



October 2012

Research Resources



Autumn Greetings to *Research Resources* colleagues:

How big is 1.7 million? On an average day, there are [1.7 million passengers on U.S. flights](#) (Bureau of Transportation Statistics). In each year, there are approximately [1.7 million people in the U.S. who have a traumatic brain injury \(TBI\)](#) (Centers for Disease Control -- CDC), not counting the wounded warriors who receive medical services from military or veteran facilities.

Clearly, traumatic brain injuries are a serious public health issue (CDC). It is estimated that 40% of the injuries requiring medical services are in the youngest (0-4 years) and oldest (75+ years) age groups and about 60% of the injuries occur in males. The causes of traumatic brain injuries may be roughly classified by thirds with one third falls, one third motor vehicle accidents or struck by/against events, and one third assaults or other events.

Prevention and Mild TBI/Concussions.

Many TBIs occur as we engage in our everyday occupations - playing, driving, biking, bathing, cleaning, and competing in sports, to name a few. The way we perform these occupations, the equipment used and features of the environment may contribute to prevention or risk of TBI. About 75% of TBIs are classified as mild injuries or concussions (CDC). Many of these injuries occur in recreational or athletic occupations. At one time, concussions were dismissed as being relatively unimportant medical conditions. Recent research has highlighted the seriousness of these events and resulted in new prevention

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Dates to Remember

[Scholarship deadline](#) -- November 15

Support AOTF

The American Occupational Therapy Foundation is a nonprofit organization dedicated to supporting our profession today and for the future. Gifts to AOTF help us make a real difference for so many people in our profession through:

* Scholarships

* Research support and publications including *Research Resources* and *OTJR*

initiatives and management guidelines.

Long-term needs.

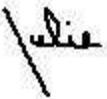
The long-term problems associated with TBI often limit participation in valued occupations. Changes in cognition, sensation, communication, and emotion are common and compromise involvement in home and community life. [Many personal accounts of TBI](#) portray the struggle between "who I am now" and "who I used to be" and the need to develop a new identity and occupations that provide meaning in life. These challenges also affect families, co-workers, and friends.

Occupational therapy has had longstanding involvement in acute rehabilitation for TBI. Perhaps, our knowledge of occupations, persons, and environments could be extended further to research efforts related to prevention, public health education campaigns, and community programs that address the everyday lives of individuals with TBI and their families.

This month, *Research Resources* features publications that support occupational therapy interventions related to traumatic brain injury and identify opportunities for future study. We invite you to survey the sample assembled by our staff in the Wilma L. West Library.

As always, we welcome your ideas on ways we can improve this monthly newsletter, and we thank you for your support of AOTF.

Warm regards,



Julie D. Bass, PhD, OTR/L, FAOTA
Associate Director
Institute for the Study of Occupation and Health

Resources Notes:

Traumatic Brain Injuries: Lasting impact on performance/participation and occupational therapy in long-term care rehabilitation

In this author's thirty-five plus years as a librarian in the health care domain, she's often noticed the recirculation of important ideas, practices, or therapies. This phenomenon has happened again. In her 1994 article, Jodi Jackson echoes two of the points Dr. Bass addresses: (1) the significant need for long-term rehabilitation and support for survivors of traumatic brain injury (TBI) and (2) occupational therapy practitioners' expertise and experience in contributing to the long-term care needs of survivors of traumatic brain injury. [Read more.](#)

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OTJR: Occupation, Participation and Health

OTJR: Occupation, Participation and Health, published quarterly by the American Occupational Therapy Foundation, Inc., offers original research articles of professional interest to the practicing occupational therapist with a focus on occupation and fostering interdisciplinary research. Visit: [OTJR Online.](#)

Articles appearing in this "Online Advanced Release" section have been peer-reviewed and accepted for publication in *OTJR: Occupation, Participation and Health* and posted online before print publication.

- [Dutch Children's Perspectives on the Constructs of the Child Occupational Self-Assessment \(COSA\)](#) Marjon ten Velden, MSc OT; Lorna Couldrick, OT, MSc, CertEd; Astrid Kinébanian, OT, MSc Soc Sc; Gaynor Sadlo, PhD, DipOccThy
- [Perceived Participation and Health-Related Quality of Life in 85 Year Olds in Sweden](#) Kristina Lantz, BScOT; Jan Marcusson, MD; Ewa Wressle, MScOT
- [Mental Health Payment-by-Results Clusters and the Model of Human Occupation Screening Tool](#) Sun W. Lee, PhD, OTR/L; Kirsty Forsyth, PhD, OTR, FCOT; Mary Morley, D. OccT Dip COT, MHM, FCOT; Mike

OT: History in Focus

Douglas C McMurtrie and Vocational Rehabilitation

When the United States finally entered World War I, other countries, including Canada, had been fully engaged in the battle for several years. They were challenged to contend with the horrific loss of life and the disabled soldiers that returned with permanent disabilities. Thomas B. Kidner, a Canadian, and early president of the American Occupational Therapy Association, is well known to occupational therapy historians as an expert from Canada who was invited by the U.S. Government to provide counsel on this aspect of war preparations when the U.S. entered the war. [Read more](#)



WWI soldier with one arm learns to use machine.

Photo from: McMurtrie, Douglas C. (1919). *The Disabled Soldier*. New York: The McMillan Company, page 46 ff

Garnham, Dip COT; David Heasman, MSc OT, Dip COT; Renee R. Taylor, PhD

- [Validity of the Health Enhancement Lifestyle Profile-Screener \(HELP-Screener\)](#) Jengliang Eric Hwang, PhD, OTR/L
- [Parenting Stress and Sensory Processing: Children With Fetal Alcohol Spectrum Disorders](#) Tracy Jirikowic; Heather Carmichael Olson; Susan Astley
- [Successful Aging in Older Adults With Disability](#) John L. Liu; Pamela K. Richardson
- [The Particularities of Engagement: Intersubjectivity in Occupational Therapy Practice](#) Mary C. Lawlor, ScD, OTR/L, FAOTA

Conference Announcements

29th Annual Pacific Rim International Conference on Disability and Diversity Conference (April 29-30, 2013, Honolulu, Hawaii)

Submission deadline: January 7, 2013

International Research Symposium: Therapy and Empowerment - Coercion and Punishment (June 26-28, 2013, Oxford, U.K.)

This conference seeks to encourage critical engagement with the various medical, social and political factors implicated in how work and occupational therapy developed within specific national and clinical contexts and at different periods. The closing date for abstracts of 300 words is **January 10, 2013**.

AOTF on Facebook

THE AOTF Facebook page seeks to provide news of a more personal or timely nature tailored for the OT community.

What you missed on Facebook in September:

[Speech](#) by the Associate Minister of Health at the New Zealand Association of Occupational Therapists Conference on the beauty inherent in OT.

OT and Paralympic double bronze medal winner [Kerri Morgan](#) visits the White House with her service dog.

[Veteran and choreographer](#) interprets his combat experience with ballet and returns to Iraq with ballet.

Education Opportunities

Like us on Facebook 

Training in Grantsmanship for Rehabilitation Research (TIGRR) (January 15-19, 2013, Chapel Hill, North Carolina)

TIGRR, (previously known as Enhancing Rehabilitation Research in the South (ERRIS)), seeks to mentor junior and mid-level faculty towards NIH or NIDRR level funding. The format is a 4-1/2 day workshop providing mentoring in grant writing, clinical trial design, biostatistics, informatics, collaboration, grantsmanship, budgeting, and career development through lectures and individual consultation.

AOTF Events at AOTA Conference, San Diego, April 25-28, 2013

Watch this space for information on Breakfast with a Scholar, Research Colloquium and other AOTF sponsored events.

Join Our Mailing List!

Funding Opportunities

AHRQ Patient Centered Outcomes Research (PCOR) Pathway to Independence Award (K99/R00)

The primary purpose of this program is to increase and maintain a strong cohort of new and talented AHRQ-supported independent investigators trained in comparative effectiveness methods to conduct patient care outcomes research. The program is designed to facilitate a timely transition from a junior non-tenure track faculty or a postdoctoral research position (or their equivalents) to a stable independent research career.

Resources Notes continued

As Dr. Bass writes, survivors of TBI often find themselves struggling with who he or she was pre-TBI and who she or he is post-TBI. Most strive to become engaged in meaningful occupations that provide them with a self-identity. There is a large body of literature addressing these aspects of the survivors' adaptation (Hoogerdijk, et al., 2011; Erikson, et al., 2007; Eriksson, et al., 2006; Johansson & Tham, 2006; and Klinger, 2005).

Depression (Lange, Iverson & Rose, 2011) and fatigue (Cooper, Reynolds & Bateman, 2009) may also contribute to the difficulties of survivors of mild or severe TBIs regaining their skills in their everyday occupations, both needed and preferred.

Some of us struggle with the wonderful technology available to aid us in our daily lives. Studies show that after suffering a TBI, survivors have increasing problems using everyday technology (Engström, Lexell & Lund, 2010 and Linden, Lexell & Lund, 2010). At the same time, of course, electronic technology can be instrumental in helping individuals with memory problems after a TBI to perform their activities of daily living (ADL) as described by Boman and her colleagues (2010).

We must not fail to address the impact of TBIs on the participation and performance of children in ADLs and in their social life. Galvin, Froude & McAleer report on the participation in community-based activities of Australian children after an acquired brain injury (AQI) (2010). Over time, parents become proficient in selecting activities and preparing their children for them so that there are more positive than negative experiences. In their research, Bedell, Cohn, & Dumas describe the strategies parents have developed to assist their children (2005).

Bedell, G. M., Cohn, E. S., & Dumas, H. M. (2005). [Exploring parents' use of strategies to promote social participation of school-age children with acquired brain injuries](#). *The American Journal of Occupational Therapy*, 59, (3), 273-284.

Boman, I. L., Stenvall, C. L., Hemmingsson, H., & Bartfai, A. (2010). [A training apartment with a set of electronic memory aids for patients with cognitive problems](#). *Scandinavian Journal of Occupational Therapy*,

17, (2), 140-148.

Cooper, J., Reynolds, F., & Bateman, A. (2009). [An evaluation of a fatigue management intervention for people with acquired brain injury: an exploratory study](#). *The British Journal of Occupational Therapy*, 72, (4), 174-179.

Engström, A. L. L., Lexell, J., & Lund, M. L. (2010). [Difficulties in using everyday technology after acquired brain injury: a qualitative analysis](#). *Scandinavian Journal of Occupational Therapy*, 17, (3), 233-243.

Erikson, A., Karlsson, G., Borell, L. & Tham, K. (2007). [The lived experience of memory impairment in daily occupation after acquired brain injury](#). *OTJR: Occupation, Participation and Health*, 27, (3), 84-94.

Eriksson, G., Tham, K., & Borg, J. (2006). [Occupational gaps in everyday life 1-4 years after acquired brain injury](#). *Journal of Rehabilitation Medicine*, 38, (3), 159-164.

Galvin, J., Froude, E. H., & McAleer, J. (2010). [Children's participation in home, school and community life after acquired brain injury](#). *Australian Occupational Therapy Journal*, 57, (2), 118-126.

Hoogerdijk, B., Runge, U., & Haugboelle, J. (2011). [The adaptation process after traumatic brain injury: an individual and ongoing occupational struggle to gain a new identity](#). *Scandinavian Journal of Occupational Therapy*, 18, (2), 122-132.

Jackson JD. (1994). [After rehabilitation: meeting the long-term needs of persons with traumatic brain injury](#). *The American Journal of Occupational Therapy*, 48(3), 251-255.

Johansson, U., & Tham, K. (2006). [The meaning of work after acquired brain injury](#). *The American Journal of Occupational Therapy*, 60, (1), 60-69.

Klinger, L. (2005). [Occupational adaptation: perspectives of people with traumatic brain injury](#). *Journal of Occupational Science*, 12, (1), 9-16.

Lange, R. T., Iverson, G. L., & Rose, A. (2011). [Depression strongly influences postconcussion symptom reporting following mild traumatic brain injury](#). *The Journal of Head Trauma Rehabilitation*, 26, (2), 127-137.

Linden, A., Lexell, J., & Lund, M. L. (2010). [Perceived difficulties using everyday technology after acquired brain injury: Influence on activity and participation](#). *Scandinavian Journal of Occupational Therapy*, 17, (4), 267-275.

Turner, B. J., Ownsworth, T. L., Turpin, M., Fleming, J. M., & Griffin, J. (2008). [Self-identified goals and the ability to set realistic goals following acquired brain injury](#): A classification framework. *Australian Occupational Therapy Journal*, 55, (2), 96-107.

History Continued

But Douglas C. McMurtrie is less well known, despite his importance as a strong advocate for rehabilitation services to return soldiers to productive societal roles. McMurtrie, who for a time headed the Red Cross Institute for Crippled and Disabled Men in New York, believed that the system of vocational reeducation set up to care for soldiers ought to be under civilian rather than military control. His advocacy influenced three pieces of legislation passed by Congress between 1917 and 1920 that supported vocational rehabilitation services provided by the federal government in cooperation with the states. Because of its strong emphasis on training for vocational skills, vocational rehabilitation (and rehabilitation counselors) became closely allied with colleges of education. Despite the similarities in their philosophy and mission, occupational therapists took a different route, becoming more closely aligned with medicine. Thus, to this day, the natural alliance that would seem to bond the two disciplines has yet to fully materialize, despite the fact that Thomas Kidner and Douglas McMurtrie considered themselves colleagues.

AOTF is pleased to present OT: History in Focus, recollections of, through photos and reports, events and people that have shaped and defined the profession during its distinguished history.

About Us

AOTF is a 501c3 dedicated to the advancement of research, education, and public awareness of occupational therapy so that all people may participate fully in life regardless of their physical, social, mental, or developmental circumstances.

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