

Mr. P Goes “Snoezelen” or Rediscovering Volition: Applying the Model of Human Occupation (MOHO) to an Old-old Multiple Disabled Client

Jutta Brettschneider MS OTR/L (Germany/Israel/USA)

Introduction

When sensory, motor and cognitive deficits limit a person’s access to and control of the environment, volition can diminish. A client loses the sense of capacity and efficacy and might face misunderstanding or even neglect.

Occupational therapists are advocates in identifying meaningful occupation. They are specialists in training clients to compensate deficits and regain performance skills.

I encountered Mr. P in a Skilled Nursing Facility in Israel, where I had worked with clients in the “Snoezelen” environment. Mr P was very passive and disconnected at the beginning of the interventions. This changed significantly. My OT colleague Deborah Roitman and I documented Mr. P’s regained skills with the “Volitional Questionnaire” (VQ) of the Model of Human Occupation (MOHO).

Objectives of the Clinical Study

To provide evidence-based information on the application of the assessment tool “Volitional Questionnaire” of the MOHO to an old-old multiply disabled client.

Participant

[the name of Mr P and his caregiver are fictional, JB]

Mr. P was at the time of the study 85 years old. He was born in Rumania, came to Israel with his wife and two children in 1958, worked in the textile branch; he loved to dance, listen to music and be an active family father. In 1973, his son died in the Yom Kippur War. Short after, Mr. P suffered a stroke that left him with right side hemiplegia and aphasia. He also developed dementia and osteoporosis, became legally blind and deaf. His wife took care of him, until her death. He moved to a “Parents home”/Skilled Nursing Facility on a very low functional level for his performance of daily activities or communication. His daughter visited him daily; a private caretaker was with him for three hours daily.

Intervention Context and Process

The “Snoezelen” room in the Nursing is an indoor environment with controlled multisensory stimulation (“sensory diet”), intense verbal and nonverbal interaction. In case of Mr. P, the purpose was to offer him stimulation so he could get out of his isolation and passivity. We mainly worked with:

- Music on high volume and use of our bodies: dance in sitting = active and passive Range of motion of both his sides
- The warm water and color bubble pillar with a sitting corner: transfer out of the wheelchair and hug the vibrating warm column
- Smooth and soft objects to touch: sand, marbles, the fiber optic comb
- Light adaption for low vision: dark room with only few clear light sources

The Volitional Questionnaire (VQ) in the Model of Human Occupation MOHO

MOHO emphasizes the essential need of humans to engage in occupation. The role of the therapist is to promote volition supporting the client’s occupational engagement.

Occupation, according to MOHO includes to three components: Volition, Habituation and Roles.

- 1) Volition is defined as the ongoing process of thoughts and feelings, which occur as people experience, interpret, anticipate and chose occupations.
- 2) Habituation refers to semi-autonomous patterning of behavior that take place in temporal, physical and social habitats, taken for granted round of daily life, encountering others as we did before, and doing things as we did before.
- 3) Roles are patterns of actions reflecting roles that we have internalized (such as father, patient, etc.), (Kielhofner 2002).



The Volitional Questionnaire (VQ), is used to determine the client’s level of volitional development and is “appropriate for any individual for whom self-report assessment of volition is not readily feasible (e.g., individuals with dementia or brain damage or persons with extreme volitional problems due to environmental stresses or social traumas).” (Kielhofner, 2002).

The VQ scale is administered by the occupational therapist, which observes and rates clients while they engage in work, leisure, or daily living tasks.

I observed Mr. P in the dining and in the Snoezelen room. The four-point rating scale indicates the amount of volition that the individual demonstrates (PAssive, Hesitant, Involved and Spontaneous).

Example Report

Example report from a session with Mr. P, his caregiver Mike who also completed Snoezelen training and Mr. P’s daughter who was seeking reciprocal communication with her father:

I sit on his non-plegic side and reach out for his hand. Mr. P’s face starts to relax and after a tender input of movement, Mr. P starts to lead the movement with the rhythm of the music. I let his arm touch the plegic arm and both legs and Mr. P initiates with a smile and even laughs with me and continues to guide this new sequence. After a while, it seems safe enough to go over to his plegic side. Fixing the shoulder (his most recent fracture was in that shoulder), I let him hold his plegic hand but now three of our hands move together to the music. Mr. P is completely awake at this point and demonstrates adequate trunk control. I release the wheelchair belt. Mr. P knows that he will move now to the bubble pillar. His caregiver Mike helps with the transfer and Mr. P sits right close to the pillar leans his ear on it and listens. After a while, we transfer him to the other side of the pillar and he hugs the pillar and starts moving his hand up and down the pillar. His face is an expression of intense listening and a deep smile.

Two days later the daughter of Mr. P comes for training in this environment. At the end of the session, the two of them hand each other glass marbles and share laughter with a beautiful voice. The daughter has tears in her eyes, kissing her father on the cheek. He takes her hand and responds with gentle kisses on her hand. A spell of isolation is broken.

Report with the Volitional Questionnaire:

Dining room				Environmental Context				Snoezelen			
P	H	I	S					P	H	I	S
P	H	I	S	1. Shows curiosity				P	H	I	S
P	H	I	S	2. Initiates actions/tasks				P	H	I	S
P	H	I	S	3. Tries new things				P	H	I	S
P	H	I	S	4. Shows pride				P	H	I	S
P	H	I	S	5. Attempts challenges				P	H	I	S
P	H	I	S	6. Seeks additional responsibilities				P	H	I	S
P	H	I	S	7. Tries to correct mistakes				P	H	I	S
P	H	I	S	8. Tries to solve problems				P	H	I	S
P	H	I	S	9. Shows preferences				P	H	I	S
P	H	I	S	10. Pursues activity to completion/accomplishment				P	H	I	S
P	H	I	S	11. Stays engaged				P	H	I	S
P	H	I	S	12. Invests additional energy/emotion/attention				P	H	I	S
P	H	I	S	13. Indicates goals				P	H	I	S
P	H	I	S	14. Shows that an activity is special or significant				P	H	I	S

Key: P = Passive, H = Hesitant, I = Involved, S = Spontaneous

Conclusion

For Mr. P, the environment of the Snoezelen with its controlled sensory stimulation and one-on-one attention provided unique volitional opportunities. He was able to regain self-controlled activities and the role as a giving father.

The volitional questionnaire proved as an appropriate tool to demonstrate evidence based intervention.

Relevance for OT practice

By identifying and respecting client’s volition, therapists can choose practices that empower multiply disabled clients like Mr. P to regain participation in occupational life.

References

- 1) De la Heras, C.G., Geist, R., Kielhofner, G., & Li, Y. (2002). The Volitional Questionnaire (VQ) (4.0). Chicago, IL: MOHO Clearinghouse, Department of Occupational Therapy, College of Applied Health Sciences
- 2) Brettschneider, J., Roitman, D. & Ziv, N. (2008). Applying MOHO to Clients Who Are Cognitively Impaired. In: G. Kielhofner, Model of Human Occupation: (4th. ed.) (pp. 337-340). Baltimore, MD: Lippincott Williams & Wilkins
- 3) Shapiro, M. and Bachar S. (2002). Snoezling: Controlled Multi-sensory stimulation. A handbook for practitioner. Israel: Beit Issie Shapiro.

Information About the Author

Jutta Brettschneider, a German trained OT, lives currently near Washington DC in the USA. From 1999 until 2006, Jutta lived in Jeruaem and participated in projects in Jerusalem, Israel and Bethlehem, Palestine. She worked in a “Parents Home” with old-old Jewish German Immigrants, the “Yekkes” where she conducted this study.

I am looking forward to encounters with colleagues from many different countries.

Contact information: yuttab@verizon.net