Occupational therapy practice and patient/client participation in religious occupations: a scoping review protocol
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Occupational Therapy and client participation in religious practices; A scoping review.

Review objective

The objective of this scoping review is to identify and map information about how occupational therapists address their clients' perceived and experienced barriers to participation in religious occupations as part of occupational therapy intervention.

The questions that this review seeks to answer are

1. What are the conceptual understandings of religious practice as an occupational need?
2. What assessments, interventions and outcome measures do occupational therapists use concerning their patients/clients participation in religious occupations?

Background

Religion, despite its perceived decline in the West, is proliferating across the world. In 2012, based on analysis of more than 2,500 censuses, surveys and population registers worldwide, the Pew Research Center’s Forum on Religious and Public life concluded that 84% of the global population identified with a religious group. These projections take into account the current size and geographic distribution of the world’s major religions, age differences, fertility and mortality rates, international migration and patterns in conversion. Furthermore the religiously unaffiliated population is projected to shrink as a percentage of the global population.

Religion is a global concept. Some people have a personal and deeply held faith; others may choose to engage in religious ceremonies linked to life transitions, such as marriage or funeral rites, while many more will be aware of buildings related to religious worship within their communities. Religious plurality is increasing, with growing ethnic and cultural diversity within many communities across the world, together with a global increase in emergent spirituality, and more conventional religious traditions. The degree to which religion impacts our lives is personal and individual, complex and variable; and for some it constitutes regular and meaningful activity.

Participation in religion across the world is also linked to positive health outcomes. There are a growing number of studies suggesting that religious involvement is associated with better physical and mental health, and with longevity. Within the field of occupational therapy Stav et al. conducted a systematic review of the health benefits of engagement in occupations and activities among older adults. They concluded that one significant occupational area was participation in religious activity. The health behaviors of members of faith communities, such as lower levels of smoking and alcohol consumption, are reported as a positive aspect of religious practice, and
membership of a faith community or church ‘family’ is reported to contribute to a sense of wellbeing. The World Health Organization’s (WHO) concept of health, articulated within the International Classification of Functioning (ICF), recognizes this sense of belonging as a significant factor related to activity participation and therefore health. However in a review of empirical studies, in 2008, Hill and Pargament, suggested that religion and spirituality were under-studied variables in health related research. Since this time there has been some growth in research in this area and in particular there is now a body of research within nursing, psychology and social work. At the same time religion has been the subject of some discussion within occupational therapy literature as illustrated by Farah and McColl in 2008 who asked “is prayer an occupation that we are prepared to help clients resume?” However four years later Bray, Egan and Beagan found that “attention specifically to religion and occupational therapy is scant”. Hocking identified the need to build the occupational knowledge base to ‘dispel normative assumptions’ about everyday occupations and inform practice. In the area of religious practice this has become an increasing priority due to the increase in participation in religious practice globally. Courtney, when reviewing the literature on pilgrimage called for further research into religious practices as a complex group of occupations. It is therefore argued that a focused scoping review is needed to look specifically at religious practice within occupational therapy.

This scoping review will explore religious practice as an everyday occupation for people, within the scope of practice of occupational therapists. Occupational therapists view people as occupational beings, meaning that our lives are defined by the things that we do, and as such, people are intrinsically active and creative, and need to engage in a balanced range of activities in their daily lives. Thus participation in everyday activities that are meaningful, generally contributes to health and wellbeing. The World Federation of Occupational Therapists (WFOT), state

“The primary goal of occupational therapy is to enable people to participate in the activities of everyday life. Occupational therapists achieve this outcome by working with people and communities to enhance their ability to engage in the occupations they want to, need to, or are expected to do, or by modifying the occupation or the environment to better support their occupational engagement”. (para 1)

While key aspects of everyday life will differ between cultures, the generally positive relationship between occupation, health and wellbeing is a fundamental concept for occupational therapists. When reporting on the recent Terminology Project Group of the European Network of Occupational Therapy in Higher Education (ENOTHE), Creek concludes a consensus definition for occupation as

“A group of activities that has personal and sociocultural meaning, is named within a culture and supports participation in society”. (p.68)

The occupation of concern within this scoping review is religious practice and a clear differentiation between spirituality and religiosity will be made to ensure the required focus for the review. Spirituality
and religion are terms that are frequently used together and often ill-defined.\textsuperscript{20} For example, WHO have developed a Quality of Life instrument,\textsuperscript{21} specifically related to spirituality, religion, and personal beliefs; concepts which they group together. This includes assessment in areas concerning inner peace, faith, hope and optimism, and spiritual connection. It was developed across 15 countries but has been criticized for only looking at four of the world’s religions, in its development. Hoyland and Mayers,\textsuperscript{22} considered whether meeting spiritual need was within the occupational therapy domain and they concluded that spiritual care is considered to be part of holistic occupational therapy practice but that clinicians were frequently ‘uncomfortable’ with spirituality and had a lack of understanding of the concept. When asked to give examples of spiritual care, participants included religious practices such as attending services, prayer and reading religious texts; further demonstrating a difficulty in differentiating religious issues from spiritual issues.

To aid a clear differentiation between spiritual practice and religious practice, a search has been made for a definition of religious practice to be used within this scoping review. It has been concluded that the definition proposed by the The Royal College of Psychiatrists’ Spirituality Special Interest Group,\textsuperscript{23} is both clear and explicit. This definition includes both ceremony, ritual and tradition, while also recognizing the social aspect of religious practice. Therefore for the purposes of this study religious practice will be considered to encompass

“Activity directly linked (by the practitioner) to beliefs, traditions, ritual and ceremony – but also to include activities that they define as bringing them an individual sense of connection and belonging to a faith group”.\textsuperscript{21(p 4)}

Activities such as attending religious worship, prayer or meditation, reading religious texts, performing ritual and religious ceremony, and participating in social gatherings related to a religious community will all be accepted as religious practice. Terminology may not be used consistently and language can be a challenge when trying to understand religious practice. Jones,\textsuperscript{24} asserts that religious doing is in many ways a more helpful term than religious practice as it distinguishes between the act and the meaning. He cautions that it is futile to attempt to uncover the meaning of religious practice when that meaning is constructed on a deeply personal level by the practitioner and can never be truly understood by another individual. This scoping review does not intend a theological exploration of religious meaning but rather an occupational exploration of religious doing. The focus here will be on how the religious practice of their patients is understood by occupational therapists within the context of meaningful occupation, and how this aspect of everyday occupation is assessed, included within intervention, and how outcomes are measured.

Much of the available information to broaden our knowledge of religious doing is focussed on the factual/tangible components of a faith tradition – the rules, the practice, the ceremonies and the key dates. This is limited in providing a rich ‘lived’ perspective and an understanding of the individuals’ unique needs as part of their health and wellbeing. A more confident, inclusive concept of religious ‘doing’ is needed to help occupational therapists to work with patients from religious groups outside of
their own experience, and address the reported lack of confidence and knowledge that occupational therapists feel concerning this potential area of practice.\textsuperscript{22}

For those people for whom religious practice is a meaningful activity, any barrier to participation, has the potential to impact their health and wellbeing and as such engagement in activities related to religious practice falls within the remit of occupational therapists. A scoping review has been selected as a methodology here as a way of examining this broad area, mapping the key concepts, bringing together and mapping the literature, and identifying gaps in the knowledge base.\textsuperscript{25, 26}

An investigation of the JBI Database of Systematic Reviews and Implementation Reports, Cochrane Database of Systematic Reviews, and PROSPERO has indicated that there are no existing scoping reviews or systematic reviews specifically related to occupational therapy intervention within the area of religious occupations. Occupational Therapy has an increasingly diverse literature base\textsuperscript{27} dominated by a number of peer reviewed journals published through occupational therapy professional associations or university research groups. In addition a number of professional associations also publish periodicals aimed at ensuring practitioners are kept up to date with practice developments, policy changes and evidence based practice\textsuperscript{28} OTNOW published in Canada is representative of this type of grey literature and sites among its objectives to ‘challenge day to day practice, and encourage debate and discussion’.\textsuperscript{28} In a review of occupational therapy journals in 2010, Potter\textsuperscript{27} concluded that CINAHL and MEDLINE provided comprehensive coverage of the field. Since 2010 a number of occupational therapy periodicals have also been indexed on these databases. Preliminary investigation of these peer-reviewed journals such as the British Journal of Occupational Therapy, the American Journal of Occupational Therapy, The Canadian Occupational Therapy Journal and international journals such as Occupational Therapy International and the Journal of Occupational Science has produced a small amount of literature covering this subject area. It is however recognized that relevant literature related to practice, may also be found in grey literature such as practice periodicals (OTNews (UK), OT Now (Canada) and OT Practice (USA)), and this type of ‘grey literature’ publication will be included to ensure the widest possible scoping review.

**Inclusion criteria**

Occupational performance is defined as the accomplishment of the selected occupation resulting from the dynamic transaction between the person, the context and environment, and the activity or occupation.\textsuperscript{18} This scoping review will consider papers by occupational therapists or occupational therapy researchers or occupational scientists that may be research or practice based and, may or may not include participants.

**Types of participants**

Where studies do include participants, this scoping review will consider studies that include adults (over 16 years of age) who have experienced barriers to religious practice as part of their occupational performance needs.
Concept

This scoping review will focus on the concept of religious practice including (but not limited to) activities such as attending religious worship, prayer or meditation, reading religious texts, ritual and religious ceremony, and attending social gatherings related to a religious community, that are explored from an occupational perspective. This scoping review will consider studies that evaluate, comment on, or explore religious practice activities within peoples’ everyday lives. Papers from occupational therapy or occupational science that conceptualize religious practice as an everyday occupation will also be included. The assessments, interventions and outcome measures used by occupational therapists, concerning participation in religious practice, will be included together with case reports and practice commentary.

Papers that deal with the way spirituality is explored during occupational therapy education and the spiritual or religious needs of practitioners will be excluded.

Context

Occupational Therapists work within a broad range of contexts including health and social care settings, community projects, schools, and prisons. This scoping review will look widely across all settings in any geographic area/country, however the authors do not have the resources to consider papers that are not printed in the English language and it is acknowledged that this may cause a geographic restriction.

Types of sources

For the purposes of this scoping review, the source of information will be ‘open’ allowing for the inclusion of (but not necessarily limited to) primary research studies, including quantitative and qualitative designs, and systematic reviews. Other texts such as opinion pieces, discussion papers, position papers, and practice guidelines, will also be considered.

Search strategy

The search strategy aims to find both published and unpublished studies. A three-step approach is proposed in line with JBI recommended methodology. An initial search of CINAHL and MEDLINE followed by an analysis of the text words contained in titles and abstracts, and the index terms used, has informed the terms used in the search strategy. An example of a search strategy has been appended (see appendix i). Secondly these terms will be used to search within all text in all databases to ensure the fullest coverage. It is accepted that an iterative approach may be needed and further search terms may be discovered and added to the search strategy. Thirdly the reference lists in all included articles will then be used to access any additional items. In addition authors will be contacted for further information as required. In order to ensure the fullest possible coverage no publication date restriction will be used. Only English language materials will be included as the
The databases to be searched include:

CINAHL
MEDLINE (EBSCO host)
AMED
EMBASE
PsycINFO
Soc index
SCOPUS
OTSeeker

In order to search within ‘practice’ focused grey literature to ensure this is also included, additional searches will be made within practice publications such as

OT News (British Association of Occupational Therapists (BAOT))
OT Now (Canadian Association of Occupational Therapists (CAOT))
OT Practice (American Occupational Therapy Association (AOTA))

And the Royal College of Occupational Therapists library (London).

Text books identified as core texts by the World Federation of Occupational Therapists (WFOT) accredited occupational therapy training programs will also be searched.

The search for unpublished Dissertations and Thesis will include:

ProQuest Dissertations & Theses
EthOS (British Library Theses online service)

The search for further grey literature will include:

Google
Open grey (SIGLE)

Initial keywords to be used will be:

Religion; religious practice; worship; spirituality; faith; belief; occupational therapy; occupational science; participation; engagement; involvement; assessment; intervention; outcome.

Additional search terms will be incorporated if early searches suggest any useful additional terms.
Extraction of the results

The number of studies identified and included in the scoping review will be reported in a search decision flowchart.\textsuperscript{25} Data will be extracted from papers included in the review using a data extraction tool aligned to the protocol objectives and, as indicated by the methodology for scoping reviews developed by the Joanna Briggs Institute.\textsuperscript{26} A data extraction instrument has been developed specifically for this scoping review (Appendix ii) which will be used to extract the relevant data from each paper.

The data extraction form will initially contain the following headings:

- Author
- Year of publication
- Origin/country
- Source
- Aim/purpose
- Study population/sample size (where applicable)
- Context
- Definition of religious practice
- Description of activity
- Assessment used (where applicable)
- Outcomes (where applicable)
- Findings/results/recommendations
- Implications for Occupational Therapy
- Recommendations for further study

The use of the extraction form will be piloted by two reviewers on three papers initially and where indicated changes will be made. However it is acknowledged that there may be further refinements added to cover any data not initially included that becomes relevant during the extraction process. Data from all included studies will then be charted by the first reviewer and extraction checked by the second reviewer. Any disagreement will be resolved through discussion or the use of a third reviewer.

Presentation of results

The extracted data will be presented in a tabular form that aligns with the objectives of this scoping review. A narrative summary will accompany the tabulated and/or charted results and will describe how the results relate to the review objectives. A draft data presentation table has been developed for this scoping review (Appendix iii), however this may be further refined for use during the review process. It is anticipated that this scoping review will bring together evidence from disparate sources to provide an overview of existing evidence and practice.

Conflicts of interest

There are no conflicts of interest.
Acknowledgements

Support from the School of Health Professions, Plymouth University who have funded the PhD of the first author.

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References


Appendix i

CINAHL search strategy for text words

Religio* captures: Religion, religious, religiosity, religious beliefs, religious practice, religion and culture

“ “ used around occupational therapy and occupational science to ensure just the words therapy or science are not included.

<table>
<thead>
<tr>
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<th>Field:</th>
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<tr>
<td>AND “occupational therapy” or “occupational science”</td>
<td>All text</td>
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<tr>
<td>AND Participation or engagement or involvement</td>
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<table>
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<td>AND “occupational therapy” or “occupational science”</td>
<td>All text</td>
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<td>AND “occupational therapy” or “occupational science”</td>
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<td>AND Assessment or intervention or outcome</td>
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This search will be repeated using the field for index terms and the results combined.
### Appendix ii Data Extraction tool

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<td>Assessment used (where applicable)</td>
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<td>Outcomes (where applicable)</td>
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<td>Findings/results/recommendations</td>
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<td>Implications for Occupational Therapy</td>
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<td>Recommendations for further study</td>
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### Appendix iii Summary of results form

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<th>Study population, sample size</th>
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