



Column Editor: Heidi Cramm

The Person-Environment-Occupation Circle Tool: A simple way to bridge theory into practice

Heidi Cramm

Liam, an 11-year-old boy, has anxiety and learning disabilities that challenge his ability to engage in his school occupations.

Charles is a 45-year-old municipal worker who has experienced a low back injury on the job. He has been attending a work hardening program and is about to receive clearance to return to work.

Both individuals are involved with occupational therapy. How might an occupational therapist embed practice in the Person-Environment-Occupation (PEO) model (Law et al., 1996) in a way that is accessible to both Liam and Charles?

Introduction

Clinicians continue to face challenges in implementing occupational therapy theory during client collaboration. Many clients also struggle with our professional domain of interest, focusing on the “therapist” in our title rather than the “occupational” descriptor of our enabling approach. In this article, I propose a simple and practical tool that can help occupational therapists communicate the profession’s unique perspective on occupational performance and broaden the therapeutic process to include barriers in the environment and occupational form.

As occupational therapists may experience discomfort when pressed to use the term “occupation”, they may instead offer supposed synonyms such as “activity” or “function”; such terms fail to fully convey the meaning and purpose inherent in occupation and thereby diminish our profession’s unique contribution to the health and wellness of our clients. By avoiding use of the term “occupation”, we perpetuate the public’s confusion regarding our professional perspective. This tool provides a way to facilitate use of occupational therapy language and communicates the breadth and scope of our potential.

Bridging theory and practice

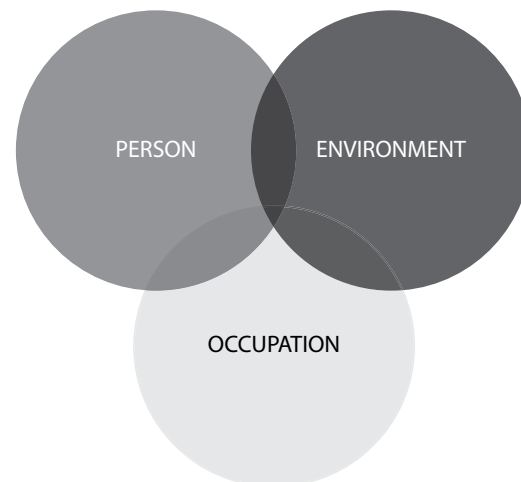
The PEO model (Law et al., 1996) is a well-known and established conceptual model and model of practice within Canadian occupational therapy. It offers a foundation for guiding assessment and intervention across all practice settings and client populations. The proposed tool brings the PEO model to life in the form of a

simple and inexpensive tool that can provide clinicians a practical theoretical foundation for their clinical process. The circle tool acts as a vehicle for describing what occupational therapy is, what the foci are, and what the clinician can provide to the client.

The tool consists of coloured, translucent circles for each of the person, environment and occupation factors (see Diagram 1). The three circles are printed onto an overhead sheet and cut out. The circles can be used in a physical and interactive way to provide occupational therapists and clients a tangible and visual tool that clarifies the foci of occupational therapy. By using the translucent coloured person, environment, and occupation circles, the therapist is able to demonstrate how intervention directed at the person, the oc-

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Diagram 1



cupation, and the environment converges to optimize occupational performance. As the coloured circles overlap, the shared area gets darker so that this convergence is obvious. Therapists and clients are able to move the circles in relationship to one another, focusing if they wish on the person-environment, occupation-environment, and person-occupation dynamics.

Use of this tool places the term “occupation” inescapably at the fore of the interaction, enabling the clinician to inject theoretical knowledge into practice. By framing the relationship using this tool at the outset of the therapeutic interaction, a solid theoretical and practical basis of the relationship is established. Furthermore, using the tool ensures that the therapeutic relationship attends not only to the person, which health care systems can emphasize, but also the environment and the occupation.

Case Scenario #1 – Initial interview with Liam and his mother

Liam has been experiencing considerable difficulties in doing written work at school, has poor spelling, and struggles with organization. He was referred to school health occupational therapy for assessment. Both mother and son are able to engage with the theoretical application, generating examples that might fall under each of the person, environment, occupation components. For example, when talking about the nature of the environment, the boy asks if his school might let him do his tests somewhere quiet outside of the classroom, as he tends to experience high levels of anxiety that interfere with his ability to show what he knows (person-environment).

Despite attending a handwriting group last summer, Liam remains unable to read much of what he prints and cannot do cursive writing. His mother inquires if we could look at changing the nature of the occupation, modifying typical student occupations such as handwriting and organizing written work (person-occupation). She has heard from the school and other parents that some students are getting assistive computer technology to compensate for significant writing and spelling issues, and wonders if this might be an option for Liam (environment-occupation). Liam is relieved that our relationship will not be just about “fixing him” as he believes that if he could just do his written work differently, school would be less stressful.

Case Scenario #2 – Supporting intervention

Charles has been a sanitation worker with the municipality for 22 years. Charles recently injured his low back on the job, having been plagued with low back problems for years. He is almost finished his 6-week work hardening program and has experienced considerable improvement in endurance and reduction in pain. His case manager has reviewed his file and feels that he has made sufficient progress to begin returning to work. Charles is very apprehensive about this recommendation, as he has struggled with his low back for

years. The repetitive nature of the job appears to have created a chronic situation that has limited his ability to engage in some of the activities he had previously enjoyed, such as gardening. He reports that the past

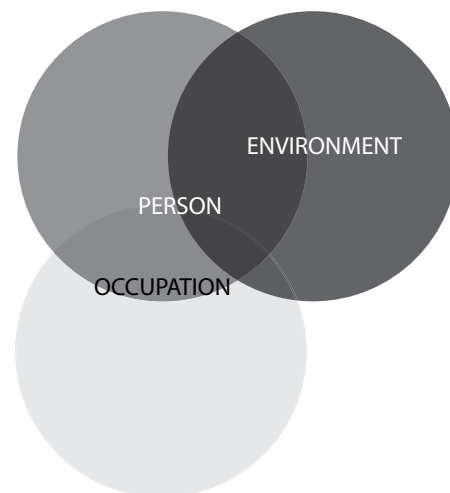
Diagram 2: Optimal P-E-O congruence



few weeks have produced the least amount of pain he can remember, and he fears that a return to his original job will result in losing his gains in reduced pain, improved sleep, and improved tolerance to a variety of physical activities.

The occupational therapist uses the circle tool to allay Charles’ fears that the entire responsibility of successful return to work rests on his physical capacity. In fact, Charles’ tolerance to lifting has improved (person-occupation). The employer will offer modified and

Diagram 3: P-E-O congruence with Person factor targeted.



graded duties to prevent Charles’ symptoms from returning upon resumption of his duties (environment-occupation). He will also start back on an alternate route (person-environment) that is geared to recycling pick up rather than garbage collection.

The combination of factors will likely promote successful participation in the new role. The therapist can use the overlapping circles to show how occupational performance will change if the person, environment, and occupation areas are targeted (see Diagram 2), and compare that favourable overlap to the suboptimal overlap if he were to return to his garbage collection route (see Diagram 3). Should his symptoms return to intolerable levels, a job match will be completed and an alternative municipal position will be offered. By using the circles to demonstrate the shared focus, Charles feels more in control of his return.

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Case Scenario #3 – Interprofessional systems

A new social worker and an occupational therapist work together to plan a new group for parents of children with autism spectrum disorder. Occupational therapists were tasked primarily with fine motor and gross motor interventions at the previous workplace of the social worker. The social worker asks the occupational therapist to describe occupational therapy. The occupational therapist uses the circle tool to describe the different areas occupational therapy can address, and how occupational therapy sees each area affecting the other. The focus on the environment is new to the social worker’s understanding of the scope of occupational therapy practice, and forges an interprofessional alliance in which both disciplines converge on environmental issues. The group is developed with sessions covering modifications to the environment and structure to expectations, drawing firmly on the environment and occupation areas of the person, environment and occupation.

Conclusion:

By quickly creating the PEO circle tool, an occupational therapist can have access to a simple and user-friendly vehicle for explaining occupational therapy’s areas of interest. Its interactive nature allows clients across age groups to see how focus on environment and occupation, in addition to the traditional person and performance-component targets, can dramatically shift outcomes. Grounded in current theory, it helps occupational therapists to feel comfortable in using the term “occupation” and to expand focus outside the person.

How-to

For a colour version of the tool, please visit <http://www.caot.ca/images/peocircletool.jpg>

The circle tool may be printed onto transparencies using a coloured printer (laser recommended for durability). Cut the circles out of the transparencies, and you will have your own Circle Tool.

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Reference

Law M, Cooper B, Strong S, Stewart D, Rigby P, Letts L. (1996). The Person-Environment-Occupational Model: A transactive approach to occupational performance. *CJOT* 63(1), 9-23.

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