# Occupational Therapy's Role With Posttraumatic Stress Disorder

## What Is Posttraumatic Stress Disorder?

Posttraumatic stress disorder (PTSD) is a type of anxiety disorder that develops over time after being exposed to or witnessing a traumatic event that is life threatening or that threatens the integrity of one's self or others, and reacting with intense fear, helplessness, or horror (American Psychiatric Association [APA], 2000). These events can include childhood neglect or emotional, physical, or sexual abuse; hospital procedures (invasive or traumatic procedures across the lifespan); military service or combat exposure; attacks by terrorists; sexual, emotional, or physical assault in adulthood; workplace violence; serious accidents; or natural disasters.

When the onset of symptoms is within the first month after the traumatic experience, individuals meet the criteria for acute stress disorder. If symptoms appear after 4 weeks, or continue beyond 4 weeks, however, a diagnosis of PTSD may also be warranted (APA, 2000). Common symptoms include flashbacks, emotional numbing, hypersensitivities, and hypervigilance.

Sensory processing, cognition, and emotion regulation abilities are often impaired with PTSD, which may negatively impact the person's ability to create and maintain meaningful relationships, as well as participate in self-care, home care, education, work roles, and social and leisure interests. People with PTSD are also more prone to engage in self-injurious behaviors, and to have other physical and mental health disorders (APA, 2000). When trauma occurs in childhood, the developmental trajectory is affected, creating some differences between adult and childhood onset PTSD. Therefore, a new diagnosis, developmental trauma disorder, is being developed to better clarify the differences (van der Kolk, 2005).

## The Role of Occupational Therapy With Persons With PTSD

Occupational therapy practitioners are uniquely skilled to assist people with PTSD in all phases of recovery by using engagement in meaningful occupations to meet recovery goals (American Occupational Therapy Association, 2008). The term *occupations* refers broadly to everyday activities and roles that are meaningful and/or necessary for an individual (e.g., activities of daily living; roles such as parent, worker, and spouse). Occupational therapists conduct a comprehensive evaluation to identify strengths and deficits in functional performance and their cause (e.g., limited skills, environmental barriers, etc.). The occupational therapist and client then collaboratively create goals and develop a plan to meet these goals by addressing the deficits.

Occupational therapy interventions focus on functional outcomes that are meaningful to each individual. Some examples of interventions include:

- Providing individual sessions focusing on stabilizing symptoms and learning new coping strategies (e.g., sensory-supportive interventions).
- Training clients and caregivers in adaptive or modified self-care strategies, so as not to inadvertently trigger hypersensitivity patterns, dissociation, flooding, or flashbacks.


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- Assisting individuals to increase their ability to participate in meaningful roles and activities by helping them plan and initiate the use of a daily routine (schedule), considering the amount and type of supports necessary for follow through.
- Assisting clients and caregivers in determining the needs and requirements for home modifications for individuals with PTSD and physical impairment(s).
- Providing individual or group sessions on relapse prevention to assist individuals in their recovery process.

In addition, many occupational therapists are skilled in implementing a variety of complementary, alternative, and other therapeutic methods that target an individual's needs, as an adjunct to occupational therapy.

## Where Are Occupational Therapy Services Provided?

Individuals with PTSD may receive services across a large variety of settings, including acute care hospitals, short- and long-term-care rehabilitation centers, state hospitals, partial hospital programs, outpatient clinics, club houses, day programs, supported work environments, community-based programs, home care, independent living and skilled nursing facilities, and military-based settings, such as Veterans Administration (VA) hospitals.

Services can be provided one-on-one, in group settings, or in collaboration with other professionals (e.g., primary care physicians, psychiatrists, neuropsychiatrists, psychologists, nurses, social workers, direct care staff, teachers, other therapists). Occupational therapy practitioners also provide consultation to organizations, and collaborate with the client's caregivers and colleagues to provide education and additional resources.

## Conclusion

Occupational therapy practitioners believe in the value of engaging in meaningful roles and daily activities to maintain and/or regain health and well-being. They are able to help identify and address coping skill needs and strategies within the context of real-life demands. Given their unique educational background in client, activity, and environmental analysis, and a rich understanding of neuroscience, anatomy, physiology, and mental health, occupational therapy practitioners are a vital part of the interdisciplinary team working with people with PTSD.

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