



OCCUPATIONAL THERAPY FACT SHEET: MENTAL HEALTH

The Department of Veterans Affairs (VA) provides occupational therapy services to Veterans and service members for prevention and intervention of mental health problems. Occupational Therapy (OT) brings a habilitation and rehabilitation perspective to mental health services in keeping with increased emphasis on recovery and function directed toward participation in daily life occupations. These may include roles and situations in institutions, outpatient programs, home, school, workplace, community, and other settings. The goals of OT are twofold: (1) to promote mental health and well-being, and (2) to restore, maintain, and improve function and quality of life. OT evaluation and treatment supports 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, to enablement through meaningful occupation.

SCOPE OF PRACTICE

Occupations are defined as activities that people engage in throughout their daily lives to fulfill their time and give life meaning ⁽³⁾. 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, or modifying tasks or environments to support goal attainment and optimal engagement in daily occupations.

What areas does OT Address?

There is a vast array of areas that OTs often address:

- Social Skills/Assertiveness
- Cognition (e.g., problem

solving, sequencing, memory)

- Community Living and Reintegration (e.g., using community resources, time management, grocery shopping)
- Avocations (e.g., leisure planning, volunteering)
- Coping/Stress Management (e.g., relaxation, self-regulation)
- Activities of Daily Living (e.g., self-care, hygiene)
- Instrumental Activities of Daily Living (IADLs) (e.g., medication routines, money management, cooking, cleaning, driving)
- Role development (e.g., parenting, student, employee)
- Sleep hygiene





- Pain management
- Complimentary and/or Alternative approaches to treatment
- Sensory based strategies
- General physical and mental health
- Wellness lifestyle
- Psycho-education and other group and one to one treatments (e.g., Cognitive Behavioral Therapy, Illness Management and recovery, Dialectical Behavioral Therapy, Seeking Safety, Desensitization, Motivational Interviewing, trauma informed care)

OCCUPATIONAL THERAPY 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, 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 ⁽²⁾. 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.
- Assisting in developing 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).
- Communication and social skills training (i.e., assertiveness, conflict resolution).
- Crisis intervention, suicide risk assessment, and safety plans as indicated.

OT EDUCATION AND TRAINING

OTs are now entry-level master's positions, with some clinical doctorate programs in the nation. OT assistants (COTAs) are 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. American Occupational Therapy Association. (2002). Occupational therapy practice framework: Domain and process (2nd ed.). *American Journal of Occupational Therapy*, 62, 625-683.
3. Hinojosa, J. & Kramer, P. (1997). Statement-fundamental concepts of occupational therapy: Occupation, purposeful activity, and function. *American Journal of Occupational Therapy*, 10, 864-866.

