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#### **Research Paper**

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# Influence of occupational therapeutic activities for developing skills for independent living in cildren using social service

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ABSTRACT: The aim of the present study is to determine the impact of additional occupational therapy activities on the formation of skills for independent living in children raised and educated in social services. Scope of the study: 27 children aged 13 to 19 years, users of social services in Pleven, Bulgaria were studied. Research methods and tools: Functional research – test "Skills for independent living", which includes 4 groups of activities: "Proper nutrition"; "Maintenance of hygiene"; "Appropriate clothing and appearance"; "Management of personal funds". The evaluation is on a 3-point scale. Statistical methods – t-test of Student. Results: The final results of the test show an improvement in all examined children, and in 1/3 of them there is an improvement between 0.5 and 1 degree (within the degree of 2.64 – 2.91), which is statistically significant in 3 degree scale. In 11 (40.47%) of the children a degree below the average level was registered (within 1.15 – 1.91), and in the remaining 16 the results were around the "average level" (2 degree). In the final testing, identical results are reported with an improvement in the average values of the individual groups of activities. Conclusion: The inclusion of appropriate occupational therapy activities for the formation of skills for independent living in children raised and educated in the "Family-type accommodation center" has a beneficial effect on the overall personal development and formation of social skills.

KEYWORDS: independent life, social service, occupational therapy activities

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#### I. INTRODUCTION

In connection with work on a research project, a Program for inclusion of occupational therapy activities in medical and social rehabilitation of children using the social service "Six Centers for Family-Type Accommodation - Pleven", Bulgaria has been developed and tested in practice. To participate in the Project are included: 21 children aged 7 - 12 years, 27 children aged 13 - 19 years and 24 young men and women with disabilities (physical and intellectual). The aim of the research project is to describe effectiveness of including occupational therapy activities in the process of interaction with children raised and educated in family-type accommodation centers. The activities planned in the Program are carried out by a research team formed by lecturers and students from MU - Pleven, together with the support of the employees of the social service. The objective of this scientific communication are the results of the tests for "Formation of skills for independent living in children using social services" in the age group from 13 to 19 years. Current research in the field of social services for children gives reasons to assume that children raised and educated in the "Center for familytype accommodation" need additional targeted activities to learn and improve the various activities of everyday life [1, 2, 3, 4, 5]. Activities with a variety of work and household activities have a positive effect on building skills for independent living, as well as improving the quality of care in social services [6, 7]. The current legislation of the Republic of Bulgaria determines the need for inclusion in the practice of ergo- and occupational therapy programs that stimulate the process of individual development of children placed in a family-type center. Applying appropriate activities improves the quality of independent living in everyday life.

The **aim of the present study** is to indicate the impact of additional occupational therapy activities on the formation of skills for independent living in children of middle and upper school age, raised and educated in social services.

#### II. METHODS

### Scope of the study

Regardless of the created pandemic situation and the imposed anti-epidemic measures of physical and social isolation, the issue of forming skills for independent living of children raised and educated in social services remains relevant. The study included children, users of the social service "Family-type accommodation center" in the Municipality of Pleven, Republic of Bulgaria. 27 users aged 13 to 19 years were studied, of which 16 were female and 11 male (gender is important in the selection of appropriate work and household activities).

#### Research methods and tools

- Functional research (compliant with the age of the children), which includes: test "Skills for independent living"; Health Care Test and Leisure Management Test, taking into account the results from the end and the beginning of the observed period on a 3-point scale: 1 low level, 2 average level, 3 high level. The signs (+) and (-) are placed with an incomplete whole degree.
- Statistical methods the obtained results were processed with the statistical program SPSS, the t-test of Student was studied. The significance of the results for conclusions was set at p < 0.05. The subjects received a personal number (PN from 1 to 27) in alphabetical order of their own names.

All participants involved in the monitoring filled in an informed agreement about the program and research tests for scientific purposes.

The working hypothesis of the study is: the applied occupational therapy program will have a positive effect on the development of skills for independent living in children of middle and upper school age, raised and educated in social services.

#### III. RESULTS

The developed and tested occupational therapy program is compliant with the age and individual characteristics of the users of social services and was conducted in the period June 2020 – May 2021 [8]. For the purpose of this Communication, only the results of the "Independent Living Skills" test are reported and analyzed, in which the following groups of activities are identified:

- 1. "Skills for proper nutrition" acquisition of skills for rational nutrition; knowledge of eating disorders (anorexia, bulimia); acquisition of skills for safe handling of kitchen utensils and equipment; skills for preparing easy and healthy meals; aesthetic food presentation skills; skills for proper table setting and serving.
- 2. "Hygiene skills personal and public" obtaining cosmetic knowledge and care for skin, hair and teeth; knowledge of personal hygiene supplies (shaving, nails, hair, sanitary napkins); knowledge and proper use of preparations for maintaining personal and household hygiene; skills for maintaining order and cleanliness in living quarters; knowledge and observance of public hygiene norms (environmental protection).
- 3. "Skills for appropriate clothing and appearance" acquisition of skills for the selection of appropriate clothing, footwear and accessories, according to the season and the specific occasion, figure and gender; skills for self-cleaning and maintenance of clothes.
- 4. "Skills for managing personal funds" building skills for proper assessment of prices of goods and services (expensive, normal, cheap); personal budgeting skills (income/expenditure); skills in the methods of payment (cash, debit card, bank transfer).

The obtained data from the beginning and the end (before and after the application of the occupational therapy program), as well as the difference from the end and the beginning of the studied period (improvement) are subjected to statistical processing. The arithmetic mean (X) of the numerical image from the corresponding test scale is used.

Figure 1 presents the average values of the individual results of the studied children at the beginning and at the end of the study, which shows an improvement in the independence of all studied children. At the end of the observed period, only 4 of the results (14.81%) were below the "average level", which is due to the very low initial level (1.33; 1.64; 1.69; 1.32), most probably this was a result of the shorter stay of the children in the social service. At the end of the study, 8 of all observed children (29.63%) reported a degree in the range of 2.64 – 2.91 ("high level") in the test for "Developing skills for independent living" as a result of activities of an individual occupational therapy program. The remaining 14 children (51.85%) show final data around the "average level", which is due to low input scores and the specifics of their individual characteristics. The graph shows that 10 of the children have an improvement between 0.5 and 1 degree (37.04%). In 2 (7.41%) of them (PN 10 and 14) there was an improvement over 1 degree, which can be explained by the very low initial level due to negative conditions in the family environment, low personal and health culture of parents and lack of interaction of educational factors before the child enters the social service. In 7 of the surveyed children (25.93%) the reported improvement is insignificant, within the statistical error, which can be explained by the higher initial evaluation, which is a result of the longer stay of the users in the social service. The other

participants in the study showed an improvement in the range of 0.18 to 0.30, which is the average level of improvement.

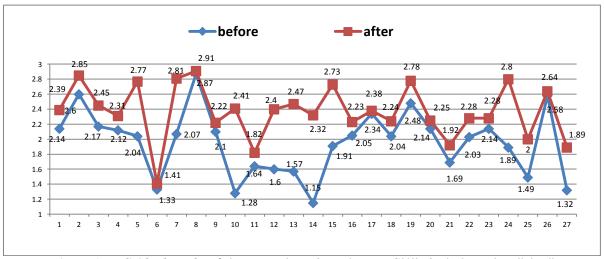


Figure 1 Individual results of the respondents from the test "Skills for independent living" before and after the program

Figure №2 shows the individual results of the difference from the end and the beginning of all examined children, which shows an improvement in the final values of the overall assessment, as 10 of the children have an improvement between 0.5 and 1 degree. In 2 of them (PN 10 and 14) an improvement over 1 degree was reported, which can be explained by the very low initial level due to negative conditions in the family environment, low personal and health culture of the parents and lack of interaction of educational factors before the child enters the social service. In 7 of the surveyed children the reported improvement is insignificant, within the statistical error, which can be explained by the higher initial scores, which is a result of the longer stay of the users in the social service. The remaining 10 participants in the study showed improvement within the average level.

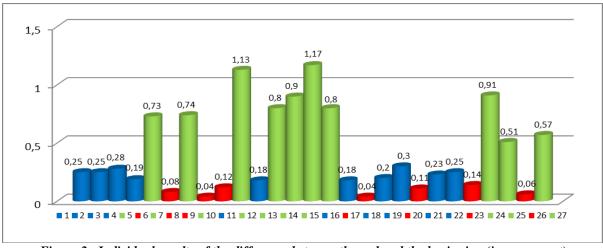


Figure 2 Individual results of the difference between the end and the beginning (improvement) in all subjects

Figure Ne3 shows the results of the test by groups of activities at the beginning and end of the observed period, as well as their improvement. The graph shows the identity of the skills for independent living in the different groups of activities. For example, in the first group of activities ("Nutrition skills") the results are most likely due to the studied indicators related to rational nutrition. The formation of such skills requires a longer period of time, sustainability of acquired knowledge and building habits for proper nutrition. The improvement in the fourth group ("Money and shopping skills") is within the "average level" and can be explained by the lower opportunities for children to manage their personal funds. The pandemic situation has complicated the work process on this topic.

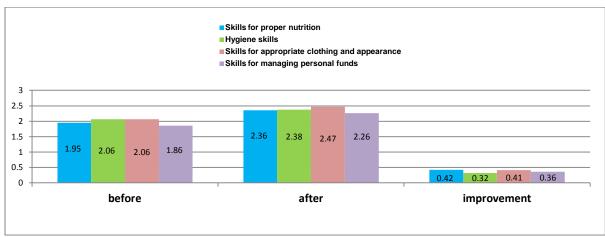


Figure 3 Results of the test "Skills for independent livin" by groups of activities – the improvement of the program

Figure No4 shows improvement in all sections of the test and proves the effectiveness of the implemented program in Family-type Accommodation Centers. The acquisition and improvement of new knowledge and skills during the epidemic situation create conditions for purposeful, organized and filled with diverse content activities to build skills for independent living.

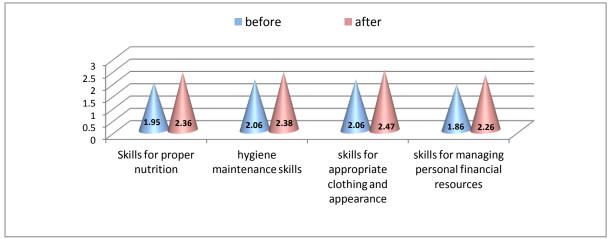


Figure 4 Results of the test "Skills for independent livin"" by groups of activities at the beginning and end of the observed period (improvement)

Table 1 presents the data from the statistical processing of the results of the test "Skills for independent living" from the beginning, the end and the difference (improvement) of the observation by groups of activities.

Table 1 Results of the statistical processing of the test "Skills for independent living" by groups of activities

| Table 1 Results of the statistical processing of the lest Skills for independent living by groups of activities |    |                                  |      |       |                            |      |       |                                    |      |       |         |
|-----------------------------------------------------------------------------------------------------------------|----|----------------------------------|------|-------|----------------------------|------|-------|------------------------------------|------|-------|---------|
| Groups<br>activities                                                                                            | n  | Beginning of the observed period |      |       | End of the observed period |      |       | Improvement in the observed period |      |       | t-test  |
|                                                                                                                 |    | $\bar{\mathbf{x}}$               | s    | CI    | $\bar{\mathbf{x}}$         | s    | CI    | $\bar{\mathbf{x}}$                 | s    | CI    |         |
| 1. Skills for proper nutrition                                                                                  | 27 | 1,95                             | 0,50 | ±0,19 | 2,36                       | 0,42 | ±0,16 | 0,42                               | 0,39 | ±0,15 | 0,00164 |
| 2. Hygiene skills – personal and public                                                                         | 27 | 2,06                             | 0,36 | ±0,13 | 2,38                       | 0,41 | ±0,15 | 0,32                               | 0,29 | ±0,11 | 0,00303 |
| 3. Skills for appropriate clothing and appearance                                                               | 27 | 2,06                             | 0,42 | ±0,16 | 2,47                       | 0,37 | ±0,14 | 0,41                               | 0,37 | ±0,14 | 0,00048 |
| 4. Skills for managing personal funds                                                                           | 27 | 1,86                             | 0,53 | ±0,20 | 2,26                       | 0,43 | ±0,16 | 0,36                               | 0,39 | ±0,15 | 0,00387 |
| Total                                                                                                           | 27 | 1,95                             | 0,43 | ±0,16 | 2,36                       | 0,36 | ±0,13 | 0,41                               | 0,35 | ±0,13 | 0,00035 |

By groups of activities there is a slight difference in the initial values within 0.2, taking into account a slight predominance of the second and the third group of activities (hygiene and dressing – 2.06). The results in all groups are within the "average level" for basic skills for independent living. In the final results the trend is similar and is within 2.38; 2.47 for the second and third group of activities, which is significant on a 3-point scale (more than "average level"). Slightly lower results are in the first group of activities ("Skills for proper nutrition") – 2.36, which is most likely due to the studied indicators related to rational nutrition. The formation of such skills requires a longer period of time, sustainability of acquired knowledge and building habits for proper nutrition. The improvement in the fourth group ("Money and shopping skills") is 2.26, which is within the "average level" and can be explained by the lower possibility of children raised and educated in social services to have access to personal funds and to do independent shopping and communication in retail outlets. The data from the statistical processing of the results confirm the working hypothesis that the applied occupational therapy program has a positive effect on the development of skills for independent living in children raised and educated in social services.

#### IV. DISCUSSION

Studies on the problems of children raised and brought up in social services show that to varying degrees they are at risk of lagging behind and insufficient development of skills for independent living [9]. Policies aimed at these children require a strategy for protection, social security and support for their successful implementation, based on predicting their development. Preparing for independent living is part of the overall process of working with children receiving social support. Planning the transition to independent living is a process of managing the change associated with their personal growth and helps to ease the adaptation to new realities associated with increasing responsibility and strengthening the independence of the individual [4]. The implementation of a set of activities for the formation of skills from everyday life is a priority goal in the work of responsible institutions and specialists to improve the quality of child care. This goal is at the heart of the legislative framework [10] guaranteeing children's rights, as well as national strategies, plans and programs for their implementation in social practice.

As a result of a research project G. Mehandzhiyska points out that occupational therapy and therapeutic recreation are used among the range of interventions in clinical social work and have methodological and functional potential to serve the purposes and needs of consumers [11].

The social service is differentiated as a therapeutic environment, in the center of which stands the child with his individual characteristics and needs. Practical and applied activities for the formation, development and enrichment of skills and competencies for independent living are organized and conducted.

#### V. CONCLUSION

The inclusion of appropriate ergotherapy and occupational therapy activities for the formation of independent living skills in children, raised and educated in the "Family Accommodation Center" has a beneficial effect on overall personal development and social skills. The diverse and meaningful activities provided in their individual programs support the process of acquiring a set of knowledge and skills that they will need in the future independent life.

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