



Occupational therapy

DEMENTIA CARE

This evidence theme on occupational therapy is a summary of one of the key topics identified by a scoping review of dementia research.

Key points

- Occupational therapy plays an important role in improving or helping to maintain the functional abilities of people living with dementia.
- Evidence from six systematic reviews showed that occupational therapy interventions can improve people's ability to manage their self-care. It also has a positive impact on carer's quality of life.
- Occupational therapy can also reduce responsive behaviours, carer distress, and carer hours assisting the person living with dementia.
- The evidence of the benefit of occupational therapy for quality of life for the person living with dementia is inconclusive.
- Studies that assessed the relationship between occupational therapy and depression for the person living with dementia found no benefit.

What is occupational therapy?

Occupational therapists are allied health professionals who specialise in assessing and promoting a person's ability to complete day-to-day tasks. Occupational therapy for people living with dementia is usually designed to improve or maintain function. Occupational therapy approaches include:

- Education about dementia and the potential risk to functional independence
- Assessment of the current strengths and abilities of the person living with dementia
- Training in practical skills, coping, and adaptive and compensatory strategies [1]
- Prescription of equipment and aids to assist with day-to-day activities
- Home safety assessment
- Integration into community
- Energy conservation.

Many home-based occupational therapy interventions are delivered to both the person living with dementia and the carer (also known as the dyad). [2]

Is occupational therapy effective?

We found six systematic reviews that examined the impact of occupational therapy on people living with dementia. These reviews found that occupational therapy interventions have a positive influence on:

- People's ability to manage their self-care (also known as activities of daily living) [2, 3]
- Daily functioning [4]
- Carer quality of life. [2]

These also include reductions in:

- Responsive behaviours [2, 5]
- Carer distress [2]
- Carer hours assisting the person living with dementia. [2]

There is inconclusive evidence that occupational therapy improves the abilities or quality of life for the person living with dementia. This is because some studies reported benefits while others did not. [1, 2, 5, 6]

There was no clear evidence of benefit in depression for the person living with dementia. [5] In other words, studies that have assessed the relationship between occupational therapy and depression reported no benefit.

Evidence limitations

The reviews also highlighted concerns about the methods used by some of the studies. This reduces the degree of certainty we might have about the benefits of occupational therapy. For example:

- Studies did not compare the effectiveness of occupational therapy interventions across the varying stages of dementia. [3]
- It is unclear how long benefits last. [2]
- Potentially important outcomes were not assessed (e.g., functional dependency, carer wellbeing). [1]
- The types of responsive behaviours that were reduced by occupational therapy were not always made clear by the researchers. [2]

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What can an individual do?

- Be familiar with what occupational therapy is and how it may assist someone living with dementia (see some resources below).
- Refer or escalate any occupational or safety concerns (e.g., ability to manage self-care).
- Check the case notes of the individual living with dementia for any programs that may have previously been supplied by an occupational therapist.

What can the organisation do?

- Referral to occupational therapy should be considered to support and optimise the ability to carry out day-to-day activities and improve the wellbeing of people living with dementia. [2]
- Put practices in place (e.g., staff training, organisational changes) to increase adherence to any programs which may have been provided by an occupational therapist for the person living with dementia.

References

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