

University of South Dakota

USD RED

---

Occupational Therapy Capstone Presentations

Theses, Dissertations, and Student Projects

---

Fall 5-5-2022

## Understanding Advocacy for Promoting Occupational Engagement among Individuals with Disabilities

Rebecca L. Benson

University of South Dakota, [Rebecca.Wilson@coyotes.usd.edu](mailto:Rebecca.Wilson@coyotes.usd.edu)

Follow this and additional works at: <https://red.library.usd.edu/ot-capstone>



Part of the [Occupational Therapy Commons](#)

---

### Recommended Citation

Benson, Rebecca L., "Understanding Advocacy for Promoting Occupational Engagement among Individuals with Disabilities" (2022). *Occupational Therapy Capstone Presentations*. 62.

<https://red.library.usd.edu/ot-capstone/62>

This Oral Presentation/Poster is brought to you for free and open access by the Theses, Dissertations, and Student Projects at USD RED. It has been accepted for inclusion in Occupational Therapy Capstone Presentations by an authorized administrator of USD RED. For more information, please contact [dloftus@usd.edu](mailto:dloftus@usd.edu).

# Understanding Advocacy for Promoting Occupational Engagement among Individuals with Disabilities

Rebecca Benson, OTS & Allison Naber OTD, OTR/L, CLT-LANA

## BACKGROUND

Engagement in occupations is necessary for sustaining and improving health and well-being (Piskur, 2014). However, not everyone has the opportunity to engage in occupations they would prefer. This injustice often occurs to individuals with disabilities whether that disability is physical, psychological, or developmental (Angell et al., 2020; Haines et al., 2018; Kahlin et al., 2016; Layton & Steel, 2015). This population experiences disadvantages due to gaps in policy, absence of implementation of policy, inadequacy in opportunities to engage, among other shortcomings of society (Hocking & Townsend, 2015). These disadvantages are not always recognized by the general public despite the number of individuals who are impacted (Houtenville & Boege, 2019). Disabilities impact 26% of the United States adult population with approximately 75% having barriers that decrease occupational engagement (Centers for Disease Control and Prevention [CDC] et al., 2018; Houtenville & Boege, 2019; Layton & Steel, 2015). The disadvantages that these individuals face conflict with their human rights (Hocking & Townsend, 2015). Disability rights, consequently, have come from the injustices that this population has faced. Policy cannot fix everything or make up for the lack of knowledge, which creates a need for advocacy, education, and training of the communities and society that surrounds these individuals (Hocking & Townsend, 2015). Disability Rights South Dakota (DRSD) identified several needs to address the discrepancy between what are the actual limitations and barriers for individuals with disabilities compared to the perspective of the community, the need for education on transition services including occupational therapy (OT) in individualized education plans (IEP), and the impact of traumatic brain injury (TBI) on daily life.

## PURPOSE

A capstone experience in advocacy was completed to expand knowledge upon the disadvantages that individuals with disabilities face, how those disadvantages impact the individual's engagement in occupations, and what can be implemented to reduce those disadvantages in general and related to traumatic brain injury, transition services in individualized education plans, and public policy.

## THEORETICAL FOUNDATION

This capstone experience was guided by the Ecology of Human Performance (EHP) model (Figure 1). The EHP model looks at the person and their characteristics, the context the person is in, and the tasks that the person would like to complete (Dunn et al., 1994). The interaction of the person and their context determines the person's performance range (the tasks that they can perform) (Dunn et al., 1994). In accordance with this capstone, the person was the individual with disabilities while the context consisted of the barriers and facilitators in their community resulting in their performance range or occupational engagement. This EHP model states that change can occur through establishing or restoring the person, altering the person or context, adapting the context or task, preventing decreased occupational performance through the person, task, or context, and creating things within the context and the task (Dunn et al., 1994). In this capstone, individuals with disabilities could only establish, restore, and alter to a certain extent. Change can also occur through the adaptation, alteration, and creation of the context and prevention, alteration, adaptation, and creation of the task. These changes can be made by the organization, community, state, or nation. Once changes are made at any level, the occupational engagement of individuals with disabilities will increase or decrease (Dunn et al., 1994). The capstone intended to expand knowledge upon the disadvantages that individuals with disabilities face and how those disadvantages impact the individual's engagement in occupations. This aligns with the EHP model as one must understand the individual with disabilities (person), what disadvantages they face (context), and the tasks (occupations) they complete to understand the engagement (performance) that they have.

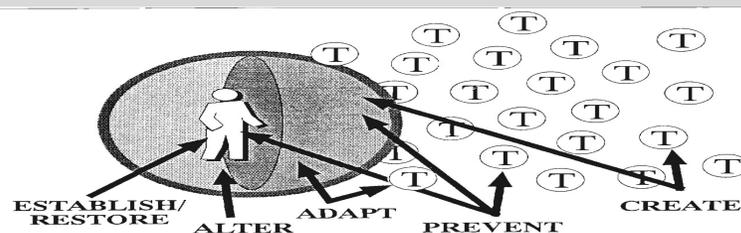


Figure 1. The Ecology of Human Performance Model taken from Dunn et al., 1994.

## METHODS

- **Occupational Engagement Limitations and Barriers for Individuals with Disabilities:** A needs assessment was completed with two surveys assessing the community's perception compared to the individual experience in disability category, occupations that individuals with disabilities have limitations in, and the barriers to engagement in those occupations. The data collected was used to make a presentation and handout.
- **Transition Services in Individualized Education Plans:** A comprehensive literature review was completed to produce two handouts focused on how OT can benefit the child in transition plans and various interventions ideas for transition services.
- **Impact of Traumatic Brain Injury on Daily Life:** A comprehensive literature review and multiple interdisciplinary discussions occurred to compile information into a summary that will be used by DRSD and other organizations to support future legislative action.
- **Advocacy:** Experience in DRSD's various daily activities, Partners in Policymaking, and the legislative process was used to present and communicate to community members on various advocating avenues.

## RESULTS

### Occupational Engagement Limitations and Barriers for Individuals with Disabilities

The community's perception aligned with what individuals with disabilities experience regarding diagnosis prevalence with the highest being mental or emotional disability followed by cognition and mobility. However, the community's perceptions varied from the experiences of individuals regarding occupational limitations and barriers. Table 1 describes the occupational limitations and barriers faced by the majority of the population and the greatest occupational limitation and barrier overall. Over 85 strategies to address the occupational barriers were found in the categories of cognition, room set up, vision, sensation, societal attitudes, policy and implementation, transportation, and physical barriers.

### Transition Services in Individualized Education Plans

Up to ten percent of school occupational therapists are involved in transition plans which results in children's skills being undeveloped which greatly impacts their overall quality of life (Eismann et al., 2017; Pierce et al., 2020). Occupational therapists assist in developing those skills leading to increased success in life after school (Benson et al., 2021; Pierce et al., 2020). Nine assessment tools were provided and over 75 intervention ideas were found in the categories of vocational training, community participation, life skills, education, self-determination, emotional and sensory regulation, social skills, and other strategies (Angell et al., 2019; Eismann et al., 2017; Pierce et al., 2020).

### Impact of Traumatic Brain Injury on Daily Life

Traumatic brain injury can greatly impact a person's life and complete resolution of symptoms and deficits is limited. There are over 15 symptoms and over 35 deficits related to TBI that affect every area of daily living (Armstrong, 2018; Cassidy et al., 2014). Multiple strategies and services can be used to address these deficits and symptoms to improve daily life. Medical and hospital services were perceived to be the most adequate (54.5%-73.5%) in the services provided while community supports were perceived to be the least adequate (24.6%-53.5%) (Barton & Swinford, 2022).

### Advocacy

Knowledge gained in advocacy included how to better advocate for individuals on a one-to-one basis, the community and state legislative process works, testify, run a meeting, and what the rights that individuals and organizations have in these processes. The ability to lead others increased throughout this capstone through gained competence in assisting in giving ideas and making decisions during meetings and through the numerous opportunities to speak with others advocating for individuals with disabilities

## DISCUSSION & CONCLUSIONS

### Occupational Engagement Limitations and Barriers for Individuals with Disabilities

The occupations that are most affected correlates with the most common disability categories. It has been found that individuals who are unable to engage in preferred occupations effectively have increased psychiatric symptoms, increased cognitive declines, and decreased self esteem, and decreased quality of life (Berg et al., 2018; De Connick et al., 2017; Haines et al., 2018). Difficulties with engaging in daily activities results from barriers. Over 50% of individuals are affected by physical barriers and unpredictable situations (Kahlin et al., 2016; Layton & Steel, 2015; Umeda et al., 2017). Societal attitudes impact so many as society has expectations for behaviors which ultimately leads to having fewer choices, experiences, and control due to alienation (Fisher et al., 2017; Kahlin et al., 2016; Layton & Steel, 2015; Umeda et al., 2017).

### Transition Services in Individualized Education Plans

Occupational therapy is underutilized in transition services. Students need foundational skills to be successful in their transition to adulthood (Angell et al., 2020; Eismann et al., 2017). When occupational therapists address these skills, it increases quality of life, socioeconomic security, and pay (Cheong & Yahya, 2013; Kaya et al., 2016). Having occupational therapy be a part of the transition plan increases the functional skills needed, helps obtain competitive employment, and results in positive long-term outcomes in later life (Angell et al., 2020; Eismann et al., 2017; Rosner et al., 2020).

### Impact of Traumatic Brain Injury on Daily Life

Up to 25% of TBIs can result in chronic impairments; though, complete resolution of symptoms is limited for all individuals with TBIs (Cogan et al., 2019; Libeson et al., 2020; Singh et al., 2019; Ruet et al., 2019). The deficits that can be experienced span wide and affect all aspects of daily living. Mental health is also greatly affected after a TBI increasing the risk of suicide and alcohol use, PTSD, and depression (Cogan et al., 2019). Among adults, returning to work is often a goal. Around 50% of individuals with a TBI are unable to return to work (Howe et al., 2018; Singh et al., 2019). Failure to return results in greater economic dependence, poor mental health outcomes, reduced social contact, and lower activity levels (Libeson et al., 2020; Simpson et al., 2020). Recreation, assistance with financial management, housing assistance, treatment for substance use disorder, community living skills training, transportation services, and employment services have inadequacy rating of 50% or higher (Barton & Swinford, 2022). This has grave effects on the individual's ability to participate in life to their fullest without having adequate services available. There are many barriers for individuals with brain injuries to receive these services (Barton & Swinford, 2022). An increase in adequate services is needed and can happen through occupational therapists advocating.

### Advocacy at the Individual, Community, and State Level

Advocating is so important for ideas and needs to be relayed to various individuals. When communicating with others be clear and to the point while conveying the importance and impact of the ideas that are being shared. Understanding what the needs are and then addressing them is what advocacy seeks to accomplish. This was the forefront of this project by understanding that individuals with disabilities have occupational engagement limitations, limited transition services in IEPs, and perceived inadequate services after having a traumatic brain injury.

Table 1. Comparison of the Occupational Limitations and Barriers Individuals with Disabilities Experience to the Community Perception "

Individual Experience (n=36)	Community Perception (n=48)
Occupational Limitations	
1. Driving or using public transportation (61%)	1. Maintaining safety (69%)
2. Financial management (56%)	1. Acquiring employment (69%)
2. Medication management (56%)	3. Financial management (65%)
Greatest Occupational Limitation	
1. Social and emotional health maintenance (17%)	1. Community participation (21%)
2. Bathing (14%)	2. Social and emotional health maintenance (19%)
3. Mobility (11%)	3. Mobility (15%)
Occupational Barriers	
1. Societal attitudes (36%)	1. Societal attitudes (67%)
2. Loud environment (33%)	2. Unpredictable schedule (60%)
2. Unpredictable schedule (33%)	2. Lack of respect and dignity (60%)
2. Physical barriers (33%)	4. Physical barriers (56%)
Greatest Occupational Barrier	
1. Unpredictable schedule (17%)	1. Societal attitudes (33%)
2. Loud environment (14%)	2. Decreased decision making (15%)
	3. Inaccessible environments (13%)

## IMPLICATIONS FOR OCCUPATIONAL THERAPY

Occupational therapy has made a large impact in many individuals' lives, yet still has a long way to go. Advocacy is one aspect that occupational therapy practitioners can become more involved in as this is one thing that our profession also excels in on an individual level.

- Evaluate what the occupational needs are of communities and people around the nation
- Address these needs by sharing occupational therapy's specialized knowledge and creativity in solutions to the issues addressed
- Share how individuals are impacted in their occupations due to their diagnosis
- Advocate on a larger scale for individuals' occupational engagement within the community and nation
- Serve in the state legislatures to promote occupational therapy value

Occupational therapy practitioners have specialized knowledge and outlook on the whole person and on how various contexts can affect a person. This knowledge needs to be expanded out into the community through advocacy efforts on community and state levels as information that is not shared is not known. This advocacy can have a great effect on the community's attitude toward various alterations and adjustments need for greater occupational engagement for all as they will now understand as to why these need to be accomplished from another viewpoint.

## REFERENCES



Please scan the QR Code with your cellphone camera to view references.