Occupational Profile and Analysis Paper: Mental Health

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Occupational Profile

Who is the client (person, including relevant family, caregivers, significant others; population; organization)?

Client is a 52 year Caucasian female. She does not have a college education, but she completed high school. Client attends an intensive outpatient program because of a substance abuse problem. Client had a mental breakdown July of 2012, turned to alcohol, was admitted into a psychiatric hospital, and her husband took their 14 year old daughter. She lost her job July of last year and has had multiple mental breakdowns in the past. She is still able to visit her husband's place to see her children and spend time with them.

Part of the program requirement is to attend a mental health group therapy for substance abuse recovery at Southern Nevada Adult Mental Health services. Part of the program provides the client with housing and mental health services. The client is in the process of a divorce and has been divorced three times previously. Client has many family members she sees on the weekends. Client has a 15 year old daughter, a 20 year old daughter, an 8 year old son, a 22 year old son, and several step sons and daughters. Several of her family members live in different States, including Arizona and New Mexico and the rest of her children live in the Las Vegas area. Her father was a marine and her family lived in a travel trailer while she grew up in New York. Her parents were abusive growing up and she no longer talks to them. She is high functioning and can do many of her daily activities on her own. Although she does have some help from the case manager and service coordinator at the facility she manages most activities on her own. Staff is always supervising her including her case manager who makes sure she attends her scheduled appointments throughout the day. As per the program, Client is escorted nearly everywhere for supervision.

Why is the client seeking services, and what are the client's current concerns relative to engaging in occupations and in daily life activities?

Client is diagnosed with having PTSD, depression and a substance abuse problem. Client is seeking services at Nevada Adult Mental Health services because she is recovering from a substance abuse issue with alcohol. Client had a mental breakdown yesterday and isn't ready to end the program. Client will be done with all outpatient services for mental health services in a week. She is not ready to leave. She explains she needs support and help as single parent when it comes to taking care of her daughter. Client recently found a new job and will start working as a front desk clerk at a consignment shop.

Client's main concern is not being able to make enough money to support herself and her daughter. She has concerns about having a sense of false pride in juggling a job and taking care of her daughter. She indicates her depression will affect her performance on the job and will interfere when she starts her new job. Her legal record of neglecting children is preventing her from obtaining a job like she had before, a sous chief, and is concerned about never obtaining a job that pays well. Some other concerns related to engaging in work are her lower back pain due to her past back injuries.

Housing is another concern and she only has three days left to find housing. When she leaves this program she won't be able to qualify for housing because of her part time job nor does she qualify for counseling, she feels stressed and incapable of handling a job and being a caretaker for her daughter.

Another concern is client is afraid of interpersonal conflict, not knowing how to assert herself and not being able to set boundaries. She is afraid of having another mental breakdown because her boss might do something that could trigger her PTSD and cause her to have another mental breakdown. She has some pain in her hand and complains of tingling, loss of strength and motor movement in her hand. Her husband was verbally abusive towards her; she is working on coping issues and has selfesteem issues because of the history of abuse. The last concern client has is during everyday activities client has trouble with opening jars or anything that has a cap. Client has concerns about housing, performing her new job, eventually finding a job to cover all expenses for her and her daughter and conflict resolution.

What areas of occupation are successful and what areas are causing problems or risks?

Currently, as client attends Intensive Outpatient Services (IOP), client is on a strict schedule. Areas of successful occupations for client are cooking her own meals with the food the facility provides, completing her mandatory chores such as laundry or cleaning, performing her own personal hygiene and attending all mandatory meetings successfully too. She attends Narcotics Anonymous and Alcoholics Anonymous. When she has free time on weekends she is able to spend time with her kids on the computer, see her husband, and watch TV.

Within some of these activities listed above the poor fine motor ability in her hand causes her to not be able to open bottles or pour water into a cup. Her hands keep shaking and she has a hard time and takes her a little longer to perform activities that require internal rotation and external rotation. She is thinking about going to doctor to see what the complication is causing these symptoms.

Client struggles being self-confident and becomes depressed throughout her days. She struggles with constantly feeling that she is not good enough and feeling incapable. This impacts her leisure and social occupations, and has impacted her work occupations in the past. She is easily discouraged and can't seem to focus on getting past the barriers like finding housing or thinking about appropriate solutions. She is also has trouble with child rearing and not getting discouraged in this area.

What contexts and environments support or inhibit participation and engagement in desired occupations?

The outpatient facility supports activities of daily living by providing the opportunity to perform tasks such as laundry, cooking, making their beds, and doing assigned chores to provide a sense of accomplishment. The client is not able to incorporate occupations like child rearing because her

daughter does not stay at the facility. Community mobility is limited because Client only has access to the transportation provided by the facility where she is housed. Client is reliant on others to drive or provide transportation, so this occupation is limited. Grocery shopping is inhibited because staff does the grocery shopping for clients. Health management and maintenance are limited by a lack of exercise programs, but they do provide mental health services. Client doesn't have a lot of time to do many IADL's. On the weekends the client is given a pass to go where she likes if she has earned the privilege. The outpatient services should provide more opportunity for social and leisure activities outside of counseling sessions or group therapy. The environment provided for the client is highly structured, which inhibits the client's time to see family on certain days. Sexual activity is not allowed. Adaptive equipment is not provided by the facility, but they provide personal device care. Most ADL's are supported. Some IADL's are inhibited or restricted like child rearing, community mobility, some health management and maintenance, and shopping for groceries.

What is the client's occupational history (life experiences, values, interests, previous patterns of engagement in occupations, and the meanings associated with them)?

Client worked as a chef for most of her life. She would work during the day full time and at one point she had her own daycare she ran on the side to make ends meet. She would spend the rest of her time taking care of her children. She has always been independent in self-care activities. Client had not been abusing alcohol until a few years ago.

Some of her past leisure activities include: hanging out with family while going camping, jet skiing, playing pool or just going to the Colorado River. The Colorado River gave her a break away from life to relax; she enjoyed making sure that her company was happy. She found floating in water was a way to de-stress. Leisure time incorporated friends and family and provided a great social support.

She does not believe lying or stealing are ok. Client's values include being honest with others, and being honest with herself. She attends church when she can. She believes in committing to her family

and taking care of her children. Client feels strongly about being honest and believing family is important is due to her religious values. She has always been a Christian and believes in God.

What are the client's priorities and desired outcomes?

Client's priorities are to find housing, to try to juggle her job, to have enough time to take care of her daughter, and to try to work on interpersonal conflict by setting boundaries. Client wants to be able to eventually have the skills to obtain a better job or move up in her job that pays more. Client wants to be able to be more confident in addressing interpersonal conflict by communicating effectively when she is stressed or is feeling depressed. Client wants to find affordable housing and be able to have enough money to pay her bills. Client want have enough time to spend with her daughter and be a good parent. Client wants to be able to engage in social activities in general and not have a mental break down.

Occupational Analysis

What deficits exist in each of the body function categories (mental, sensory & pain, neuromuscular-skeletal and movement-related, cardiovascular and respiratory)?

A mental deficit exists because client has a hard time preventing a mental breakdown. It is difficult for client to judge what is reasonable at times. Client's thought life is disrupted at times due to her diagnosis, PTSD. Sometimes, client isn't able to have an appropriate awareness of reality. She has trouble being emotionally stable and often lacks motivation. Her perception of herself is negative; she struggles with self-esteem and feelings of being incapable of making small adjustments in her life. Functions of joints and bones are good except her hands; she experiences numbness and tingling in her hands. Client has great muscle endurance, motor reflexes, muscle tone, motor reflexes, and involuntary movement reactions, cardiovascular system function, hematological, immunological system function, respiratory system function, voice functions, fluency, rhythm, alternative vocalization, digestive, metabolic, endocrine system functions, genitourinary and reproductive functions, had good skin related-

structure functions. The areas listed don't have any deficits because she was able to breath, speak, and walk long distances without feeling fatigued. I observed client have within normal limits of all these areas that don't have deficits when we were doing a leisure activity. Mental health was more of the focus at this facility, but from what I could tell she had no issues with areas listed as strengths. She had some issues with her nervous system because of the tingling and numbness in her hands (American Occupational Therapy Association, 2008).

Discuss the activity demands of this task (object needs, space demands, social demands, sequence & timing, required actions or skills).

The tools, materials, and equipment needed for this activity are a Jenga a tower game with 54 wooden building blocks, a table with a flat smooth surface, chairs to sit in during the activity, and a questionnaire with 54 questions, each corresponding to a Jenga block. The activity I observed this client participate in was a leisure activity. Each member in the therapy group is provided with a questionnaire sheet. The space demands needed for this activity are a large open space, indoor setting is preferred; it requires good lighting and quiet noise level for concentration when someone is answering a question for the game. There should be a door to allow for privacy among the group and keep confidential information inside the room. The temperature should be at a comfortable level for all participants. The social demands are that each player is expected to remember the rules of the game and know the social expectations of other participants such as appropriately taking turns, listening and understand the other person while they answer their question. The client is to know when to be sensitive toward others when responding or saying appropriate comments during conversations. Another activity demand is sequencing and timing, which is required in order to know whose turn it is or to wait for your turn (American Occupational Therapy Association, 2008).

You must know when to take out a block piece and the sequence of taking it out and setting it on top of the stack.

First, all the participants are on their own team. Each player removes 1 block from the stack of Jenga blocks without knocking the entire Jenga stack over. The player will then read the matching questions and will find the matching question on the provided sheet and answer it out loud. Then the individual replaces the block at the top of the tower and the turn moves to another member of the group. Each group member should take a turn at stacking blocks. Each time someone answers a question, they are given up to 5 minutes to answer, if needed. Providing sufficient time for each participant to pick their chosen block and answer the question is important. Required actions and performance skills include: fine motor skills to grab a 2 inch by 3 inch block; range of motion and dexterity when putting the block back on top; the cognitive decision skills to choose the block that won't tumble the stack; the ability to read and answer questions; the ability to speak loudly and clearly when answering the questions and adjust your voice appropriately. Activity Demands include required body functions; for example, mobility of the all joints to be able to stand, use upper and lower body for sitting tolerance, have balance while standing and grabbing the block. You need to be alert and aware so you don't get in front of someone else around the table or hit them. You need your ears, eyes, upper extremities and lower extremities, organs, so you need all body structures (American Occupational Therapy Association, 2008).

Identify the performance patterns related to the task and your client (habits, routines, roles).

One of the performance patterns that is incorporated into the activity are roles. Within the context of an outpatient rehabilitation program clients can take on the role of being a supportive friend to other members in the group and taking on the role of being encouraging when a friend in the program is answering difficult questions. Clients may take on multiple roles, such as being a friend to others in the group or being community member by being an active participant in the rehabilitation program. A habit or routine could develop, but isn't necessary when performing this activity. For example, a client could develop a habit of how they remove the block or put the block on top of the stack. The client could develop a routine that is efficient in performing this activity.(American Occupational Therapy Association, 2008).

Identify the performance skills, which are required for this task (motor skills, process skills, and communication & interaction skills).

Motor and praxis skills are needed. Planning where to position the body while standing up requires planning where to step and planning on balancing in order to avoid knocking the stack down. Planning on where to place your hand to pick a block may require planning to move around an obstacle, such as another person next to you. Sensory perceptual skills are needed to be able to locate the right block to grab among the other blocks. Emotional regulation skills are also required for this activity: persisting in the activity and not get frustrated if you make a bad choice; making sure not to have an outburst and controlling anger if you are in a frustrating situation during a turn. The client needs to have the skills to calm down if they are feeling upset about the game. It is important to not offend others, so having the cognitive skills to think about the appropriateness of comments during the game is important. It is important to have the cognitive skills to be able to be aware of whose turn it is and provide supportive input to others when they answer their question is important. Using communication and social skills is important during the activity. You need to be able to initiate and answer questions that are relevant to the conversations. You need the capability to engage in conversation with others and respond appropriately (American Occupational Therapy Association, 2008).

Identify the body functions and body structures primarily influenced by this task.

The specific body functions that are needed are specific mental functions including higher cognitive skills like judgment, concept formation, and cognitive flexibility because of the in-depth questions asked. Other body functions within specific mental functions needed are attention, memory, and thought. Sustaining attention is needed when listening to others answer the questions in order to respond. Memory is important because some of the questions are related to past memories. Being able to execute learned movement patterns is a form of thought and being able to plan out movement is important in accomplishing this activity. Body structures needed are arms, hands, fingers, lower body movement of legs and ability to stand and sit (American Occupational Therapy Association, 2008).

Global mental functions are also needed, for example you need to be able to have consciousness to be alert and ready to determine your turn and engage in conversations. The client needs to be oriented to a person, place, time, self, and others while in a group setting, playing this game and engaging in this activity. The individual needs to be motivated to continue to play and finish the game. Sensory functions are important during this activity. Sensory functions needed are touch function, the ability to feel the Jenga block. You need hearing functions to have the ability to hear and listen, in order to start and stop conversations at the correct time. You need proprioception functions to have awareness of your own body when standing up and grabbing the blocks that are needed. You need visual stability and visual field functions when handling the blocks. Some of the body structures you need are eyes, ears, touch and sensation and inner ears. You need joint mobility, joint stability, muscle tone, and muscle power to a small degree. You need involuntary movement reactions when the Jenga block falls to be able to get out of the way. You need cardiovascular, hematological, immunological, and respiratory system functions to perform the activity. This activity is considered to be low activity, but you still need these functions to properly accomplish these tasks. Lastly, you will need a voice and must have speech functions to answer the questions (American Occupational Therapy Association, 2008).

Comment on the contexts that specifically relate to the performance of this intervention (cultural, physical, social, temporal, virtual, personal, spiritual)

Contexts that specifically relate to the performance of this intervention are the physical context and the social context. The physical context is a mental health facility in therapy room. Social context includes relationships within this rehabilitation program and building those relationships to have a healthy environment. The personal, virtual and spiritual contexts were addressed by clients as they answered questions posed by the game.

Problem List

Based on your occupational profile and analysis, create a prioritized problem list for your selected client

- 1.) Client is unable to engage in social activities due to impaired emotional regulation
- 2.) Client is unable to manage money due to disorganized thinking
- 3.) Client is unable to set boundaries with other people due to impaired problem solving
- 4.) Client requires supervision at work due to lower back pain
- 5.) Client requires supervision when cooking due to decreased hand strength

Prioritize your problem list and justify your reasoning.

I picked emotional regulation as priority #1 because I think the primary reason client has turned to alcohol is not being able to regulate emotions while engaging in social activities. Alternative coping mechanisms should be used to help avoid using alcohol for regulating emotions; this should be first priority. Client will have an emotional breakdown and can't find another way to engage in social activities. I picked money management as priority #2 because client feels that finances are a huge contributor to being able to take care of her daughter and being able to pay for a place to live. Balancing a budget would allow her to feel like she has more control over her finances and situation. I picked boundaries and impaired problem solving as priority #3 because setting boundaries with other people is an important skill especially considering her history of abuse. I picked lower back pain as priority #4 because client will be spending most of her time at work and will have a desk job which requires needed intervention, but is not as important as addressing mental health issues. I picked decreased hand strength as priority #5 because she could learn to use assistive devices to help open jars independently very quickly. This seems lower priority than mental health I think it is important to address mental health issues first because problems in this area have caused her to turn to substance abuse and it is important to have an intervention that addresses mental health as a priority in this circumstance.

References

American Occupational Therapy Association (2008). Occupational therapy practice framework:

Domain and Process (2nd ed.). Baltimore, MD: AOTA Press.