

## **POSITION STATEMENT**

### **CLIENT-CENTREDNESS IN OCCUPATIONAL THERAPY**

#### **Introductory statement of the purpose of this paper**

Occupational therapy is a profession concerned with promoting health and well being through occupation. Occupation refers to the things that people do in their everyday lives. The primary goal of occupational therapy is people's participation in occupation. Occupational therapists believe that people's participation can be supported or restricted by their personal abilities, by the specific demands / characteristics of occupation and by the physical, social, attitudinal and legislative environments. Therefore, occupational therapy practice is focused on enabling individuals to change aspects of their person, occupation or environment.

A humanist philosophy provides a foundation for occupational therapy practice. This means occupational therapists are person-centred in their relationships with all their clients. Occupational therapy clients include individuals, families, groups, communities, organisations and populations.

Basic assumptions guiding occupational therapy practice are based upon an occupational perspective of humans and health. These assumptions include (adapted from Polatajko et al, 2007<sup>1</sup>, Wilcock, 2006<sup>2</sup>):

- Humans have an innate need and capacity to engage in occupation
- Occupation affects health and well-being
- Occupation organises time and brings structure to living
- Occupations are rich with individual and contextual meaning
- Engagement in occupations is unique and contextual
- Occupation has therapeutic potential

#### **Statement of the position being taken**

Occupational therapy is client-centered and occupation-focused.

The aim of occupational therapy is to enable clients to participate in the occupations they want to do personally, as well as the things they need or are expected to do socially and culturally.

In occupational therapy the occupational therapist respects and partners with clients, values peoples' subjective experiences of their participation and appreciates peoples' knowledge, hopes, dreams and autonomy.

#### **References:**

<sup>1</sup> Polatajko, H., Davis, J., Stewart, D., Cantin, N., Amoroso, B., Purdie, L. & Zimmerman, D. (2007). Specifying the domain of concern. In E. Townsend & H. Polatajko (Eds), *Enabling Occupation II: Advancing an Occupational Therapy vision for Health, Well-being & Justice Through Occupation* (pp. 13-36). Ottawa: Canadian Association of Occupational Therapists.

<sup>2</sup> Wilcock, A. (2006). *An Occupational Perspective of Health*. (2<sup>nd</sup> ed.) Thorofare: Slack.