession in 1917.

The underlying philosophy of occupational therapy has evolved from being a diversion from illness to goal directed treatment.

SCOPE OF PRACTICE

Occupations are defined as activities that people engage in throughout their daily lives to fulfill their time and give life meaning (2). OTs understand and utilize occupations to help Veterans with mental health concerns develop and maintain healthy ways of living in their home, workplace, and community.

OTs are educated to select and use evaluations and interventions that not only promote mental health but also address physical, sensory, interpersonal, and cognitive function affecting Veterans' abilities to participate in daily life while considering their interests, values, habits, and roles.

An integral component of psychosocial rehabilitation is skill acquisition, achievable through the use of meaningful occupations.

OTs are skilled in analyzing, adapting, and modifying tasks or environments to support goal attainment and optimal engagement in daily occupations.

AREAS ADDRESSED BY OT

There is a vast array of areas that OTs address:

> Community Living and Reintegration (e.g., using community resources, time management, grocery shopping)

- Avocations (e.g., leisure planning, volunteering)
- Cognition (e.g., problem solving, sequencing, memory)
- Activities of Daily Living (e.g., self-care, hygiene)
- Instrumental Activities of Daily Living (e.g., medication routines, money management, cooking, cleaning, driving)
- Role development (e.g., parenting, student, employee)
- Promotion of wellness and healthy lifestyle
- Coping/Stress Management (e.g., relaxation, self-regulation)
- Social Skills/Assertiveness
- Pain management



For more information, http://www.patientcare.va.gov/RehabilitationServices.asp



- Complementary and/or Alternative approaches to treatment
- Sensory based strategies
- General physical and mental health
- Designing and executing individual and group intervention approaches used in mental health, including but not limited to: Cognitive Behavioral Therapy, Psychoeducation, Dialectical behavioral Therapy, Recovery Models, Motivational Interviewing⁽³⁾.

OT SERVICES

VA OTs serve Veterans of all ages, with both physical and mental disabilities, using a holistic and client-centered approach to therapy. OTs provide services in inpatient, residential, outpatient and community based clinics, including substance abuse programs, psychosocial rehabilitation centers, domiciliary care, homeless programs, vocational programs, and trauma programs.

OTs are experts at analyzing performance skills and patterns needed for engagement in daily occupations. The understanding and use of occupations to facilitate engagement and independence is at the core of OT practice,

education, and research (4). The practice of OT includes:

- Restoration of a skill or ability that has not yet developed or is impaired.
- Modification of an activity or environment to enhance performance and independence and prevent loss of function.
- Facilitating development of habits and routines to foster a sense of purpose and support a wellness lifestyle (i.e., exploring volunteerism, leisure occupations).
- Improving community and social participation through skills training, real life practice and connection with community- based supports.
- Teaching and supporting coping strategies (i.e. relaxation techniques, exercise).
- Guided practice of communication and social skills training (i.e., assertiveness, conflict resolution).
- Assisting in crisis intervention, suicide risk assessment, and safety plans as indicated.

OT EDUCATION AND TRAINING

OTs have Masters or Clinical

Doctorate degrees. OT assistants have associate level degrees. OT is a dynamic and evolving profession that is responsive to consumer and policy needs, as well as to emerging knowledge and research.

REFERENCES

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- 2. Hinojosa, J. & Kramer, P. (1997). Statement-fundamental concepts of occupational therapy: Occupation, purposeful activity, and function. *American Journal of Occupational Therapy*, 10, 864-866.
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- 4. American Occupational Therapy Association (2002). Occupational therapy practice framework: Domain and process (2nd ed.). *American Journal of Occupational Therapy*, 62, 625-683.



