

Occupational Therapy in Primary Health Care: A new area for involvement and contributions in the new health care system in Hong Kong

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Over the past 5 years, Hong Kong has seen a slow but steady shift in thinking about the role and provision of health care services. At present, occupational therapy services in Hong Kong are delivered chiefly by the Hospital Authority who focuses on the hospital treatment of illness and injury. With increasing trends of occupational therapists to work in the NGOs in community services, greater attention was paid to the competencies of our graduates who choose their job opportunities in the context of primary health care (Fong & Siu, 2007).

Primary health care was first defined by the World Health Organization in the 1978 Declaration of Alma Ata. Primary health care is the first point of contact where individuals and their families are subject to a continuing healthcare process, which aims at avoiding hospitalization and improving their health (Hong Kong Government yearbook, 2006). The key feature of a primary health care approach is the shift to teams of providers who are accountable for providing comprehensive services to their clients. There is a growing consensus that interprofessional collaborative practice will result in better health, improved access to services, more efficient use of resources and better satisfaction for both clients and providers. Research evidence suggests that teams are well positioned to focus on health promotion and improving the management of chronic disease (EICP, 2006). Primary health care involves professionals working together and delivering services within the context of the broader determinants of health (e.g. employment, housing, literacy, income and social status, personal health practices and coping skills, etc). The determinants of health are interrelated and are known to impact upon the health status on individuals, families and communities. Effective responses at the primary health care level reduce the need for services at other levels and in other sectors (CCMHI, 2006). A keystone of primary health care is interprofessional collaboration that involves the positive interaction of two or more health professionals to bring their unique skills and knowledge to assist clients, families and communities with their health decisions (CAOT, 2006).

Primary health care emphasizes on the principles of primary healthcare, and primary, secondary & tertiary prevention in the community, with particular focus on health promotion to develop a healthy life styles, and the development and evaluation of health promotion programmes in the context of primary health care. Occupational therapy (OT) contributes to primary health care by promoting health, preventing injury and by addressing occupational performance issues to promote the holistic well-being in physical, mental, emotional, social, and spiritual aspects (Fong & Siu, 2007). For instance, since the emphasis of primary prevention is to reduce the

incidence of disease and injury in the general public, therefore, OT lays a major portion in health promotion by looking at healthy school, healthy workplace, healthy home especially education programmes for seniors. Examples are safety programmes for seniors, modification of workplace for workers, retirement planning and developing leisure for elderly workers, and handwriting training for children in normal stream primary school. Secondary prevention is to reduce the duration of disorders occurring in a population at risk, therefore, potential areas for OT intervention lies in programmes for adolescents with drug abuse, homemakers, elderly with mild cognitive impairment (MCI), and the application of health counseling and stress management for people with neuroses or sleep problems, falls prevention for the elderly, and special developmental training for children with developmental disabilities reintegrating in normal stream primary school. Although the predominant focus of OT lies in tertiary prevention among disabled individuals within the community, models and programmes of lifestyle redesign and self-management for people with disability or chronic illness are highly advocated in the community.

Occupational therapists have a critical role in advocating for access to occupational therapy as a primary health care service. OTs can be employed in the Department of Health for health promotion and running health programmes, in social centres in NGOs for the elderly for healthy lifestyle or home safety screening and education, in normal stream primary school for special training for children, in insurance company for work capacity evaluation for compensation, in large enterprise for occupational safety and health advice and risk assessment (OSH), and in private sector for screening, assessment, guidance, coaching and education for the public embedded under the new health care system. The relationship of occupation and occupational performance to health makes occupational therapy a natural fit with the philosophy of primary health care. Both support the integration of primary health care, health promotion, preventative practices and management of health issues throughout a continuum of health and social services (CAOT, 2006).

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