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<p>Occupational Therapy New Zealand Whakaora Ngangahau Aotearoa (OTNZ-WNA)</p> <p><b>Occupational Therapists working in Mental Health and Addictions Position Statement</b></p>	 <p><b>OTNZ - WNA</b> Occupational Therapy New Zealand Whakaora Ngangahau Aotearoa</p>
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Occupational Therapy New Zealand Whakaora Ngangahau Aotearoa supports a best practice, evidence informed, recovery focused approach to mental health and addictions practice and believes that the people of Aotearoa/New Zealand have a right to access quality mental health and addictions care and services.

The core professional knowledge and skill of nga kaiwhakaora ngangahau/occupational therapists is in using occupation to improve, maintain, and restore health and wellbeing.

OTNZ-WNA position advocates that the role of nga kaiwhakaora ngangahau/occupational therapists in mental health care includes:

- Promotion and restoration of the positive health and wellbeing of an individual (or a group of individuals), through inclusion and the use of purposeful occupation as both the process and outcome of intervention;
- Working in partnership, with an individual and their family/whanau, and the interdisciplinary team, to develop intervention/recovery plans which are realistic and meaningful; and
- Evaluation of the effectiveness and outcomes of programmes and interventions from an occupational perspective.

## Background

### Purpose:

This position statement has been developed to inform key stakeholders (consumers,

employers, other health professionals, health funders, planners, and policy makers) of the role of whakaora ngangahau/occupational therapy in mental health care, including key tasks, areas of practice, and expectations of whakaora ngangahau/occupational therapy within the mental health sector.

**Definition:**

This position statement adopts the definition of ‘occupation’ as “...everything people do to occupy themselves, including looking after themselves, enjoying life, and contributing to the social and economic fabric of their communities.” (Townsend & Polatajko, 2007, p. 369).

This definition includes consideration of participation in cultural activities which support participation, social connectedness and spirituality.

Furthermore, this position statement recognises that ‘recovery’ is living well in the presence or absence of...mental illness, while also recognising that recovery can occur without professional input; in the presence of people who believe and support; does not consider causes of mental illness; can occur even if symptoms reoccur; changes the frequency and duration of symptoms; may not be a linear process; and does not mean that someone was ‘not really ill’ (Anthony, 1993).

**Development:**

This position statement was developed in consultation with nga kaiwhakaora ngangahau/occupational therapists working in the mental health and addictions sector throughout New Zealand. National and international literature was reviewed during this process.

**Context:**

This position statement sits alongside a number of key strategic publications, including Te Tahuhu- Improving Mental Health 2005-2015 and Te Kokiri-The Mental Health and Addiction Plan 2006-2015 (Ministry of Health) and Te Hononga 2015: Connecting for Greater Wellbeing (Mental Health Commission).

It is also intended that this position statement will be read in conjunction with the Occupational Therapy Board of New Zealand Scope of Practice for Occupational Therapists (2004), the Health Practitioners Competence Assurance Act (2003), Occupational Therapy Board Competencies for Registration (2000), Occupational Therapy Process Standards (2007), Recovery Competencies for Mental Health Workers (Mental Health Commission, 2001) and Let’s Get Real (Te Pou, 2010).

## Philosophy

Nga kaiwhakaora ngangahau/occupational therapists working in mental health and addictions practice utilise an occupation based approach to work with service users and their families/whanau, organisations and communities, to enable participation in occupation and promote recovery as the refabrication of everyday life (Sutton, 2008). Evidence suggests that participation in meaningful occupation is a key determinant of health and wellbeing (Law, 2002), and that participation in occupation can support service user recovery and build resilience through:

- Motivating service users through improved sense of purpose, belonging, organisation of time, and improved recognition of the impact of the environment and access to the local community (Mee & Sumsion, 2001);
- Improving service users sense of competence with regard to acquiring new skills, coping with challenges, and experiencing achievement in process and outcomes (Mee, Sumsion & Craik, 2004); and
- Enabling a sense of self identity through engagement in occupation, increased feelings and experience of productivity and value and improved sense of meaning, purpose (Mee, Sumsion & Craik, 2004).

Nga kaiwhakaora ngangahau/occupational therapists working with service users, and their family/whānau, can also use an occupational framework to explore and explain service user needs and experiences; to encourage service user's motivation and organisation; to improve service user's sense of competence and self-identity; and as a medium to support social inclusion, citizenship and community participation.

## Areas of Practice

Nga kaiwhakaora ngangahau/occupational therapists in New Zealand mental health services may be employed in a variety of settings. These include inpatient units (acute, rehabilitation and forensic), community mental health teams, day programmes/facilities, non-government organisations (community settings, residential services or day programmes), needs assessment services, crisis services, kaupapa Māori mental health teams, private practice, and primary health organisations / integrated family health centres (where prevention and health promotion may be the focus of practice).

Some practice areas may require nga kaiwhakaora ngangahau/occupational therapists to gain additional competencies outside, or aligned with the whakaora ngangahau/occupational therapy scope of practice (such as, working as a duly authorised officer (DAO) within an emergency team). OTNZ-WNA acknowledges the

value of nga kaiwhakaora ngangahau/occupational therapists working in a diverse range of areas and roles, and encourages therapists to ensure their practice is guided by the philosophy and principles underpinning safe and ethical whakaora ngangahau/occupational therapy practice.

The practice of whakaora ngangahau/occupational therapy in mental health and addictions often includes case management/care coordination/key working activities (such as mental health assessment, collaboration and recovery planning; consultation and liaison; and legislative requirements), but should always be based on service user needs and goals, relevant theory, and evidence.

## Key Tasks

Nga kaiwhakaora ngangahau/occupational therapists working in mental health and addictions utilise occupation and participation as both the means and ends of whakaora ngangahau/occupational therapy intervention, and the primary modality to support restoration of health and wellbeing. Exemplars of the key tasks of nga kaiwhakaora ngangahau/occupational therapists working in mental health include, working in collaboration with a service user to:

- Assess mental state and risk, and manage these as required by the team/service, including appropriate support of a diagnostic process
- Assess and analyse the impact of participation, or reduced participation, in occupation (from personal, occupational, and environmental perspectives), using culturally appropriate standardised and/ or observation based assessment tools;
- Determine intervention outcomes, and an intervention plan, based on assessment findings;
- Modify and grade interventions (and the intervention plan) to recognise individual needs, learning styles and preferences;
- Support service users to authentically participate in their communities;
- Identify and utilise appropriate resources to meet service users occupational needs in the context of physical, social, emotional, cultural and spiritual environments;
- Coordinate resources to maintain/enhance participation in occupation (and/ or relationships which facilitate this participation);
- Evaluate intervention outcomes, including service user satisfaction, and modify interventions to better enhance recovery and build resilience;
- Contribute an occupational perspective to the team/service, in the context of recovery focused care; and

- Determine readiness to engage in occupations such as work, self-care and leisure.

Therapeutic activities/interventions utilised by nga kaiwhakaora ngangahau/occupational therapists may include (but are not limited to):

- Case management/care coordination/key working tasks
- Individual whakaora ngangahau/occupational therapy interventions, such as opportunities to trial participation in occupation in a range of environments; direct support with access to occupation; and sensory modulation
- Group work
- Psycho educational activities (such as stress, anxiety, and anger management, and relaxation techniques)
- Community living skills
- Life transitions and community reintegration (such as direct support of service users who are moving from supported health environments to community based settings)
- Talking therapies (for example, see <http://www.tepou.co.nz/improving-services/talking-therapies>)

All of the therapeutic activities/interventions described above are situated in an occupation based practice context which utilises occupation to enable service user's to gain skills, confidence and resources to engage in daily living and the communities of people who are identified as important to the service user.

## Education

To ensure nga kaiwhakaora ngangahau/occupational therapists have a sound education for working in mental health and addictions, OTNZ-WNA recommends that therapists have access to:

- Professional development and post-graduate learning opportunities that enhance, develop and promote whakaora ngangahau/occupational therapy in mental health and addictions care.
- Professional development and post-graduate learning opportunities that enhance collaborative and interprofessional practice in mental health and addictions care.

## Research and evidence-based practice

To ensure nga kaiwhakaora ngangahau/occupational therapists have access to a robust evidence base to inform and support their work in mental health and addictions care, OTNZ-WNA recommends:

- Increased resources to facilitate stakeholder research that will advance best practice in whakaora ngangahau/occupational therapy and mental health and addictions care;
- Increased resources to promote profession-specific and interprofessional research that expands the knowledge base for interprofessional practice in mental health and addictions care;
- Improved opportunities for nga kaiwhakaora ngangahau/occupational therapists to share innovative practice and research in relation to whakaora ngangahau/occupational therapy, mental health and addictions care and interprofessional practice;
- That the practice of whakaora ngangahau/occupational therapy is informed by current research and evidence which recognises the value and importance of occupation in mental health and addictions care and recovery.

*Position statements are statements on political, ethical, social, cultural and practice issues that influence client well-being, the role and practice of whakaora ngangahau/occupational therapy or that affect Occupational Therapy New Zealand Whakaora Ngangahau Aotearoa / Whakaora Ngangahau Aotearoa (Inc). Position statements are developed in consultation with occupational therapists/nga kaiwhakaora ngangahau working in New Zealand, and reflect their current thinking. They are frequently time limited and persons wishing to use them more than two years after publication should confirm their current status with the executive director of OTNZ-WNA.*

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