

Book reviews

Title: **Wellbeing in Dementia: An Occupational Approach for Therapists and Carers (2nd Edition)**

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'Wellbeing in Dementia' is essential reading for Occupational Therapists and carers. It challenges the ethos of our profession of rehabilitating people and "returning them" as far as possible to the people they were before the sickness or disability and it provides alternative models of care, evaluation and assessment. It provides a thoughtful and insightful look at the degenerative process of dementia where the world and cognitive ability of the individual shrinks as the dementia progresses. The authors discuss Piaget's four developmental stages of cognitive development in children and explores the concept of the reversal of this process occurring with the progression of dementia and offers a model of dementia care based largely on Piaget's stages.

This is a well written book which analyses and discusses concepts germane to Occupational Therapy: activity; occupation; meaning and creativity. It draws from the authors' personal experience as well as work of researchers and commentators to support their observations and model of client centred care.

The book is logically ordered and is divided into easy to read sections. It contains clear illustrations, reader friendly tables and figures and boxes with examples to illustrate various scenarios. At the end of most chapters there is a box enumerating key points of the chapter.

The authors of this book have between them many years of experience in dementia work and the authenticity and experience of the authors are compelling in this client centred occupational theory. Their model for dementia care is practical and well set out and should be of use to newcomers to the field as well as seasoned practitioners. Assessment tools for well-being and "ill-being" are included.

It should challenge us to rethink our approach to Occupational Therapy and Dementias and ought to be essential reading for Occupational Therapists and carers.

Chapter 1

'Understanding dementia'

It covers the following:

- ❖ Up to date information on dementias
- ❖ Symptoms
- ❖ Discussion of the four main causes of primary dementia
- ❖ The nature of neurological impairment
- ❖ Memory
- ❖ Disruptive behaviour and emotive issues

Chapter 2

'Occupational Therapy revisited'

The authors question whether there is congruence between the current rehabilitative purpose of rehabilitation and the reality of degenerative conditions. They examine the nature of occupation

and in its relationship to health and examine issues of meaning, creativity and wellbeing.

Chapter 3

'The altered world of dementia'

As carers of people with dementia the authors discuss the need for therapists to try to understand the world as those with dementia experience it. They present Piaget's theory of cognitive development which is considered by numerous commentators to be a mirror image of the process of cognitive decline in dementias and which causes us to rethink our approach to diminishing capacity and to recognise what has been retained in the degenerative process.

Chapter 4

'The Significance of the carer'

The authors describe the world of the person with dementia as one which shrinks and forms a "bubble" around her. Through this bubble the outer world is distorted and fails to penetrate adequately. The carer needs to make increasing efforts to penetrate the shrinking world of the person within the bubble. Playfulness, closeness, constancy and physical contact as well as eye contact are characteristics of an effective carer. Attachment theory and its importance in dementia care are discussed as is the ability to mother which is a quality that should be fostered in dementia carers.

Chapter 5

'The Playful practitioner'

The significance of play throughout the lifespan is discussed as well as the notion that life is a circular process, a returning to the beginning. In infancy play is used to develop a sense of self in the child and this happens when a reliable mother figure identifies with the child's needs. The chapter discusses play as movement, liberation and stimulus seeking, as well as creativity and its importance to the wellbeing and health of individuals and societies. Play sustains health and lives are impoverished without it. It adds meaning to life and is better understood as a disposition i.e. "any activity may be made a playful activity by virtue of the qualities we bring to it, either as a care giver or as a patient" (p83).

Festivity and fantasy are discussed as well as play as a disposition and a model of the relationship between play, imagination and creativity and playfulness is included.

Chapter 6

'Principles of good practice'

The process of the activity which is the 'here and now' is considered more therapeutic than the end product.

As sensory faculties are retained longer than cognitive faculties in dementia the authors recommend the sensory pathway as "the prime route to effective communication and wellbeing in dementia" (p89).

The dilemma of finding a balance in interventions is discussed. Occupational intervention provides a resolution to distress and agitated behaviour.

The client centred approach in which the carer attempts to make sense of the disorder of the world of the person with dementia and the need to be flexible in approach as the client, his needs, abilities and world change, is discussed.

Chapter 7

Non-verbal communication

As language abilities deteriorate non-verbal communication assumes a greater role in caring. The authors stress the interplay of culture, environment and that effective communication is a "matter of integrity". Body language and posture, proximity, physical contact, eye to eye contact facial expressions and gesture are discussed in detail. In addition tone of voice and the messages conveyed through voice are discussed.

Chapter 8

Model for dementia care

The authors discuss a model of care based on Piaget's cognitive



developmental phases i.e. reflective, (early dementia) symbolic (early to middle dementia), sensori-motor (middle to late dementia) and reflex (late dementia)

The following aspects are covered under each of the phases: relationship to the world; thinking; doing; nature of the activity; possible activity and examples.

Chapter 9

Assessing capacity for doing and promoting engagement

The work of the philosopher Twiss involving therapeutic interventions, therapeutic aims and values of persons is suggested to provide a framework of for good ethical occupational practice.

By being unaware of the residual abilities of the person and by negative labelling caregivers fail to practice suitable therapeutic interventions. The authors table different ways of engaging and encourage the capacity “to do” irrespective of the degree of diminishing abilities.

In the section on ‘Engaging with objects and tasks’ Allen’s ‘Leather Lacing Assessment’, the ‘Pool Activity Level for instrument occupational profiling’ (PAL) and the ‘Capacity for doing template’ are discussed.

Occupational Therapists need to ascertain whether there is a desired outcome and ‘The Bradford Dementia Group well and ill being profiling tool’ is one of several suggested to profile wellbeing. Included are Dementia care Mapping and The Positive Response Schedule (PES).

The profiling process is essential for gathering information on the person’s ability to “do” and to accurately evaluate interventions.

Chapter 10

The dementia therapist: a good mother?

The concept of mothering, also discussed in chapter 4 is discussed in some detail as is Winnicott’s perception of the neonatal infant who is in a state of “unintegration.” The holding role of the mother, which is one of repetitive handling that gathers together disparate emotions and perceptions into a unified whole, thereby promoting a sense of safety and security is also discussed.

The authors call for dementia therapists, individuals “who understand therapy as opposed to care” and who are not necessarily academically highly trained but who are innately able to hold, handle and mother instinctively, ethically and creatively and who have high interpersonal skills. The requirements for being a dementia therapist are listed in detail.

Reviewer:

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Title: Occupational Therapy for people with learning disabilities. A practical guide

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The book combines developing philosophies of Occupational Therapy with historical and current Occupational Therapy services for adults with learning disabilities in the United Kingdom. The book aims to offer Occupational Therapy students and new practitioners a theoretical and practical framework with which to work with adults who have a learning disability. The book is made up of four sections and comprises 15 chapters. Section 1 deals with the occupational needs of the learning disabled adult; historical perspectives; the occupational therapy process and occupation and health promotion. Section 2 takes an in-depth look at the occupational performance areas and explores the role of an occupational therapist in each of the areas. The section explores the integration of the learning disabled adult into the wider community and places a strong emphasis on the inclusion of persons with disabilities into the community. Section 3 covers areas such as working with parents with learning disabilities; maintaining occupation during times of transition; loss and bereavement and life changes in the older adult. The last section explores user participation in learning disability services.

Each chapter is structured into a reader friendly format encouraging assimilation of the content. The chapters contain an overview, learning outcomes, detailed content, reader activities,

case scenarios, a summary and recommended reading and further resources. The book uses the term “learning disabled” but this is not used to describe specific learning difficulties/ problems in children. The term “learning disabled” is synonymous with the term “intellectually disabled”, which is frequently used within the South African context.

Chapter 1 explores the occupational needs of people with learning disabilities. The chapter discusses the client centered approach of occupational therapy and how this framework ties in with policy documents pertaining to learning disabilities in the United Kingdom.

Chapter 2 discusses the historical development of occupational therapy services for people with learning disabilities and the lessons that can be learnt from history which can influence current occupational therapy service provision.

Chapter 3 examines the occupational therapy process and how it is used to meet the daily challenges faced by adults with learning disabilities.

Chapter 4 provides an interesting look at how significant others and the environment impact on a learning disabled individual’s ability to communicate effectively. The chapter also provides communication strategies and explains the various levels of understanding which a therapist can use to facilitate meaningful communication.

Chapter 5 explains the various factors which could impact on attaining a healthy lifestyle. The multi-disciplinary team is also discussed and how the occupational therapist, as a team member can create awareness on health promotion and wellness.

Chapter 6 provides a resourceful discussion on how the sensory integrative approach can be used with adults during assessment, direct therapy intervention and consultation. The chapter explores some of the dysfunctional behaviours presented by some adults during activities of daily living such as feeding, dressing and bathing. The possibility of a sensory integration foundation to these difficult behaviour patterns, thus making sensory integration applicable to this group of the population is also discussed.

Chapter 7 discusses employment. It describes the role of the occupational therapist in creating and establishing employment opportunities for the learning disabled. The chapter defines the various employment models and the process of employment for the disabled adult.

Chapter 8 focusses on leisure and highlights the importance of this often neglected area of occupation in terms of its therapeutic



relevance. The chapter also attempts to explore the leisure barriers which often exist in the learning disabled adult.

Chapter 9 highlights the impact that a major life transition may have on the occupational wellbeing of the disabled adult. It explores ways in which the therapist can contribute towards the adult maintaining and acquiring new and meaningful occupations during times of transition. The chapter also looks at the inclusion of the adult individual into the community.

Chapter 10 provides a thought provoking look at the issues surrounding the situation when a learning disabled adult becomes a parent. The chapter takes a holistic view point, where emphasis is also placed on the negative implications and risks which may be associated with child rearing and safety and which are compounded by the fact that the parent is has a learning problem. The chapter also explains the role which an occupational therapist can take in assisting in this context.

Chapter 11 explores the issues surrounding the bereavement process in individuals who may not have the emotional maturity to deal with grief and the understanding of death. The chapter identifies resources which can be “tapped” into to assist and support the learning disabled bereaved. It also provides applicable case scenarios.

Chapter 12 covers issues such as the increased risk that individuals with Down Syndrome have in developing Dementia. The chapter discusses the implications of growing older with a learning disability and maintaining occupation despite physical changes. Practical suggestions are provided for the occupational therapist to implement during the three stages of Dementia, in order to

promote continuing occupation and wellbeing.

Chapter 13 highlights the importance of evidence based practice and research. It explores ways of involving the service user in research and service development. The chapter also discusses possible means which the therapist could use when involving the client in research studies. There is a strong emphasis on inclusion.

Chapter 14 discusses working with people with learning disabilities and their networks.

Chapter 15, the last chapter, consists of “personal comments” made by the authors on occupational therapy in the past, the present and the future within the learning disabilities field. The importance of evidence based practice was highlighted in ensuring positive therapeutic outcomes with the learning disabled group of the population.

The book is based on a United Kingdom context where policies with regards to inclusion and service provision for the learning disabled are well in place and where community based occupational therapy is well established. Despite this, it is worthwhile reading this book as a therapist who is involved with learning disabled individuals even if you are not a student or young practitioner, as the book provides valuable insights and is thought provoking.

Reviewer:

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