

Occupational Therapy Clinical Education Program (OTCEP)

Occupational Therapy
Clinical Capability Framework
Key Concept Learning Resource

Understanding the Nature of Occupation

Background:

This learning resource has been designed to be printed and used as a workbook. It is a learning resource within a series which address the key concepts identified in the Occupational Therapy Clinical Capability Framework (OTCCF). This series of learning resources are designed to be used in a variety of ways:

- individually for self-directed purposes based on your own identified learning needs;
- in conjunction with supervision processes or peer learning groups;
- or as a tool to support inservice or training delivery.

Therefore, it is not necessary to complete the workbook in one sitting; you can progress through the learning resource with its associated activities over multiple sessions, within your own or your group's available time.

The OTCCF is an integrated and coordinated framework for clinical education and training for occupational therapy in Queensland Health. It was developed following extensive consultation with occupational therapists across the state from a range of practice domains. It has been designed as a resource to support clinical development for occupational therapists with different levels of experience.

The OTCCF has been constructed with eight overarching clinical capability domains:

- Understanding and promoting the occupational therapy role and identity
- Assessment and screening
- Goal setting and action planning
- Interventions
- Evaluation
- Communication
- Professional practice
- Clinical service development

Within each domain, key concepts have been identified which are core principles fundamental to the clinical practice of occupational therapists. Learning resources have been developed for each key concept to bridge the gap between theory and their application in practice. The capability framework and additional background information can be accessed on QHEPS at: http://paweb.sth.health.gld.gov.au/qhot/documents/otccf-framework.pdf

Contact Details:

If you have any suggestions or feedback on this learning resources please email: <a href="https://orcep.edu.orcep.orcep.edu.or

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Table of Contents:

	າ:	
Learning Ou Articles Rec	utcomes: quired: ctivity Icons:	4 5
Section One	e: What is 'occupation'?	7
Activity 1.1	Story telling	8
Activity 1.2	Read	9
Activity 1.2	Reflect	9
Section Two	o: Occupation and Health	10
Activity 2.1	Discuss	10
Section Thre	ee: Occupation focussed models	12
Activity 3.1	Read	12
Activity 3.2	Case Study	12
Section Fou	ır: Maintaining an occupational focus	14
Activity 4.1	Discuss	15
Section five	: Want to know more? Occupational deprivation	16
Activity 5.1	Read	16
Activity 5.2	Discuss	16
Section six:	Conclusion	18
Further Refl	lections	19
References		20
Evaluation		22

Introduction:

'In the myriad of activities people do everyday, they do occupation all their lives without ever knowing it'

(Dickie, 2009, p15)

Despite many proposed viewpoints in the literature, defining occupational therapy and the use of occupation has its challenges. This key concept learning resource is designed to engage learners with material related to occupation, beginning with an exploration of the nature of occupation. The contribution of occupation to people's health and wellbeing is the topic of section two while section three will consider how occupational focussed models enable occupational therapists to use occupation in their practice. Learners will have the opportunity to consider the factors which may limit or facilitate their ability to practice in a truly occupationally focussed way in section four. It is hoped that this learning resource will stimulate a renewed interest in the concept of occupation and its value within occupational therapy.

Sections:

- 1. What is 'occupation'?
- 2. Occupation and health
- 3. Occupation focussed models
- 4. How do we maintain an 'occupation' focus?
- 5. Want to know more? Occupational deprivation
- 6. Conclusion

Learning Outcomes:

It is anticipated by the completion of this Key Concept learning resource you will be able to:

- 1. Describe the nature of occupation
- 2. Understand the relationship between occupation and health
- 3. Develop examples of how occupation focussed models guide practice
- 4. Adopt strategies to ensure practice is occupation focussed

You may like to review your achievement of these objectives once you have completed all the activities in this Key Concept learning resource.

Articles Required:

You will need to have a copy of the following articles in order to be able to complete the activities in this Key Concept learning resource. Many articles are available electronically via the Clinicians Knowledge Network (CKN): https://www.ckn.org.au/

The links to these articles are provided below. For those articles not available electronically you will need to complete an 'Article Request' form available via the following link and submit to your local library: https://www.health.qld.gov.au/libraries/doc-supply.asp

Section One: What is occupation?

Molineux M. (2010) The nature of occupation. In Curtin M, Molineux, M and Supyk- Mellson J (Eds.) Occupational Therapy and physical dysfunction: enabling occupation. Sydney, Churchill Livingstone.

Available via CKN as an ebook:

http://eds.b.ebscohost.com/eds/detail/detail?vid=1&sid=ac832745-101a-40ce-86fe-aad09a17d1dd%40sessionmgr115&hid=126&bdata=JkF1dGhUeXBIPWIwLGF0aGVucyZzaXRIPWVkcy1saXZI#AN=974362&db=edsebk

Section Two: Occupation and Health

Molineux M. (2010) The nature of occupation. In Curtin M, Molineux, M and Supyk- Mellson J (Eds.) *Occupational Therapy and physical dysfunction: enabling occupation.* Sydney, Churchill Livingstone.

Available via CKN as an ebook:

http://eds.b.ebscohost.com/eds/detail/detail?vid=1&sid=ac832745-101a-40ce-86fe-aad09a17d1dd%40sessionmgr115&hid=126&bdata=JkF1dGhUeXBIPWIwLGF0aGVucyZzaXRIPWVkcy1saXZI#AN=974362&db=edsebk

Section Three: Occupation focussed models

The following article is available via CKN (link provided): Wong, S.R. & Fisher, G. (2015) Comparing and Using Occupation Focused Models, *Occupational Therapy in Health Care*, 29:3, 297-315

http://eds.b.ebscohost.com/eds/detail/detail?vid=5&sid=ac832745-101a-40ce-86fe-aad09a17d1dd%40sessionmgr115&hid=126&bdata=JkF1dGhUeXBIPWIwLGF0aGVucyZzaXRIPWVkcy1saXZI#AN=2015-31314-004&db=psyh

Section Four: Maintaining an occupational focus

The following article is available via CKN (link provided):

Wilding, C., Whiteford, G. (2008). Language, identity and representation: Occupation and occupational therapy in acute settings. *Australian Occupational Therapy Journal*, 55(3), 180-187.

http://eds.b.ebscohost.com/eds/detail/detail?vid=7&sid=ac832745-101a-40ce-86fe-aad09a17d1dd%40sessionmgr115&hid=126&bdata=JkF1dGhUeXBIPWIwLGF0aGVucyZzaXRIPWVkcy1saXZI#AN=33717045&db=pbh

Section Five: Want to know more: Occupational deprivation

The following article is not available electronically, but can be ordered from your local library (see instructions above)

Whiteford, G. (2000) Occupational deprivation: Global challenge in the new millennium. *British Journal of Occupational Therapy*, 63(5), 200-204.

Learning Activity Icons

Throughout this learning resource, activities to be completed are highlighted with an icon. The complete set of learning resources utilise sixty different activities. Those that are being used in this particular learning resource are noted below.

Analyse	Breaking a topic into smaller parts to gain a better understanding of it
Reflect	Use of a journal to track thoughts about any topic. Use this to compare responses and thoughts over time.
Case Study	Write up a case study based on your own background / workplace, including three prompting questions. Be sure to think carefully about what the key information is that someone would need to resolve the issue. Present this case study to a work colleague to complete
Read	Journal articles, links to websites, chapters from a book.
Discuss	Raise a topic with colleagues and record the range of responses received
Storytelling	Draft a description of a topic so that it is able to be explained to a 6 year old. Include illustrations if needed

Section One: What is 'occupation'?

"Occupational therapy is a client-centred health profession concerned with promoting health and well being through **occupation**. The primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome 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**".

(World Federation of Occupational Therapists 2010)

The definition of Occupational Therapy from the World Federation of Occupational Therapists clearly demonstrates the centrality of occupation to the work of occupational therapists. Occupational Therapists need to base their work on a thorough understanding of occupation and its relationship to health (Dickie 2009).

There are many definitions of occupation available. One such definition is from the Canadian Association of Occupational Therapists:

'Occupation refers to 'groups of activities and tasks of everyday life, named, organised and given value and meaning by individuals and a culture. Occupation is everything people do to occupy themselves, including looking after themselves (self-care), enjoying life (leisure), and contributing to the social and economic fabric of their communities (productivity).'

Canadian Association of Occupational Therapists, 1997 page 34)

Defining occupation is challenging despite many definitions being proposed (Dickie 2009). Molineux (2010) advocates for an understanding of the nature of occupation as opposed to a definition. Molineux (2010) identifies five key characteristics or factors, summarised briefly below:

- 1. Active engagement- physical and or mental
- 2. Purpose- of the occupation to the individual
- 3. Meaning- unique to the individual
- 4. Contextual- multiple and impact on the occupation
- 5. Human- a uniquely human characteristic.

In order to enhance and inform their practice, practitioners are able to draw on occupational science (Hocking & Wright-St. Clair 2011). Occupational science is an academic discipline 'concerned with the study of human occupation, in other words, what people do on a day to day basis in the context of their natural environment, community, society and culture' (Riley 2012, page 55). Clarke (2006) believed that the research produced by occupational science should 'nurture, modernise and legitimise occupational therapy practice', (page 172). An overview of the history and development of occupational science demonstrates an ongoing relationship with occupational therapy with occupation as a central concept (Riley 2012).

For further information about the development of occupational therapy and the emergence of the contemporary occupational paradigm, please refer to the Key Concept learning resources: Occupational therapy theory for practice.



Activity 1:1 Storytelling

Describe the term 'occupation' as it relates to occupational therapy in your own words. How would you describe the term to a friend, a family member, a client?

1.	Active engagement
2.	Purpose
3.	Meaning
4.	Contextual
5.	Human



Activity 1:2 Read

Read the chapter 'The nature of occupation' by Molineux (2010) available via CKN as an ebook. This chapter expands on the five characteristics or factors of occupation listed above.



Activity 1.3: Reflect

According to Dickie (2009), reflecting on and examining personal experiences of occupation can assist with a more thorough understanding. With reference to the book chapter by Molineux (2010) which you have just read, reflect on an occupation which you engage in regularly in relation to the five characteristics.

Section Two: Occupation and Health

'While health facilitates participation, the opposite is true: Participation in occupation contributes to good health.'

(Hocking 2009, P46)

Hocking (2009) identifies that occupations contribute to our health and well-being by:

- keeping us alive by enabling us to meet biological needs
- providing physical activity, mental stimulation and social interaction to keep bodies, minds and communities in good health
- enable us to express ourselves, develop skills, experience pleasure and achieve the things we believe to be important.

Molineux (2010) states that at the time when the occupational therapy profession was founded the link between occupation and health was considered to be a good idea. In a climate of evidence based practice, Molineux (2010) emphasised the need to use evidence to support occupational therapy practice to enable its theoretical underpinnings to be clearly understood. To this end, Molineux (2010) presents a summary of selected papers which provide occupational therapists with some references which could be used to support their practice.



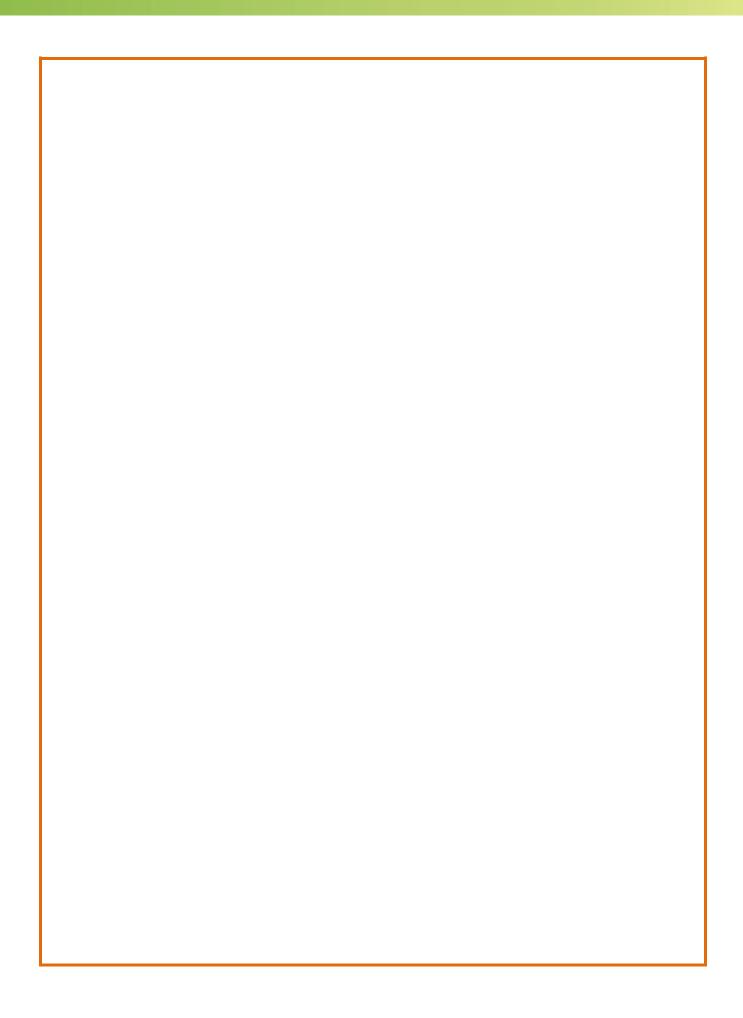
Activity 2.1: Discuss

In the previous activity you read a book chapter by Molineux (2010) titled' The nature of occupation' in which there was a section 'Occupation and Health: just a good idea?' Consider the research summarised in this section in relation to your current client group.

With colleagues or within supervision consider the following:

Do any of the outcomes of the research have congruence with the health and well-being needs of the clients you work with?

Consider locating the original source of any particularly relevant references to further evaluate to what extent they could form a basis for supporting the use of occupation within your area of work.



Section Three: Occupation focused models

'As health care moves towards understanding the importance of function, participation and occupation, occupational therapists would be well served to use occupation- focused theories to guide intervention.'

(Wong and Fisher 2015, page 297)

In order to demonstrate competence, occupational therapists need to be clear about the theories which support their practice. Kielhofner (2009) identified practice models as being used to translate theory into practice. Cole &Tufano (2008) specified the use of occupation-focussed models which 'provide an overarching context of occupation that emphasises the occupational therapists unique perspective' page 61.

Furthermore, discipline specific practice models:

- Make explicit the assumptions of the profession
- Provide a framework for organising knowledge
- Outline a process to use when addressing relevant issues to occupational therapy practice. (Turpin and Iwama 2011).

While many occupation- based occupational therapy models exist, Wong and Fisher (2015) have described, reviewed and compared three and proposed ways to integrate knowledge for practical implementation.



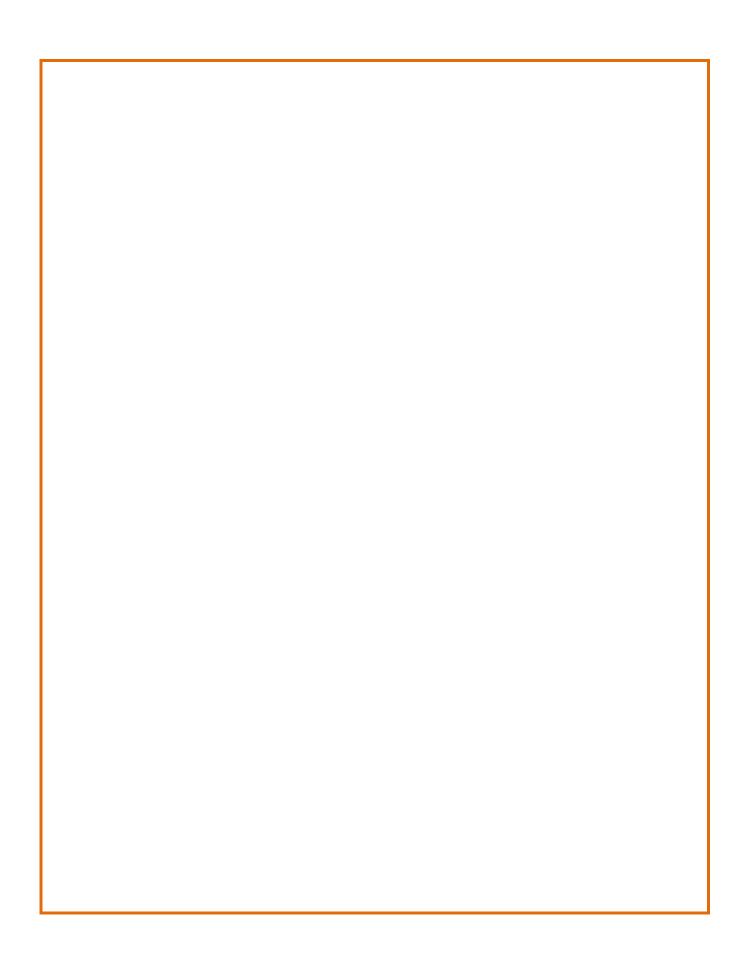
Activity 3:2 Read

Read the article by Wong and Fisher (2015). Consider the three occupation- focussed models presented.



Activity 3.2: Case study

Choose one of the occupation focussed models described in the article by Wong and Fisher (2015). Prepare a case study using your chosen model to organise your knowledge and address relevant occupational therapy issues. Consider sharing this with colleagues, peers or in supervision to gain feedback and further your learning.



Section Four: How do we maintain an 'occupation' focus?

'Working in ways that are not focused on occupation or grounded in an occupational perspective is not satisfying for individual occupational therapists, is not productive for the profession as a whole, but more importantly is not useful or meaningful to clients'

Molineux, 2004, page7

For the duration of the occupational therapy profession occupation has been the primary tenant of occupational therapy as well as the goal of interventions (Fisher 2014). Fisher (2014) identifies an acceptance of the value of occupation but a difficulty in the way in which the the value of occupation is demonstrated in practice. Wong and Fisher (2015) recognise the need to use occupation focussed theories to guide practice and yet challenges in routinely applying theory, for example through the use of occupation focussed models.

Molineux (2004) outlines two ways to ensure a focus on occupation is maintained which are summarised below:

1. 'Remember where you come from':

We should be proud of our occupational focus and the unique contribution this brings to the healthcare environment. One way we can demonstrate this is by ensuring that when we describe our role to others, we do not shy away from explaining our role in occupational terms

- a. Valuing our unique occupational perspective. Being clear about what occupation means and how central it is to occupational therapy practice.
- b. Understanding our occupational therapy theory and models and utilizing them in practice.
- c. Listening to our clients and their families. Many clients would like to improve their occupational performance or range of occupations they engage in.

2. 'Start where you mean to finish':

- a. Recognize that occupational therapists view health differently from other professional groups. Focus on the occupational implications of disease or illness opposed to the disease itself ensures a focus on the client's occupational performance difficulties and ways we can work with our clients to support these.
- b. Ensure our assessments are occupation focused this will maintain focus on key occupational issues.



Activity 4.1: Discuss

Discuss the following with a supervisor, a colleague or with a peer group

- 1. How can I maintain an occupation focus in my current role as an occupational therapist?
- 2. What are the challenges in doing this?
- 3. How can I minimise the impact of these challenges?

The article by Wilding and Whiteford (2009) and the book listed in the 'Articles Required' section of this learning resource may assist you with this task.

Section Five: Want to know more?

This section has been designed for those occupational therapists who would like to delve a little bit deeper into this topic. It contains additional learning material and activities to challenge your learning further. Enjoy!

Occupational Deprivation

The following is a definition of occupational deprivation:

'A state of preclusion from engagement in occupations of necessity and/or meaning due to factors that stand outside the immediate control of the individual"

Whiteford (2000, page 201)

Whiteford's (2000) article provides a useful summary of occupational deprivation in the context of people living around the globe in situations which limit their opportunity to engage in occupations which have social, cultural and personal relevance. Townsend and Wilcock (2004) present a discussion about the relationship between occupation, justice and client centred practice, describing examples of occupational injustices such as occupational alienation, occupational deprivation, occupational marginalisation and occupational imbalance. Occupational deprivation may also be evident in the experiences of the people who occupational therapists support in hospitals and the community where the effects of their disability, illness or experience has had an effect on the occupations they need to or would like to engage in.



Activity 5.1: Read

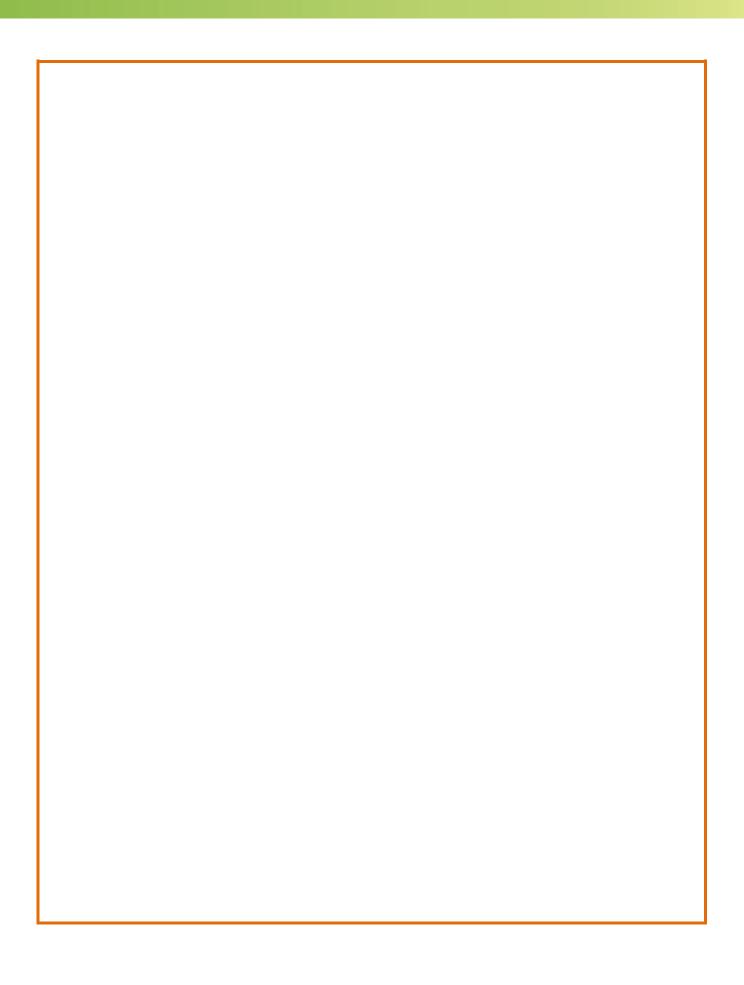
Read Whiteford's (2000) article, in particular the sections which describe occupational deprivation, occupational disruption and occupational dysfunction.



Activity 5.2 Discuss

With a peer or peers think of examples of individuals or groups of people who you consider have or may in future experience occupational deprivation, occupational disruption or occupational dysfunction. Your examples may come from your own clinical practice or from knowledge or experience of groups in the community or around the world.

Whiteford (2000) presents the importance of an occupational perspective in equipping occupational therapists to consider the needs of individuals. How could an occupational perspective assist when considering the needs of the individuals or groups you have identified above?



Section Six: Conclusion

This key concept has explored the nature of occupation, its central importance to occupational therapy practice and its links with health. Occupational theory and models have been presented as a way of ensuring practice is occupationally focussed as well as solutions for challenges which may be experienced within clinical settings. The contemporary paradigm has renewed an interest in the core foundations of occupational therapy, that is, the belief in the centrality of occupation and its importance to the people we work with.

Further Reflections:		

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Wilding, C., Whiteford, G. (2008). Language, identity and representation: Occupation and occupational therapy in acute settings. *Australian Occupational Therapy Journal*, 55(3), 180-187.

Wong, S.R. & Fisher, G. (2015) Comparing and Using Occupation Focused Models, *Occupational Therapy in Health Care*, 29:3, 297-315

Evaluation of the 'Understanding the Nature of Occupation' Key Concept learning resource

Please complete this section, remove it, scan it & send to: OTCEP@health.qld.gov.au

Rate your achievement of the objectives of this self-directed learning package below:

0	1	2	3	Achieved 4
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Understand the re	elationship be	tween occupa	ation and healt	th
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Thank-you for taking the time to complete this evaluation!