Fact Sheet

Occupational Therapy's Role in Community Mental Health

The origins of occupational therapy are rooted in mental health, as the creation of the profession dovetailed with the early 20th century's mental hygiene movement. With the call for deinstitutionalization of individuals with mental illness, which culminated in the 1963 Community Mental Health Act, occupational therapists and occupational therapy assistants began working in community mental health (Scheinholtz, 2010). Today, occupational therapy practitioners provide services in community settings including, but not limited to:

• Community mental health centers

ACTA The American Occupational Therapy Association, Inc.

- Assertiveness community treatment (ACT) teams
- Psychosocial clubhouses
- Homeless and women's shelters
- Correctional facilities
- Senior centers



- Consumer-operated programs
- After-school programs
- Homes
- Worksites (Brown & Stoffel, 2011)

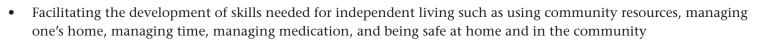
As services for individuals with mental illness have shifted from the hospital to the community, there has also been a shift in the philosophy of service delivery. In the past, there was an adherence to the medical model; now the focus is on incorporating the recovery model. This model acknowledges that recovery is a long-term process, with the ultimate goal being full participation in community activities. These activities may include obtaining and maintaining employment, going to school, and living independently. The philosophical base of the recovery model is a good fit with occupational therapy because the purpose of occupational therapy in community mental health is to increase an individual's ability to live as independently as possible in the community while engaging in meaningful and productive life roles. Because occupational therapy facilitates participation and is client-centered, it plays an important role in the success of those recovering in the community (American Occupational Therapy Association [AOTA], 2010; Scheinholtz, 2010).

Both occupational therapists and occupational therapy assistants are educated to provide services that support mental and physical health and wellness, rehabilitation, habilitation, and recovery-oriented approaches. Such education includes at least one clinical fieldwork experience in a setting focused on psychosocial issues (AOTA, 2010).

There is evidence that occupational therapy interventions improve outcomes for those living in the community with serious mental illness (AOTA, 2012). Such interventions can be found in the areas of education, work, skills training, health and wellness, and cognitive remediation and adaptation. Examples of occupational therapy interventions in community mental health include:

- Evaluating and adapting the environment at home, work, school, and other environments to promote an individual's optimal functioning
- Providing educational programs, experiential learning, and treatment groups or classes to address assertiveness, selfawareness, interpersonal and social skills, stress management, and role development (e.g., parenting)
- Working with clients to develop leisure or avocational interests and pursuits

Living Life To Its Fullest



- Providing training in activities of daily living (e.g., hygiene and grooming)
- Consulting with employers regarding appropriate accommodations as required by the Americans with Disabilities Act
- Conducting functional evaluations and ongoing monitoring for successful job placement
- Providing guidance and consultation to persons in all employment settings, including supportive employment
- Providing evaluation and treatment for sensory processing deficits

The American Occupational Therapy Association, Inc.

Individuals of all ages who are diagnosed with a mental illness can benefit from occupational therapy. Furthermore, friends and family members can also benefit from these services to learn ways to deal with the stress of caregiving and how to balance their daily responsibilities to allow them to continue to lead productive and meaningful lives.

Addressing Barriers to Mental Health in the Community

Occupational therapy practitioners address barriers to optimal functioning through interventions that focus on enhancing existing skills, creating opportunities, promoting wellness, remediating or restoring skills, modifying or adapting the environment or activity, and preventing relapse. The following is a list of typical community barriers and occupational therapy interventions.

- *Stigma:* Occupational therapy addresses self-efficacy by providing opportunities for mastery and promoting advocacy in civic arenas as well as individual interpersonal relationships.
- *Safety:* Occupational therapy interventions include self-care, accessing services and supports, and preventing victimization through healthy and meaningful daily activity.
- *Low socioeconomic status:* Occupational therapy interventions address educational, prevocational, and vocational performance. Occupational therapy practitioners collaborate with clients, educators, employers, and other agencies to help the person achieve success in the working world.
- *Lack of long-term housing:* Occupational therapy practitioners can analyze performance skills and needs for living in the community (e.g., identifying the benefits of supported housing and developing routines and habits to maintain one's living space effectively) (Brown & Stoffel, 2011).

Mental illness is the leading cause of disability in the world (Scheinholtz, 2010). It can significantly impact an individual's ability to engage in daily life activities that are meaningful and lead to productive daily routines. Occupational therapy is a profession vital to helping individuals with mental illness develop the skills needed to live life to its fullest.

References

American Occupational Therapy Association. (2010). Specialized knowledge and skills in mental health promotion, prevention, and intervention in occupational therapy practice. American Journal of Occupational Therapy, 64(Suppl.), S30–S43. doi:10.5014/ajot.2010.64S30

American Occupational Therapy Association. (2012). Occupational therapy practice guidelines for adults with serious mental illness. Bethesda, MD: AOTA Press.

Brown, C., & Stoffel, V. (2011). Occupational therapy in mental health: A vision for participation. Philadelphia: F. A. Davis.

Scheinholtz, M. (2010). Occupational therapy in mental health: Considerations for advanced practice. Bethesda, MD: AOTA Press.

By Roxanne Castaneda, OTR/L; Linda M. Olson, PhD, OTR/L; and Laurel Cargill Radley, MS, OTR, for the American Occupational Therapy Association. Copyright © 2013 by the American Occupational Therapy Association. This material may be copied and distributed for personal or educational uses without written consent. For all other uses, contact copyright@aota.org.

Living Life To Its Fullest

Occupational therapy enables people of all ages to live life to its fullest by helping them to promote health, make lifestyle or environmental changes, and prevent—or live better with—injury, illness, or disability. By looking at the whole picture—a client's psychological, physical, emotional, and social make up—occupational therapy assists people to achieve their goals, function at the highest possible level, maintain or rebuild their independence, and participate in the everyday activities of life.





