

THERAPEUTIC MEASURES USED IN OCCUPATIONAL THERAPY IN A PSYCHIATRIC SETTING

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Occupational Therapy is the treatment of physical and psychiatric conditions whilst taking the person as a whole (Gestalt) and considering his physical, psychological/emotional and social needs. It may be achieved through specifically selected activities in order to help people reach their maximum level of function and independence in all aspects of daily life.

In a psychiatric setting, the three major therapeutic measures used by an Occupational Therapist are:

1. Individual programmes
2. Group Therapy
3. Activities

1. INDIVIDUAL PROGRAMMES

On assessment of a patient, the individual's goals are set up and the programme formulated. This may consist of work on a one-to-one basis such as behaviour therapy programmes, desensitization programmes, self-care skills and counselling. The patient may also be involved in group therapy and certain purposeful activities.

2. GROUP THERAPY

"No man is an island". - John Rock

Group therapy is found extremely beneficial because the members can interact with each other, be aware of the other and can become a unit by the building up of bonds between group members whilst remaining individuals and identifying themselves with the other.

Social Skills Training

Social Skills is based on the idea that skills are learned and therefore can be taught to those who lack them. They are ways of enabling individuals to deal more effectively with social situations by expanding their awareness of what goes on in social interaction. Amongst these we find social skills like conversation, listening, assertion and expression and basic problems such as use of a telephone or a bus, time and money.

Support/Counselling Groups

Usually such groups are of a closed nature where the members remain the same ones throughout sessions. This is because a certain unity may be built up between members. Here practical advice may be given to clients, opportunity to express feelings and to discuss life situations with the group, alternative ways of handling a situation may be suggested or a change in attitude may be required. It may also be a case of listening and being of moral support to the clients.

Creative Therapy

Creative Therapy is based on the belief that the individual can change and grow, and that potential can be developed. An almost universal characteristic of people suffering from mental illness is their lack of faith in themselves, with the consequent impairment of their relations with others around them. It is in this fundamental area of communication that the creative therapies have so much to offer. They are in themselves an emotional, non-verbal/verbal means of self-expression through different creative media. They can be used specifically with an individual depending on his specific needs either on an individual basis or a group setting. Here qualified technical staff are employed in an Occupational Therapy Department.

ART

The object is not to produce beautiful pictures or to develop artists. The aim is to allow awareness and expression of feelings eg. anger, love, rejection and self.

It can range from simple activity (finger painting, splashing and blow painting) to the most complex (use of water colours or oil techniques, etc.). Therapy may be structured with a specific theme in mind or free i.e. left to one's imagination. Focus of attention is on the process, not the end result.

CLAY

Clay has a great therapeutic value as one can handle and produce something from such a material with one's own hands. From the starting process to the finishing process it gives a full sense of satisfaction because one shapes a permanent object. Working of clay can vary from simple (e.g. pinch pottery) to the most complex (kick wheel) and is quick and very expressive. It leaves an immediate imprint thus expressing one's own personality.

MUSIC

Music is inherent in almost everyone. It is a means of communication and integration which does not necessarily require technical skill. Music in therapy is a tool, a means by which we may communicate with a patient at his own level (Alvin, 1962). It aims to bring the individual into contact with a world of perceptual and emotional reality; to encourage a more successful adjustment to his environment, to promote his self-knowledge and develop his awareness. It reduces the sense of isolation which hospitalisation can bring with it.

DRAMA

Here one can re-enact real life behaviour inducing a sense of resolution and relief. It provides a safe, secure environment for exploring relationships, conflicts and roles, for working through feelings and taking risks. Thus, positive and negative attitudes, strengths and weaknesses can be looked at and the whole person and his/her potential can be seen.

It may be divided into 3 main areas:

a) Remedial Drama

This makes use of verbal and non-verbal skills as well as improvisations to increase self-awareness of others and expression of ideas. Exercises chosen express reality and make the patient aware of his body position, physical attitude, facial expressions and gestures as well as voice. Techniques used include "mirroring" involving following and imitating movements of a partner and awareness and concentration. "Mime" involving different postures and facial expressions. Improvising scenes and stories to allow the individual to use his imagination within a group and feel the need to communicate ideas and feelings to others.

b) Sociodrama

This consists of scenarios and role-playing exercises to stimulate social situations. It can be described as a creative problem-solving process. The aim is to examine a group or a social problem by dramatic methods. Used often in Social Skills Training groups,

c) Psychodrama

This can only be carried out by someone specifically experienced to do so. It involves exploring the conflicts in one's own life and acting out the problematic situation. It differentiates from sociodrama because whilst one revolves around a social situation, psychodrama revolves around the self. Hence the client becomes the protagonist.

CREATIVE WRITING

Communication is achieved through the written form whether poetry or prose. Edith Schaeffer in her book "Hidden Art" says "writing is certainly a medium for communication for verbalising thoughts and attitudes, for speaking truth and putting content into expression. The written form can be read and re-read, thought about and read again, but one need not think that writing has to be a career for it to be worthwhile.

Rehabilitation Groups

These groups can be divided into domestic or self-care groups. Domestic groups will involve cookery and household duties done especially with clients having lost such skills or forgotten them and who will need them on returning to the community. It may include a mother with a family to look after on returning home or a man living alone.

Self-care groups can discuss factors in their own personal hygiene or clothes and also carry out grooming session.

Physical Fitness & Relaxation Groups

In physical fitness groups excess energy can be channelled into positive, purposeful activities. It improves overall fitness and mobility whilst providing a sense of well-being. It may include warm-ups, movements to music, circuits or cycling. Overexertion should be avoided. It can be used with a wide variety of patients from those with decreased movements and poor posture or those with aggressive tendencies to drug addicts as a means of removing energy blocks. It should end with relaxation techniques and breathing exercises.

Specialised Groups

These groups can take the form of dependency groups consisting of drug or alcohol abusers. These are homogenous groups because it is made up of members with similar problems and therefore similar goals. The variety of sessions that can be carried out with such clients can vary from physical exercises, creative therapy, support and discussion groups. Discussion groups are important to discuss and learn alternative wave of dealing with difficulties. They can take the form of encounter groups where confrontations occur and clients should learn to tolerate and accept criticism from others.

Other groups can be carried out with mentally subnormal adults and children.

3. ACTIVITIES

The variety of activities the Occupational Therapist can use is almost limitless. It may vary from task-orientated to recreational activities.

Activities can be individual or group organised where staff is limited. A group approach will also facilitate fun and unself-consciousness. However, for those who cannot tolerate group sessions an individual activity is required. In many of these activities, the expertise of qualified technical staff is required such as ceramists, woodworkers and craft instructors.

Industrial

Industrial work may be undertaken by patients as a progressive form of treatment or in order to maintain a maximum level of ability and health. The value of work in rehabilitation lies in the concept that work is a normal activity which can at its best be associated with status, reward, satisfaction and acceptability. Through working the patient feels his role as a worker. Work is usually obtained on contract from outside industry. It is very often routine work carried out by the more chronic patients and tasks are related to financial reward.

Woodwork

It is a popular activity among male patients contributing to a great deal of satisfaction. The benefits one finds are increasing self-confidence and lessening anxiety whilst carrying out a project and a sense of achievement at being able to produce something in spite of the illness. Woodwork can be analysed from the simply holding of wood while sewing, or sanding to the more complicated tasks like working on lathes, with different patients being given responsibilities according to their abilities.

Crafts

When crafts are used specifically to increase abilities to make decisions, to handle tools, to concentrate or to share responsibility with others they are a very useful media for treatment. If used without evaluation it becomes diversional and it is important to distinguish between this and a treatment programme where crafts are designed and carried out to develop specific abilities.

Printing

Printing can have great therapeutic advantages although it is an activity which is not suitable for everyone. It can be graded and broken down from simple preparation to the actual printing job. It requires co-ordination, concentration and the ability to carry out commands.

Gardening and Husbandry

Growing plants and looking after animals are activities with unique properties. Activities can range through caring for greenhouses to domestic gardening and to care of animals such as a budgie to poultry. Since the relationships with animals are different from those with people, they give the patient a sense of being in control and having someone dependant on them for his needs.

Socioleisure

These are methods for socioalising and vary from social outings such as cultural visits, visits to the beach, seasonal activities such as Christmas parties or summer barbeques, as well as quizzes, games and sports.

SUMMARY

Occupational Therapy started as a means of occupying and diverging the patient. However, as can be seen it has now diversified and today is a part of the programme of rehabilitation. OT is an established, recognised paramedical profession.

This was just a brief glimpse of OT in a psychiatric setting and it varies in different set-ups mainly physical, psychiatric and geriatric.

References

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