

# USC

## Occupational Science and Occupational Therapy Magazine

SPRING 2014

### FEATURED STORIES

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#### 120 Pounds Lighter

*Lifestyle Redesign Success*  
David Morrison

#### Fight On!

Sarah-Jeanne Salvy  
vs. Obesity

#### A Team Player

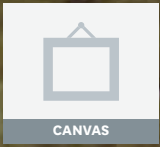
Dr. Michelle Farmer blazes  
a trail in primary care

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### NEW COLUMNS

Ann Neville-Jan finds A Deeper Meaning  
Jesús Díaz has Research Buzz

**#1** | Ranked *U.S. News & World Report's*  
top occupational therapy program



**ROOM WITH A VIEW** | Early last year, the Occupational Therapy Faculty Practice opened a new office. Overlooking the northwest corner of USC's University Park Campus, the new faculty practice took up residence on the fourth floor of the state-of-the-art Engemann Student Health Center. With the move, *Lifestyle Redesign* services—such as weight management, diabetes and life coaching—are just steps away for much of the USC community. Pictured here: Occupational therapist Myka Winder '07, MA '10, OTD '11 (left) conducts a one-on-one consultation with a USC student in the practice's group room.

PHOTO BY JOHN SKALICKY



## DEAR ALUMNI AND FRIENDS,

Welcome to the latest iteration of the *USC Occupational Science and Occupational Therapy Magazine*! I hope you've had a happy and healthy start to 2014.

As the adage goes, the only constant is change. That couldn't ring more true here at the USC Division of Occupational Science and Occupational Therapy. With new renovations to our laboratory spaces, facelifts to hallways and offices and the auspicious launch of programming such as our Summer Occupational Therapy and English program (read more on page 7), there have been endless projects, events and challenges for our faculty, staff and students to tackle. As expected, they do so with the competence and confidence trademark of Trojans everywhere. Kudos, also, to our faculty leaders who recently completed year-long preparation processes for the Division's recurring accreditation and academic reviews. While news regarding outcomes of these reviews will be forthcoming, the early signs are extraordinarily positive.

As our vision statement declares, at USC we aim to develop expert, compassionate leaders who improve the health and well-being of individuals and society. This issue of the magazine focuses on the myriad ways that Trojan occupational scientists and occupational therapists are leading the fight against obesity by helping others manage their weight through healthier, more active and, ultimately, longer and happier lives.

Inside this issue, you will read, in her own words, about the work of Dr. Sarah-Jeanne Salvy, one of our newest faculty members and an expert on childhood obesity. Learn about our profession's officially adopted position on obesity, which was authored by Dr. Katie Jordan. Catch up on research published by Dr. Sharon Cermak and PhD candidate Amanda Foran on physical activity, weight and participation of Latina girls. And meet our cover model, David Morrison, whose life has been transformed thanks, in part, to USC *Lifestyle Redesign* occupational therapy services.

And as always, thank you for your continued dedication to your patients and clients, to our invaluable professions and to the University of Southern California.

Fight On!

**FLORENCE CLARK PHD '82, OTR/L, FAOTA**  
**ASSOCIATE DEAN, CHAIR AND PROFESSOR**  
**USC DIVISION OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY**  
**OSTROW SCHOOL OF DENTISTRY OF USC**



## 04 Autism and the Dentist

Could occupational science help ease dental-chair anxiety for children with autism?

## 06 Keeping Trojans Healthy Long Into their Golden Years

Inside USC Emeriti Center's Fit for Life symposium



## 07 News Briefs

Keep your finger on the pulse of what's going on at the USC Division of Occupational Science and Occupational Therapy.



## 08 Research Buzz

With help from a Christopher & Dana Reeve Foundation grant, Adjunct Research Assistant Professor Jesús Díaz and his research team are working to develop an app that would help manage pressure sores.



## 10 Shadow of His Former Self

Gastric bypass helped him drop 120 pounds. Regular meetings with his occupational therapist helps him keep it off. Meet *Lifestyle Redesign* success story David Morrison.

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### THE OFFICIAL PUBLICATION OF THE USC DIVISION OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY

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# USC University of Southern California



## I4 Tipping the Scales

How Associate Research Professor Sarah-Jeanne Salvy's scientific discoveries could deal a serious blow to obesity in America's epidemic-level battle against the bulge.



## I8 There Is No Health Without Mental Health

Assistant Professor of Clinical Occupational Therapy Deborah Pitts details the work being done to strengthen occupational therapy's role in the U.S. mental health care system.



## 20 A Real Team Player

At USC-Eisner Pediatric and Family Medical Center, Assistant Clinical Professor Michelle Farmer is blazing a trail for occupational therapy by practicing in team-based primary care.



## 24 In Print

Among the Division's many published articles and book chapters this issue is Sharon Cermak's co-authored piece about the psychosocial determinants of Latina middle-school girls' activity levels, published in *Hispanic Health Care International*.

## 28 A Deeper Meaning

Faculty member Ann Neville-Jan discusses some of her life's inspirations in this inaugural column devoted to finding deeper meaning.

### CONTRIBUTORS

#### ROB RUSSOW MA '14



Chicago-native Rob Russow worked as an ESPN reporter covering fishing tournaments before he changed careers altogether. He hopes to work with older adults and continue studying disability, aiming to work in academia. His favorite occupations include baking, reading, hiking, walking barefoot and teaching people how to juggle. We gave him one more occupation this issue: write an article on how occupational therapy can alleviate dental chair anxiety for children with autism. Read it on page 4.

#### ANN NEVILLE-JAN



Ann Neville-Jan joined the Division in the late 1980s. In the 25 years since, she's taught courses in nearly every facet of occupational science, with emphases in mental health, occupational science theory and disability studies. Outside the classroom, her primary research areas include depression, chronic pain and secondary conditions associated with disability. We asked Ann to share with us what inspired her to a career in occupational therapy with a new column entitled *A Deeper Meaning* on page 28.

#### JESÚS DÍAZ '05, MA '08, OTD '09



Jesús Díaz is a super Trojan, having earned his undergraduate, master's and doctorate degrees at USC. Jesús balances his time between doing early occupational therapy intervention services for children and serving as a research assistant professor with the Pressure Ulcer Prevention in Spinal Cord Injury Study. On page 8, Jesús shares some exciting news about a smart phone app his team is developing to improve the quality of life for those suffering from pressure ulcers.

#### DEBORAH PITTS PHD '12



Assistant Professor of Clinical Occupational Therapy Deborah Pitts sits at the intersection of psychiatry and occupational therapy. With expertise in schizophrenia, psychosocial rehabilitation and community support groups as well as a keen interest in how occupation influences recovery for those labeled with psychiatric disabilities, she seemed the ideal writer to pen an article on the contemporary landscape of mental health care in California and the nation. Read her take on page 18.



# AUTISM AND THE DENTIST

## How occupational science could help alleviate dental office fears for children with autism

BY ROB RUSSOW MA '14

For children with autism and their parents, the negative experiences surrounding the twice-yearly dental visit can be profound and long-lasting.

“The first time we took him to the dentist, when I heard him screaming from the front, I understood how bad it was,” said Peter\*, father of 10-year-old Tate. “They had him in restraints, and my wife was in tears.”

The situation Peter faced is nothing new for parents of children with autism. Oral care is one of the biggest issues facing parents, contributing to overall health and wellness.

Nearly two-thirds of parents of children with autism reported “moderate to extreme” difficulty with oral cleaning at the dental office, according to a 2010 survey of nearly 400 Southern California respondents. The same survey showed that nearly three-quarters had difficulty with toothbrushing at home.

Comments from parents help shed some light on a number of issues their children face at the dentist.

“As soon as we put him in the chair, he started freaking out,” said Andrea, mother of 4-year-old Evan. “It’s funny because he likes to touch other people, but he doesn’t let other people touch him.”

Cindy, mother of 6-year-old Laken, said, “The chair was an issue. He got more anxious when he had to lean back.”

Andrea and Cindy’s stories point to the senses as a big trigger for their children.

With its whirring dental drills, bright operatory lights and overpowering minty smells, a dental office can produce sensory overload.

Typically, a child’s brain responds congruently to these stimuli, but some children with autism deal with sensation

differently. The atypical processing of sensory information can lead to children either under- or over-responding. The concern at the dental office is for children who over-respond.

The reason Evan freaked out when touched and Laken felt anxious when leaning back could be due to over-responsiveness.

In a stimulating environment like the dental office, children’s responses can range from physical withdrawal to aggressive behavior including outbursts and tantrums. Many dentists simply aren’t prepared to deal with that.

“I got rejected from my own dentist,” said Tanya, mother of 8-year-old Roy. “He couldn’t handle the behavior.”



Even when parents find a dentist willing to treat their children, sedation or restraint are often used.

In a recent study published in *Pediatric Dentistry*, 18 percent of parents of children with autism reported the use of restraint “often” or “almost always” during dental visits

Nearly 40 percent reported the use of pharmacological methods such as general anesthesia to complete routine cleaning.

The concern is that the high cost of anesthesia may be prohibitive to parents, not to mention the danger of general anesthesia due to adverse drug interactions. On top of that, it can be a scary experience for parents.

“I felt so helpless, like I didn’t want to leave,” said Peter. “It was a rough two and a half hours. It felt like weeks. Walking out of

that room was probably one of the hardest things to do.”

These experiences lend an overwhelmingly negative connotation to visiting the dentist. Children with autism are more likely to demonstrate increased self-stimulatory and uncooperative behaviors at the dental office, only adding to the challenges faced in the dental chair.

But that could change, thanks to research funded by the National Institute of Dental and Craniofacial Research and being done by Sharon Cermak, professor at the USC Division of Occupational Science and Occupational Therapy jointly appointed to the Department of Pediatrics at the Keck School of Medicine of USC.

The study, done in conjunction with the Ostrow School of Dentistry of USC and Children’s Hospital of Los Angeles, aims to adapt the sensory characteristics of the dental environment to make it more accessible for children with autism.

Some potential adaptations include replacing fluorescent lights with soft, colorful lights; providing soothing music; and using butterfly wraps that provide calming, deep pressure.

The hope is that these will help reduce the amount of anxiety and negative behaviors displayed by children with autism visiting the dentist.

Preliminary findings from the pilot study are positive. Children in the sensory adapted condition showed decreased anxiety on a physiologic measure of skin conductance, and fewer people were needed to restrain the child during an oral prophylaxis in comparison to the regular dental environment.

“As crucial as oral care is to overall health and wellness, finding a way to help both dentists and their patients has to be a priority,” Cermak said. “Down the road, we hope this will lead to a better quality of life for children with autism and their families.

If occupational therapists can work together with dental practitioners on ways to make their offices more kid-friendly, we will be taking one important step in that direction.”

*\*Only first names are used throughout article to protect research subject anonymity.*



# Calendar

**APR 12**

## International Forum Presented by the USC Occupational Therapy and Science Council

Occupational therapy. *Terapia ocupacional. Zhi neng zhi liao. Jag-eob chi-ryo.* No matter how you say it, celebrate our profession with students and practitioners from around the globe at this annual event.

*Details >> Center for Occupational and Lifestyle Redesign, 2653 S. Hoover St., L.A. >> More info: [tinyurl.com/internationalforum](http://tinyurl.com/internationalforum)*

**APR 12-13**

## Los Angeles Times Festival of Books

Bibliophiles unite for a fun-filled weekend at USC with renowned authors, celebrities and a slate of cultural entertainment ranging from book readings to film screenings and more.

*Details >> USC University Park Campus >> More info: [events.latimes.com/festivalofbooks](http://events.latimes.com/festivalofbooks)*

**APR 25-26**

## AOTA Fieldwork Educators Certificate Workshop

As a fieldwork educator, your supervisory knowledge, skills and leadership are critical to the success of your students and to the future of occupational therapy. Earn the premier credential to prove it at AOTA's two-day Fieldwork Educators Certificate Workshop.

*Details >> Keck Hospital of USC, 1500 San Pablo St., L.A. >> Fri., 8:30 a.m.-5:45 p.m., Sat., 8:30 a.m.-5:15 p.m. >> More info: [tinyurl.com/fieldworkworkshop](http://tinyurl.com/fieldworkworkshop)*

**APR 26**

## 81st Annual USC Awards

Wine and dine with fellow Trojans at the 81st annual awards gala where the USC Alumni Association will honor eight esteemed Trojan Family members.

*Details >> Westin Bonaventure Hotel, 404 S. Figueroa St., L.A. >> 6 p.m. >> More info: [alumnigroups.usc.edu/awards](http://alumnigroups.usc.edu/awards)*

**MAY 16**

## 131st Annual Commencement

They made it! Fight on with commencement speaker Elizabeth Yerxa and the graduating classes of 2014 as they receive their diplomas and step into the world as USC alumni.

*Details >> USC University Park Campus, Lawn West of Leavay Library, 10:45 a.m. >> More info: [commencement.usc.edu](http://commencement.usc.edu)*

**MAY 31 & JUN 7**

## Continuing Education—The Neurorehabilitation Workshop

Michael Ang leads this two-day workshop that emphasizes evidence-based technologies and motor re-learning interventions for stroke rehabilitation.

*Details >> USC Center for Health Professions, 1540 Alcazar St., L.A. >> More info: [ot.usc.edu/academics/continuing-education](http://ot.usc.edu/academics/continuing-education)*

**JUN 18-21**

## 16th International Congress of the World Federation of Occupational Therapists

The World Federation of Occupational Therapists invites faculty, practitioners and students from around the planet to Yokohama, Japan, to gain a global perspective of ideas and issues in the field today.

*Details >> Pacifico Yokohama >> 1-1-1, Minato Mirai, Nishi-ku, Yokohama, Japan >> More info: [wfot.org/wfot2014](http://wfot.org/wfot2014)*

**JUL 25**

## Continuing Education—Documentation for Reimbursement

If it's not on paper, you're not getting paid.

Learn how to document more effectively for maximizing reimbursement with this continuing education course headed by Associate Chair for Clinical Services Katie Jordan and Compliance/Quality Assurance Consultant Colette Nagami.

*Details >> USC Center for Health Professions, 1540 Alcazar St., L.A. >> More info: [ot.usc.edu/academics/continuing-education](http://ot.usc.edu/academics/continuing-education)*

**AUG 29**

## USC Occupational Therapy White Coat Ceremony

Welcome occupational therapy's freshest faces as they mark their entrance into USC and don their white coats for the first time.

*Details >> Broad Lawn at the USC Health Sciences Campus >> More info: [ot.usc.edu/news-and-events](http://ot.usc.edu/news-and-events)*

**SEP 8-DEC 18**

## Ayres Sensory Integration® Training Course

Get a chance to be mentored by master clinicians on applying Ayres Sensory Integration in this world-renowned program.

*Details >> USC Health Sciences Campus and Pediatric Therapy Network >> 1815 W. 213th St. #100, Torrance, Calif. >> More info: [ot.usc.edu/academics/continuing-education](http://ot.usc.edu/academics/continuing-education)*

**OCT 16-19**

## OTAC's 38th Annual Conference

Don't miss the largest state OT Conference in the West! Network with colleagues and attend educational sessions during a conference capped off with our annual USC Trojan Family reception!

*Details >> Pasadena Hilton, 168 S. Los Robles Ave., Pasadena, Calif. >> Pasadena Convention Center, 300 E. Green St., Pasadena, Calif. >> More info: [otaonline.org/index.php/annual-conference](http://otaonline.org/index.php/annual-conference)*

**JUL 14-AUG 8**

## USC Summer Occupational Therapy and English Program

Join other international students to strengthen your English language proficiency, learn about clinical practice in the United States and gain skills for success at the master's degree graduate level.

*Details >> USC & Locations Throughout the Greater L.A. Area >> More info: [ot.usc.edu/academics/summer-english](http://ot.usc.edu/academics/summer-english)*



# KEEPING TROJANS HEALTHY LONG INTO THEIR GOLDEN YEARS

Florence Clark moderates USC Emeriti Center's Fit for Life symposium.

BY JOHN HOBBS MA '14



Experts from across the university—including faculty and postdoctoral fellows of the USC Division of Occupational Science and Occupational Therapy—joined forces earlier this year to lead a symposium offering Trojan Family retirees tips for staying healthier and happier long into retirement.

The event, titled “Fit for Life,” took place Feb. 7 at the USC Davis School of Gerontology. Associate Dean of the Division Florence Clark took center stage, serving as event moderator.

“When we [decided] to put this Fit for Life Symposium together, the first person who came to mind was Florence,” explained Emeriti Executive Director Janette C. Brown as she introduced Clark.

Clark opened the event’s keynote speech, titled “Creating a Healthy Further Life,” by discussing the increase in life expectancy since the 16th century, when a Tudor Queen could reasonably expect to live into her 50s.

“The key to healthy aging is creating this beautiful life that is a work of art,” Clark said, explaining the importance of putting one’s own flair into his or her daily routine.

She went on to discuss the USC Well Elderly studies, *Lifestyle Redesign* intervention and strategies to symposium-goers—current and retired USC faculty and staff—for building their own customized plan to age healthfully.

Such strategies included incorporating health-promoting practices, learning to explore one’s deepest priorities and potentials and using technology to track your biomarkers and activity patterns.

Division research faculty members Stacey Schepens Niemiec and Sarah-Jeanne Salvy followed Clark during the symposium’s morning hours, delivering speeches titled “Arthritis, Activity and Remaining Active as You Age” and “Healthy Living, Healthy Weight: Lessons from Weight Losers and Weight Maintainers” respectively.

During intermission, symposium-goers could ask the expert panel further questions and learn more at exhibits from the Fall Prevention Center of Excellence, the Occupational Therapy Faculty Practice, USC

Physical Therapy Associates and the Game-Based Rehabilitation Lab at the USC Institute for Creative Technologies.

During afternoon sessions, postdoctoral fellow Rachel Proffitt spoke about using virtual reality to support healthy aging, and postdoctoral research associate Adley Chan '07, MA '08, OTD '12 discussed fall prevention strategies with Anna Quyen do Nguyen '04, MA '05, OTD '06, an occupational therapist and research scientist at the Fall Prevention Center of Excellence.

In addition to occupational science and occupational therapy faculty members, experts from the USC Davis School of Gerontology and the USC Division of Biokinesiology and Physical Therapy lent their disciplines’ different perspectives to healthy aging.

Associate Professor George Salem of the USC Division of Biokinesiology and Physical Therapy shared his tips on yoga for seniors, including an examination of the benefits and risks of yoga practice. Salem’s research may ultimately enable clinicians to design individualized programs for patients.

AARP Professor of Gerontology Eileen Crimmins delivered a lecture titled “Life for the Fit: Exercise and Successful Aging.”

“When you retire, your daily routine is changed. So it’s a good time to re-think your routines,” Crimmins said. “Because the changes that occur, which people sometimes attribute to aging, may really be from a lack of movement.”

The event was the latest in a series of workshops presented by the USC Emeriti Center. Founded in 1978, the Center provides information, resources and services to USC’s retirees to help them live healthy and purposeful lives. For more about the USC Emeriti Center, see [emeriti.usc.edu](http://emeriti.usc.edu).



**DIDN'T GET A CHANCE TO ATTEND THE SYMPOSIUM? WATCH IT HERE: [EMERITI.USC.EDU/NEWS/FIT-FOR-LIFE-SYMPOSIUM/](http://EMERITI.USC.EDU/NEWS/FIT-FOR-LIFE-SYMPOSIUM/)**



# News Briefs

Lectures, grants, awards—There’s always so much going on at the USC Division of Occupational Science and Occupational Therapy. Keep your finger on the pulse with these Division news briefs.

## LECTURES



### Alumna returns to division with lecture

The Division and the OS/OT Alumni Association welcomed alumna Sook-Lei Liew MA '08,

PhD '12 on Feb. 19 for a dinner and lecture titled “New and Emerging Technologies for Clients with Motor Impairments due to Neurological Injury.” At the event, Liew, a postdoctoral fellow at the National Institute for Neurological Disorder and Stroke, discussed the application of the latest technologies, including noninvasive brain stimulation and brain computer interfaces, while specifically focusing on stroke. “She demonstrates the important role of OTs in harnessing research and technology to achieve optimal therapeutic experiences and outcomes for our clients,” said Emery Hilles MA '14.  
—*Stella Chung*

## PROGRAMS



### Coming this summer: four-week English program for international students

This summer, the Division will host its first ever

Summer Occupational Therapy and English program for contemplating, prospective and admitted international students to set them up to succeed in the one- and two-year master’s programs. The four-week introductory program runs from July 14 through Aug. 8, 2014. Led by experienced faculty, the workshops will introduce students to U.S. occupational therapy practice settings, improve their spoken and written English proficiency and familiarize them with the certification process. For more information, go to [ot.usc.edu/academics/summer-english](http://ot.usc.edu/academics/summer-english).  
—*Stella Chung*

## GRANTS



### Faculty members receive two new CTSI research grants

Stefanie Bodison and Mary Lawlor have received funding by the Keck School

of Medicine for individual research projects. Bodison received an award of \$27,600, which will help her conduct an investigation of the neural mechanisms of sensorimotor integration in children with autism spectrum disorder. Lawlor and other principal investigators have received \$45,000 to conduct a pilot study identifying risk factors for harm in children on invasive home medical therapies.  
—*Mara Hyman*

### Alumnus receives K01 research grant

Don Fogelberg PhD '08 has been awarded a K01 research grant for a study he’s conducting on chronic sleep issues in individuals with spinal cord injury. The study aims to demonstrate that improving sleep patterns can help people with spinal cord injury lead healthier lives. His research is focused on developing more effective means of diagnosing sleep disturbance. Fogelberg is currently an assistant professor in the Department of Rehabilitation Medicine at the University of Washington. His grant is funded by the National Center for Medical Rehabilitation Research and the National Institute of Child Health and Human Development.  
—*Mara Hyman*

## AWARDS



### Division earns two educational digital marketing awards

The Division has snagged two 2013 Education Digital Marketing Awards,

given by the Higher Education Marketing Group, in the digital video and institutional website categories. The Gold Award recipient was the Campaign for USC Occupational Science and Occupational Therapy video, made in partnership with c2K Entertainment. You can watch that winning entry here: [tinyurl.com/otswinningvideo](http://tinyurl.com/otswinningvideo). The second winner, the OT website ([ot.usc.edu](http://ot.usc.edu)), earned a Merit Award. Behind these winning entries are project collaborators Paul Bailey, Kimberly Kelton, Mike McNulty, Amber Pollard, Saul Rios and John Wolcott.  
—*Stella Chung*

## ABROAD



### Clark expands division’s reach with international trips this spring

Dr. Florence Clark will rack up a few extra

frequent-flyer miles in late April as she heads to Canada and Europe for international engagements. While at the University of Sherbrooke in Quebec, Canada, Clark will deliver a presentation on *Lifestyle Redesign*. Afterward, she will consult with Sherbrooke faculty for a French translation of a newly revised and expanded *Lifestyle Redesign* treatment manual—used in the second USC Well Elderly Study—for which they’ve received a grant to complete. At the University of Southern Denmark, Clark will be serving as opponent to a doctoral thesis on occupational therapy’s effect on cancer patients’ activity performance and quality of life.  
—*John Hobbs*



# Research Buzz



## MANAGING PRESSURE SORES—THERE WILL BE AN APP FOR THAT.

BY JESÚS DÍAZ '05, MA '08, OTD '09,  
ADJUNCT RESEARCH ASSISTANT PROFESSOR



When people think of the quality of life issues faced by patients with spinal cord injury, or SCI, challenges to daily life regarding movement and getting around are often the first to spring to mind. However, there are other serious medical complications that pose dangers to SCI patients, and helping patients maintain their independence requires innovative interventions.

In particular, the risk of pressure ulcers is ever-present for patients with spinal injuries. Pressure ulcers are created when steady pressure on the skin—such as when a patient is in a wheelchair or bedridden—reduces blood flow and causes tissue death. The resulting sores, which vary in severity from redness and blistering to open wounds reaching bone, bring with them a massive risk of infection and reduced quality of life. Treatment can be quite costly. Avoiding pressure ulcers is critical for SCI patients, but until recently there had been little substantive science on the best ways to prevent them.

The *Lifestyle Redesign* for Pressure Ulcer Prevention in Spinal Cord Injury Study (PUPS), led by Associate Dean Florence Clark, aims to provide patients with spinal cord injuries and their clinicians with tools, techniques and an overarching lifestyle-based intervention approach to stave off pressure ulcers and the problems they bring. I am proud to be a part of the PUPS team and to be developing new evidence-based interventions for these all-too-common but preventable complications.

One exciting new idea we've proposed is to create a mobile phone application that helps SCI patients and their clinicians keep track of skin conditions quickly and easily. The app will be freely available and provide reminders that cue users to update their current skin condition. When a user responds to a reminder, an image of a body will appear on the screen, and the user will be able to tap on different points of the body and mark the area green (clear), yellow (discolored) or red (opening). The app will

generate a chart that marks the daily progress of the skin's condition, and it will also have the capacity to capture and store images to visually track any changes in skin conditions and to input notes on what might be causing the ulcer.

Recommendations tailored to the location and extent of changes in skin will be generated from the app. Sources of the recommendations include the National Pressure Ulcer Advisory Panel/European Pressure Ulcer Advisory Panel Pressure Ulcer Prevention & Treatment Quick Reference Guide 2009 and the clinical expertise of occupational therapists. The reminders and the recommendations from the app will provide the individual with invaluable tools to better manage their skin care. Also, it is our expectation that the concise and vivid visual record enabled by the app will enhance clear communication about pressure ulcer development between a user and their health care provider.

I am honored to share that our app proposal has been awarded an \$8,000 Quality of Life Grant from the Christopher & Dana Reeve Foundation. The Reeve Foundation is dedicated to serving patients with spinal cord injury, both through supporting research on new treatments and interventions designed to improve the quality of life of patients. The Quality of Life Grants are awarded to programs or projects that improve the daily lives of people with spinal cord injury and paralysis.

This project is truly multidisciplinary and will have immediate clinical potential; occupational therapists, gaming software engineers and individuals with SCI will be consulted to create an application that is user-friendly, accessible and informative. It is my hope that our app becomes an exciting, evidence-based tool that not only helps patients take better control of their health but also helps them communicate and share information with health care providers more easily than ever before.

MODERATED BY BETH NEWCOMB

# Big Data

## Meeting our Goals



Just a year into its \$6 million initiative—the largest fundraising effort ever for an occupational therapy higher education institution—the Division has raised one-quarter of its goal. The initiative is part of the larger Campaign for USC, which has set its sights on raising \$6 billion overall.

## Social Status

You can never have too many friends. Check out our Facebook and Twitter numbers, and the next time you're on your favorite social media network, look us up.

-  **1090** USC Division of Occupational Science and Occupational Therapy Facebook Page "Likes"
-  **830** USC Division of Occupational Science and Occupational Therapy Alumni Association Facebook Page "Likes"
-  **1060** USC Division of Occupational Science and Occupational Therapy Twitter Followers

## Occupy the Globe

The sun never sets on the USC Division of Occupational Science and Occupational Therapy's alumni family. The group of nearly 3,000 professionals is scattered across 45 countries on six continents.



## Building a Better You



It's shaping up to be a great year. Since July, there have been more than 1,000 *Lifestyle Redesign Weight Management* patient visits at the Occupational Therapy Faculty Practice. Of the many *Lifestyle Redesign* programs—including pain management, diabetes and smoking cessation—the weight management group is the largest, with almost 50 percent of all visits.

**READ MORE ABOUT A SUCCESSFUL LIFESTYLE REDESIGN WEIGHT MANAGEMENT PATIENT ON PAGE 10.**

"I have had several students take my classes and later become professional athletes. My hope is that they learn to think critically about sport as an institution while also finding a way to hold onto the larger values of sports and game-playing, outside of financial compensation." —Joan Forry

Assistant Professor of Occupational Science Forry, a visiting faculty member, teaches an undergraduate class critically examining ethical issues central to the sports world, including matters of fair play and cheating to the use of performance-enhancing drugs and gene doping.

## Stay Connected

Keep in touch with the USC Division of Occupational Science and Occupational Therapy Alumni Association.  
[ot.usc.edu/alumni/connect](http://ot.usc.edu/alumni/connect)



COVER STORY

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## SHADOW OF HIS FORMER SELF

AFTER LOSING MORE THAN 120 POUNDS, *LIFESTYLE REDESIGN* SUCCESS DAVID MORRISON IS A NEW MAN, THANKS IN PART TO REGULAR CONSULTATIONS WITH OCCUPATIONAL THERAPIST ASHLEY UYESHIRO '08, MA '10, OTD '11.

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BY MARA HYMAN '14

PHOTO BY JOHN SKALICKY

**A**t his heaviest, David Morrison weighed 328 pounds and wore size 46 pants. He suffered from lower-back stenosis, which made even walking difficult, and sleeping problems and acid reflux were parts of his everyday life.

Though the 61-year-old banker from Alhambra, Calif., knew he needed to lose weight, he couldn't find his own recipe for long-term success.

"For whatever reason, I was not disciplined enough to stick with a diet," Morrison says. "I didn't want to play games with myself and pretend something was going to work when I knew it wouldn't."

That feeling of futility is likely familiar to anybody who has started—and stopped—a diet plan: A 2013 British survey found that 40 percent of people quit within the first seven days of starting a new diet, and only 5 percent of people still follow their diet after one year.

So it was no surprise that Morrison moved on to more intensive



Morrison in 2009

strategies to control his weight. In 2010 he underwent a laparoscopic adjustable gastric band procedure—commonly known as lap-band—but soon discovered there wasn't enough medical follow-through to help him adjust to his smaller stomach and new lifestyle.

In 2012, at the advice of his physicians at the Keck Hospital of USC, Morrison decided to undergo gastric bypass surgery, a procedure involving separating a small pouch from the stomach and re-connecting the small intestine to engineer a new smaller "stomach." The surgery drastically decreases the volume of food the stomach can hold and, therefore, the number of calories the body can digest.

A month before his surgery, something else further inspired Morrison's weight-loss plans: His mother fell ill and died from cancer.

"I remember looking at her in bed. Here was this [once] really vibrant lady who lived life fully, and she's sitting there wracked with cancer," he says. "She was only 20 to 25 years older than me. So, I'm looking at her, thinking, 'God, maybe I only have 20 to 25 years to go.' I wanted to be healthy because I didn't know how much time I had left."

Morrison also realized he had his own goals left to accomplish that might not be possible if he kept walking the same road. He wanted to see his son excel in his screenwriting career. He wanted to see his daughter, who works in chemistry, get married and start a family. He dreamed of traveling and, as a member of his bank's Toastmasters group, doing more public speaking. He also had yet to fully indulge his inner die-hard Trojan football fan.

"My dream is to go to South Bend, Ind., to watch a Notre Dame versus USC game," he says, with a smile.

With all this in mind, the re-motivated Morrison went to Keck Hospital for bariatric surgery in December 2012.

Now, more than 15 months later, Morrison's down more than 120 pounds, weighing in at 206.8 (with a banker's attention to detail, Morrison is very precise with his measurements). He admits it's not been easy getting used to the changes.

"You're one weight for 30 years, then all of a sudden you're somebody else," he says. "Half the time, you look in the mirror and say to yourself,

'Who is that?' There's a lot of stuff that you want to sit down with an expert and talk through."

To make sure Morrison was successful and had the post-surgery support he needed to acclimate to his new life, his physicians suggested the *Lifestyle Redesign* Weight Management Program at the USC Occupational Therapy Faculty Practice.

The program, a benefit covered for university employees under the USC Network Medical Plan, was developed in the 1990s to combat the complex issues facing the overweight and obese by customizing a lifestyle-focused program for each patient.

Whether one-on-one or in groups, patients meet regularly with an occupational therapist to set realistic, activity- and routine-focused goals to create health-supporting habits that can reduce stress, improve overall quality of life and manage weight.



Morrison early-2000s

Topics covered include healthy eating, physical activity and exercise, identifying healthy pleasures and non-food rewards and emotional issues tied to food.

Morrison began meeting with Assistant Professor of Clinical Occupational Therapy Ashley Uyeshiro '08, MA '10, OTD '11, at the Faculty Practice every other week.

Together, they strategized lasting changes Morrison could make to stay healthy while also helping him cope with the changes he was experiencing.

"I was lucky [to work with Uyeshiro] because we happened to work on the same wavelength," Morrison says. "I would bring in my questions, and she would work with me on answering them."

With Uyeshiro's help, Morrison devised a workout plan—walking and stretching six days a week and swimming on the seventh day—and figured out what foods Morrison could eat. He learned how to control portion sizes which, because a bypassed stomach can stretch over time from over-eating, has been vital to his sustained success. And he's increased his own sense of accountability so he doesn't need to rely on Uyeshiro as much as he once did.

Morrison says Uyeshiro is tough, but that's what he needed as a former athlete. "I can relate to the coach who's encouraging but also doesn't let you get away with things."

Morrison now sees Uyeshiro once every four weeks and has started to grow more comfortable in his new body. "Just the fact that I can walk now from my car to my seat [at USC football games at the Los Angeles Coliseum stadium] is great," he says.

He's even been able to find amusement in his transformation.

"The way people react to you when they haven't seen you for awhile, they're in shock," he says. "They're like, 'Is that you? Is that you, Dave?' They look at you like you're a Martian. You just have to welcome it and make humor of it."

**FOR MORE INFORMATION ON THE LIFESTYLE REDESIGNS PROGRAM, GO TO [USC.EDU/OTFP](http://USC.EDU/OTFP).**

# AN EXTRA HELPING

## HOW KATIE JORDAN'S POSITION PAPER STRATEGIZES OCCUPATIONAL THERAPY'S ROLE IN THE BATTLE AGAINST THE BULGE.

BY MIKE MCNULTY '06, MA '09, OTD '10

The statistics are sobering and well-documented: According to the Centers for Disease Control and Prevention, more than 78 million American adults and 12 million American children are obese, costing an estimated \$147 billion in related annual medical expenses. Obesity is not an equal opportunity player, as Latino and African American populations and individuals with physical disabilities and mental illness have been shown to have elevated risks for obesity.

For many, it's a condition that weighs heavily on the quality of everyday life. A 2010 study of morbidly obese people published in the *Canadian Journal of Occupational Therapy* identified several themes common to their lived experiences: tensions between their physical health and participation in daily activities, barriers posed by the built environment and by societal attitudes as well as specific strategies and supports they use to persevere in the face of obstacles.

Not surprisingly, these links between activity and health are especially understood by occupational therapists. To more fully explain this relationship, faculty member Katie Jordan MA '03, OTD '04 recently co-authored "Obesity and Occupational Therapy," a position paper formally endorsed by the American Occupational Therapy Association (AOTA).

The document, published in the December 2013 issue of the *American Journal of Occupational Therapy*, was co-written by USC alumna Faryl Saliman Reingold MA '04, OTD '10 and serves as an update to the original version published in 2007.

"For this revision we found more evidence related to obesity across a breadth of populations, including people with psychiatric disabilities, families and children," says Jordan, who is associate chair for clinical services and director of occupational therapy and speech therapy services at Keck Medical Center of USC.

Position papers, which detail the official AOTA stance on a substantive issue

or subject, are developed in response to a particular issue or need and may be intended for internal or external audiences. For example, AOTA has endorsed similar position papers on complementary and alternative medicine, telehealth and wound management.

Perhaps most importantly, the evidence-based document serves to justify occupational therapy's place throughout the delivery of lifestyle-based services.

"Position papers allow us to say to payers, 'this is the work of an occupational therapist, here's what an OT does,'" Jordan says. "In my professional opinion, the biggest impact [position papers] have is on influencing payers that make decisions on who can be considered a qualified provider for services."

Perhaps nowhere else is the value of occupational therapy services demonstrated more effectively than at Keck Medical Center of USC. Bariatric surgery patients treated by USC physicians can receive occupational therapy at three distinct points throughout the continuum of clinical services: pre-surgical *Lifestyle Redesign* services focusing on implementing healthy habits and routines, post-operative acute care focusing on re-building functional skills and outpatient *Lifestyle Redesign* services safeguarding against the dreaded "yo-yo" of long-term weight loss and re-gain.

Occupational therapy also recently joined the group of providers responsible for the clinical pathway—the standardization of care processes to optimize quality outcomes—of bariatric care at USC.

But as Jordan, who is expecting her third daughter this spring, sees it, providers throughout the profession are tasked with a clear mandate to help every client thrive, regardless of whether they are being treated primarily for bariatric services. Which means occupational therapy practitioners working, for example, with children in schools, adults in mental health settings or elders in nursing facilities can all play a part in reversing the nation's obesity crisis.

"Given the pandemic level of obesity," Jordan explains, "I think it is every provider's responsibility to address this in our care."

**"OBESITY AND OCCUPATIONAL THERAPY" CAN BE FOUND IN THE NOVEMBER/DECEMBER 2013 ISSUE OF THE AMERICAN JOURNAL OF OCCUPATIONAL THERAPY AT [TINYURL.COM/OBESITY-OCCTHERAPY](http://TINYURL.COM/OBESITY-OCCTHERAPY)**

## Role Call

*What's an occupational therapist's role in helping clients manage their weight? No matter the setting or patient demographic, it all comes down to implementing—and maintaining—healthier lifestyles. Here's how an OT can help:*



- Running community health and workplace wellness programs
- Facilitating new habits and routines
- Leading *Lifestyle Redesign* intervention
- Recommending home modifications, adaptive devices and durable medical equipment
- Advocating for play and physical education in schools
- Educating hospital and nursing staff on safe patient-handling techniques
- Providing post-surgical acute care interventions
- Training family and caregivers

Center photo: Richard Thornton/Shutterstock.com

# USC Division Occupational Occupational

*Faculty member Katie Jordan co-authored "Obesity and Occupational Therapy," a position paper laying out OT's role in the battle against obesity. The article was published in the November/December 2012 issue of the American Journal of Occupational Therapy.*

USC Division of  
Occupational Science and  
Occupational Therapy

# TIPPING THE SCALES

BY MIKE McNULTY '06, MA '09, OTD '10





In 1980, 7 percent of American children were obese. In 2012, nearly one-fifth were. Reversing our nation's prevalence of childhood obesity will require more than health guru anecdotes, dieting dos and don'ts and slick slogans from preachy—albeit well-intentioned—publicity campaigns. Read how the clinical research of one faculty member at the USC Division of Occupational Science and Occupational Therapy aims to tip the scales toward a healthier, happier future for our children.



**A**SSOCIATE RESEARCH PROFESSOR SARAH-JEANNE SALVY JOINED THE FACULTY OF THE USC DIVISION OF OCCUPATIONAL SCIENCE AND OCCUPATIONAL THERAPY IN SEPTEMBER 2013. A FELLOW OF THE USC DORNSIFE CENTER FOR ECONOMIC AND SOCIAL RESEARCH, SHE IS ALSO AN ADJUNCT BEHAVIORAL AND SOCIAL SCIENTIST AT THE RAND CORPORATION (SANTA MONICA, CALIF.) AND WAS PREVIOUSLY AN ASSOCIATE PROFESSOR OF PEDIATRICS AT SUNY BUFFALO (NEW YORK). A NATIVE OF QUEBEC, SALVY RECEIVED HER PHD DEGREE IN CHILD CLINICAL AND PEDIATRIC PSYCHOLOGY FROM THE UNIVERSITY OF QUEBEC AT MONTREAL. SHE IS INTERVIEWED ABOUT HER WORK AND CAREER BY THE DIVISION'S DIRECTOR OF EXTERNAL RELATIONS MIKE MCNULTY.

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### **CAN YOU GIVE OUR READERS AN OVERVIEW OF THE GENERAL AIMS AND THEMES OF YOUR RESEARCH?**

My entire research focuses on obesity, especially childhood obesity, and how social factors can either promote healthy behaviors or reinforce obesogenic behaviors. There has been a lot of research on the influence of physical environments on obesity, but now we're seeing more research on the impact of the social environment.

### **WHAT SPECIFIC PROJECTS ARE YOU FOCUSED ON AT THE MOMENT?**

Right now, my "baby" is to integrate a childhood obesity prevention curriculum within the structure of an existing home-visitation program. It's an incredible model of service delivery: home visitors deliver the intervention in the home every week, it's widespread across the United States and is used internationally in Europe and Canada. It's such a great infrastructure, but the home-visitation model has never been systematically used to target obesity. And this is the population most at-risk. More than 39 percent of children involved in federally funded programs are overweight or obese. My research is looking at integrating the evidence-based nutrition and activity components within the structure of the home-visitation program. It seems like such an incredible opportunity.

### **IN THE FACE OF THE POWERFUL ECONOMIC, EMOTIONAL, CULTURAL AND COMMERCIAL FORCES SURROUNDING FOOD AND EATING BEHAVIORS, HOW MUCH OF AN IMPACT CAN RESEARCH-BASED CLINICAL INTERVENTIONS TRULY MAKE ON STOPPING THE OBESITY EPIDEMIC?**

Recent research suggests that childhood obesity is actually plateauing, and that childhood obesity is not getting worse anymore. However, 30 percent of children are still overweight or obese; I say that that's still an issue. If one in three kids at age 5 is overweight, and if we can decrease that prevalence by even a very small percentage, we're talking about very big potential cost savings in the long run. Twenty percent of health care costs go to obesity-related diseases. So if we focus our efforts on at-risk populations, we can remove a significant proportion of the financial weight, no pun intended.

The Institute of Medicine put out a recent recommendation about how the future of population-level health will require partnerships that mix or combine service delivery systems and clinical interventions. In other words, by combining practices and delivery systems that have been shown to be evidence-based, to focus on families most at risk, we can have the biggest impact on improving health and quality of life and decreasing the long-term financial burden for society as a whole.

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## **TWENTY CENTS OF EVERY DOLLAR SPENT ON HEALTH CARE GOES TO OBESITY-RELATED DISEASES.**

(Congressional Budget Office)

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### **WHAT MOTIVATED YOU TO PURSUE A CAREER IN CLINICAL PSYCHOLOGY RESEARCH, SPECIFICALLY RESEARCH ON INTERVENTIONS FOR FEEDING AND EATING DISORDERS AND THE CONNECTION TO OBESITY?**

There was never a single moment but kind of a series of serendipitous events, which brought my career to where it is today. Even though I'm now focusing on obesity I started at the other end of the spectrum, working with children who have feeding or eating disorders. During my clinical internships with children with feeding disorders, I started noticing the power of social interactions between the feeder and the feed-ee, and how a successful therapist can reshape a dysfunctional feeding relationship, rebuilding it from scratch.

That's a question not just for people with feeding dysfunction but for normal people too: How are other people influencing your own "typical" eating habits? For example, if you go out to a restaurant with a group of your colleagues and nobody is ordering dessert, will you still order dessert?

So at the University at Buffalo, I translated this model to obesity: how social contingencies influence "how much" and "what" kids eat, and their choice of activities. At RAND Corporation, I began translating these basic findings to applications that have public health implications,

asking, “how can we take basic lab studies and turn them into something with a greater impact?” If obesity is becoming the norm, if a large proportion of the population is now overweight and overeats, what’s the impact on the incidence and prevalence of obesity? And what interventions will have the biggest impact in terms of scalability? Those are the type of questions my research here at USC hopes to answer.

**OCCUPATIONAL SCIENCE, BY DESIGN, IS A VERY INTERDISCIPLINARY ENDEAVOR. WHAT DOES CLINICAL PSYCHOLOGY UNIQUELY CONTRIBUTE TO THE BROADER FIELD?**

My research focuses on how people around you influence how you occupy your time throughout the day. I’m asking, “how does allocation of behavior influence weight?” It’s very similar to the classical definition of occupational science that Dr. Florence Clark would give: studying how the choices you make, how you spend your time and how you occupy your time directly influence your health.

**WHAT IMPACT DOES, OR WILL, YOUR RESEARCH HAVE ON THE 40 PERCENT OF U.S. OCCUPATIONAL THERAPY PRACTITIONERS WHO WORK WITH CHILDREN AGE 0-21?**

Even though I’m now more focused on academia and research, I’m still a clinical psychologist, bringing the experiment into the real world. I’ve worked with OTs since the beginning of my career. I’ve actually worked with OTs on behavioral interventions for feeding and eating disorders. I’ve worked in hospitals and as part of multidisciplinary teams, so I’ve always felt like a member of the family.

**THOUGH YOUR CAREER IS STILL RELATIVELY NEW, YOU HAVE ALREADY BEEN PRINCIPAL OR CO-PRINCIPAL INVESTIGATOR ON TWO RESEARCH PROJECTS FUNDED BY MULTIMILLION-DOLLAR NIH GRANTS. WHAT’S THE SECRET TO YOUR SUCCESS?**

I don’t think there’s any secret right now; it’s tough to get funding for everybody! I would say that I’m very stubborn, and by stubborn I mean persistent in the face of rejection. I will submit a grant proposal six times if I have to. It’s not like it used to be. Now, you have to accept that you’re not going to get it funded the first time, but if I strongly believe that I have a good idea that is impactful, then I’m going to pursue it. So you submit, you get feedback, you revise and you resubmit. The biggest enemy is disappointment and getting discouraged. It’s easy to give up right now and say, “forget it, I’m going to open up a bakery or something!” But any successful researcher has to be a bit naïve, or, maybe not naïve, but hopelessly optimistic.

**LASTLY, WHAT’S YOUR FAVORITE THING ABOUT LIVING IN LOS ANGELES? PLEASE DON’T SAY THE BAKERIES!**

It would have to be the diversity of everything, in every sense of the word: the scenery, the neighborhoods, the vegetation, the food. Feeling like there are multiple cities all within a single city.



PHOTO BY JOHN SKALICKY

# THERE IS NO HEALTH WITHOUT MENTAL HEALTH

## PROFESSIONAL UPDATES AND OUTLOOK FOR MENTAL HEALTH PRACTICE

BY DEBORAH PITTS PHD '12  
ASSISTANT PROFESSOR OF CLINICAL OCCUPATIONAL THERAPY



The perspective that “there is no health without mental health” has been promoted by the World Health Organization during the past several years as part of its efforts to bring greater awareness to the needs of persons living with, and at risk for, psychiatric disorders. It is informed by the contemporary understanding that determinants of mental health and mental disorders include both person and environmental factors.<sup>1</sup>

Occupational therapy’s concern with the person-in-context across his or her lifespan is in clear alignment with this perspective. During the past several years, under the leadership of Presidents Baum, Moyers, Clark and now Stoffel, the American Occupational Therapy Association (AOTA) has worked to promote and strengthen the presence of occupational therapy in the contemporary U.S. mental health service system.

AOTA’s efforts began with a series of ad hoc work groups that surveyed contemporary practice challenges for occupational therapy in mental health, with a particular focus on occupational therapy practitioners’ identification as qualified (QMHP) or licensed (LMHP) mental health professionals. This focus is critical because public mental health systems of care especially limit certain tasks and functions only to those health care professionals identified as QMHP/LMHPs.

Specific actions have also been taken to increase occupational therapists’ continued readiness to practice effectively and to communicate

their knowledge and skills in contemporary mental health settings, including:

- Development of the *Board Certification in Mental Health*, which consists of a peer-reviewed portfolio targeting specific practice criteria that provides the individual practitioner the opportunity to communicate their specialty practice to employers and payers.
- Development and dissemination of the *Specialized Knowledge and Skills Paper in Mental Health Promotion, Prevention, and Intervention in Occupational Therapy Practice*, designed to serve as a blueprint and communication tool for the role of occupational therapists in the mental health context.
- Development and dissemination of *Practice Guidelines for Mental Health Promotion, Prevention and Intervention for Children and Youth* and *Practice Guidelines for Adults with Serious Mental Illness*, designed to provide occupational therapy practitioners with a framework for their work with these populations.
- The *American Journal of Occupational Therapy*’s effort to support mental health research included publication of a set of systematic reviews documenting occupational therapy interventions for employment and education for adults with serious mental illness, for recovery in the areas of community integration and normative life roles for adults with serious mental illness, and occupational therapy and mental health promotion, prevention and intervention for children and youth.
- Development and dissemination of advanced practice continuing

education resources for mental health practice, including *Occupational Therapy in Mental Health: Considerations for Advance Practice, Mental Health Promotion, Prevention and Intervention for Children and Youth*.

In addition, AOTA, as well as individual occupational therapy practitioners, has engaged in and supported advocacy efforts in the broader mental health practice context to promote occupational therapy, such as:

- AOTA's ongoing participation in the Mental Health Liaison Group, a Washington, D.C.-based coalition of mental health advocacy organizations, as well as AOTA's partnerships with national mental health organizations including the National Council for Behavioral Health.

- Occupational therapists Captain Frances Oakley and Captain Rebecca Parks of the U.S. Public Health Service (PHS) successfully advocated for the PHS to identify occupational therapists as qualified mental health providers on PHS disaster mental health response teams. Capt. Oakley's and Capt. Park's efforts are informed by Army occupational therapists' participation on Special Medical Augmentation Response Teams providing time-limited mental health support, by serving as members of Combat Stress Control with frontline troops and from other key mental health roles in the military.<sup>2</sup>

- Both Illinois and Oregon recognize occupational therapists as qualified mental health providers, making occupational therapists equivalent to other licensed mental health professionals in those states. AOTA is supporting other state associations' efforts to secure similar designations. For example, with assistance from Occupational Therapy Association of California lobbyist Jennifer Snyder, occupational therapy mental health advocates in California recently met with representatives from the California Department of Health Services Mental Health and Substance Abuse Division, the Office of Statewide Health Planning and Development and the California Mental Health Program Directors to explore ways in which occupational therapists could be designated as licensed mental health professionals.

- AOTA lobbied and secured support from New York Congressman Paul Tonko to sponsor and introduce the Occupational Therapy in Mental Health Act (HR 1037) on March 7, 2013. The bill identifies occupational therapists in the U.S. Public Health Service's National Health Service Corps (NHSC) as "behavioral and mental health professionals." Among other benefits, HR 1037 would allow occupational therapists to participate in the NHSC Scholarship Program and NHSC Loan Repayment Program.



**1 IN 4 ADULTS  
EXPERIENCE  
MENTAL ILLNESS  
IN A GIVEN YEAR.**

(National Alliance on Mental Illness)

- The Centers for Medicare & Medicaid Services' recent decision to mandate occupational therapists be part of the professional team staffing Medicare-reimbursed partial hospital programs operated by community mental health centers.

It is hoped that these recent efforts to strengthen occupational therapy in mental health can be leveraged to take advantage of opportunities emerging from the recent implementation of the Affordable Care Act (ACA). AOTA President Stoffel emphasized these opportunities in her

**13.6  
MILLION**

**AMERICANS LIVE WITH A  
SERIOUS MENTAL ILLNESS  
SUCH AS SCHIZOPHRENIA,  
MAJOR DEPRESSION OR  
BIPOLAR DISORDER.**

(National Alliance on Mental Illness)

**NEARLY  
60%  
OF ADULTS**

**AND ALMOST HALF OF  
YOUTH (8-15) WITH MENTAL  
ILLNESS RECEIVED NO  
MENTAL HEALTH  
SERVICES LAST YEAR.**

(National Alliance on Mental Illness)

**MENTAL ILLNESSES ARE  
MORE COMMON  
THAN CANCER, DIABETES  
OR HEART DISEASE.**

(National Alliance on Mental Illness)

professional 'call to action,'<sup>3</sup> highlighting how mental health and substance use services have been identified as an ACA essential benefit and how the ACA, especially through its expansion of Medicaid eligibility, will prioritize primary care services. Stoffel urged occupational therapists to advocate at the state level for occupational therapy's capacity to meet the significantly increased need for mental health providers resulting from this expansion of mental health services.

Despite the significantly smaller number of occupational therapists practicing in mental health in comparison to other practice areas,<sup>4</sup> mental health, or 'behavioral health' as it is now increasingly being called, remains a key practice area for occupational therapy. OTs based in the United States can join their international colleagues in continuing to shore up occupational therapy's place alongside other mental health professionals to meet the needs of persons labeled with, or at risk for, psychiatric disorders.

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<sup>3</sup> Stoffel, V. C. (2013). Opportunities for occupational therapy behavioral health. *American Journal of Occupational Therapy*, 67(f2), 140-145.

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Dr. Jeff Egler, assistant professor of clinical family medicine, joins in the fun with Dr. Michelle Farmer during a group occupational therapy treatment session at USC-Eisner Pediatric and Family Medical Center.



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# A REAL TEAM PLAYER

MICHELLE FARMER MA '10, OTD '11 IS BLAZING A TRAIL FOR OCCUPATIONAL THERAPISTS WORKING IN TEAM-BASED PRIMARY CARE.

BY YASMINE PEZESHKPOUR MA '17

PHOTOGRAPHY BY JOHN SKALICKY



**N**ot only is Michelle Farmer MA '10, OTD '11 an assistant professor of clinical occupational therapy and the lead therapist at USC-Eisner Pediatric and Family Medical Center, she's also one of the nation's handful of occupational therapists working in a team-based primary care setting.

"It's very unique because the way I provide care may not be the same way an OT in a different primary-care setting provides care," Farmer says. "I can treat the whole patient; I'm not limited to an extremity."

According to a 2013 report from the American Occupational Therapy Association, USC-Eisner is one of only three organizations in the country where occupational therapists contribute to team-based models of primary care. This approach is heralded as a centerpiece of reform efforts designed to yield higher quality care outcomes.

Farmer delivers services to children age 5 and younger as well as to adults with disabilities and senior citizens. Alongside a team of pediatric physicians and specialists, she treats children at medium risk for developmental delays. At a well child appointment, a parent will complete an *Ages and Stages Questionnaire*, an assessment that helps determine their child's risk for developmental delays. Children identified as high risk are referred to established systems like regional centers—nonprofit private corporations that contract with the state's Department of Developmental Services—while medium-risk children who may not qualify for services can return to Eisner for further evaluation.

As Farmer explains, a child's long-term health and well-being, including educational performance and participation, is put at stake without early, coordinated services.

"Allowing these children to enter kindergarten without proper evaluation and intervention may cause them to fall through the cracks," she says. The academic consequences can follow children for years, as they fall behind their peers and behind educational standards, even to the point of having to repeat grade levels.

But it's not only children who are seen at Eisner. From family planning services to senior care, the facility treats patients across the lifespan—doing so in an innovative way. As a Patient-Centered Medical Home, the medical center partners patients with a primary care physician who then serves as the key liaison with a medical team. It's a cutting-edge, holistic approach to health care delivery. The team—spanning the disciplines of medicine, pharmacy, social work, occupational therapy and case management—works together on a care plan to set common goals.

Farmer also treats adults with disabilities and seniors. She often conducts home safety evaluations and fall risk assessments, focusing on prevention while also taking into consideration the patient's specific circumstances.

"Our patients are from underserved communities that haven't had access to therapy services addressing their needs specific to their chronic conditions," she says. "There are patients with cerebral palsy who have





By using play to engage her pediatric patients, including 3-year-old Kelly Guerra (pictured here), who are diagnosed on the autism spectrum, Dr. Michelle Farmer works towards the goal of further developing their behavioral and fine motor skills

been in the same wheelchair for over 20 years and have developed further complications from poor positioning.”

In 2011, Eisner Pediatric and Family Medical Center, formerly known as the California Babies Hospital, merged with the Keck School of Medicine of USC’s Family Medicine Residency Program and the California Hospital Medical Center to form the USC-Eisner Pediatric and Family Medicine Clinic at California Hospital Medical Center. This comprehensive partnership allows physician residents to rotate through California Hospital Medical Center, and allows the clinic to be designated a Federally Qualified Healthy Clinic (FQHC), meaning that funding and operation are largely overseen by the Centers for Medicare & Medicaid Services. The benefit to patients, especially those in downtown Los Angeles who might not otherwise receive comprehensive care, is that the FQHC system provides direct access to OTs and OT services.

“Being an FQHC [gives] patients access to a range of services not typically provided in a community health clinic setting, such as prenatal and mental health services,” Farmer says.

Since its 2011 merger, USC-Eisner has provided family-centered care to more than 8,000 patients across Southern California.

Staffers also tap Farmer’s expertise on other cases involving brief assessments and intervention.

“What we have worked really hard on is identifying screening tools and assessments that all providers can contribute to,” she says. “OTs are

known for having our own jargon, which is really important, but in these situations it’s important to identify tools that all providers find valuable.”

For example, the *Patient Health Questionnaire* (PHQ-9) is used to identify depression risk among pregnant women. The screening, which looks at the symptoms of depression and its impact on function, is a useful tool for clinicians and especially relatable to OTs. When treatment teams review a PHQ-9 and identify a client’s occupational challenges, OTs can subsequently be consulted to address them.

Farmer is also responsible for educating faculty and residents about the scope of OT—and when an OT referral is appropriate.

“There are parents who express concern to their pediatric physician that their child is only eating one type of food and cannot tolerate any other food near his or her mouth,” Farmer explains. “I point out that that’s something [physicians] can refer to me for further evaluation.”

Whether it’s providing education about occupational therapy to other medical professionals, working with at-risk children or collaborating with other providers in today’s interprofessional healthcare landscape, Farmer’s got a heavy workload. But, she says, she’s able to do it because of her Trojan education.

“It was my training at USC and the mentorship of Dr. Florence Clark that allowed me to step into this role,” she says. “Without the leadership and clinical training, I would not have been prepared for this very demanding, yet incredibly exciting and important work.”



# In Print

**Stanley Azen** co-authored “The Chinese American Eye Study: Design and Methods” in *Ophthalmic Epidemiology*. The article highlights the design and procedures for conducting the Chinese American Eye Study, research that examines the prevalence of ocular diseases in Chinese Americans.

**Lisa Aziz-Zadeh** co-authored “Information Processing in the Mirror Neuron System in Primates and Machines” in *Neuroinformatics*. In the article, the authors explore connections between brain operating principles to neuroimaging and neurophysiological data to compare predictions against selected sets of neurobiological data.

**Stefanie Bodison** co-authored the chapter “Motor Control and Motor Learning Processes in Autism Spectrum Disorders” in the fourth edition of *Handbook of Autism and Pervasive Developmental Disorders, Volume 2: Assessment, Interventions, and Policy*.

**Sharon Cermak** co-authored “Activity Preferences, Engagement and Quality of Life in Children and Adolescents with Acute Lymphoblastic Leukemia” in the *International Journal of Child Health and Human Development*.

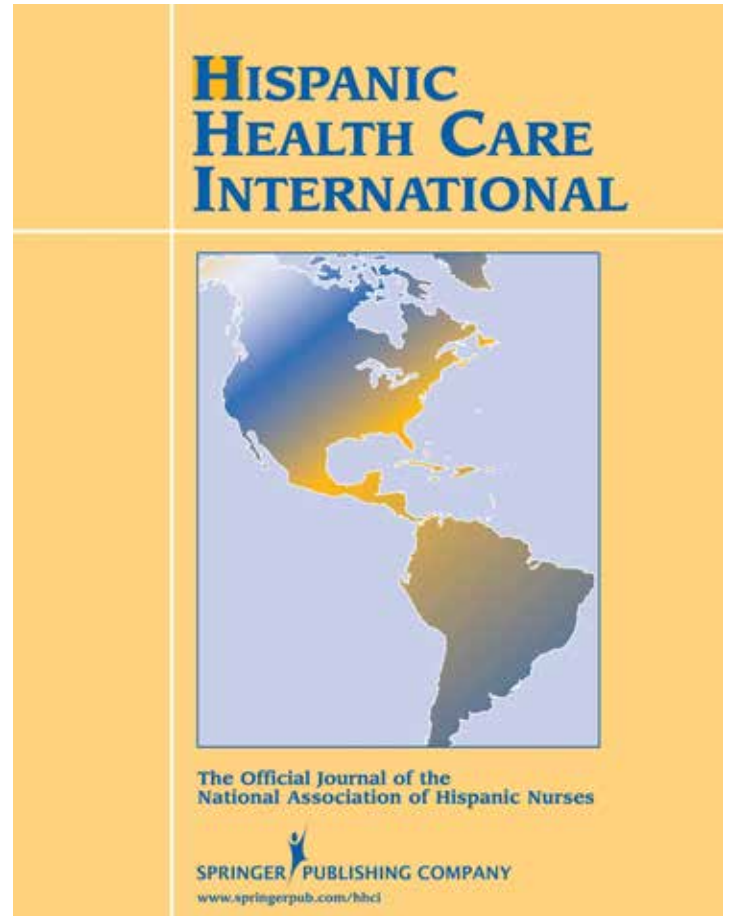
**Florence Clark** co-authored “As Viewed From Above: Connectivity and Diversity in Fulfilling Occupational Therapy’s Centennial Vision [Farewell Presidential Address]” in the *American Journal of Occupational Therapy*. This article, a transcript of her final address as American Occupational Therapy Association’s president, explores how diversity and connectivity are central to fulfilling occupational therapy’s promise to, and impact on, societal health needs.

**Florence Clark** co-authored “Cortisol Diurnal Patterns, Associations with Depressive Symptoms, and the Impact of Intervention in Older Adults: Results Using Modern Robust Methods Aimed at Dealing with Low Power Due to Violations of Standard Assumptions” in *Hormones and Behavior*. The article encourages the use of modern, robust methods to reduce the probability of statistical error in behavioral and social science research incorporating salivary bioscience.

**Florence Clark** and **Beth Pyatak** co-authored “Developing an Integrated Occupational Science Research Program: The USC Well Elderly and Pressure Ulcer Prevention Studies” in *Occupational Science for Occupational Therapy*.

**Cheryl Mattingly** authored “The Moral Perils of a Superstrong Black Mother” in *Ethos*. The article argues for the use of first-person, neo-Aristotelian virtue ethics as an alternative to traditional Foucauldian-style analysis when studying the creation of subject positions in clinical situation through moral subjugation. Mattingly shows how biopower explains moral subjugation but fails to address moral perils such as moral tragedy.

(Continued on page 26)



**Sharon Cermak** co-authored “Psychosocial Determinants of Participation in Moderate-to-Vigorous Physical Activity among Hispanic and Latina Middle School-Aged Girls” in *Hispanic Health Care International*. The authors studied physical activity-related psychosocial factors, weight status and self-reported participation in moderate-to-vigorous physical activity among Latina middle school-aged girls. Highly active girls demonstrated significantly greater social support for physical activity, motivation to exercise, and positive meanings of physical activity as opposed to less active girls who reported more screen-time activities than highly active girls. The study concluded that positive psychosocial factors may predict involvement in moderate-to-vigorous physical activities for Latina middle school-aged girls. [dx.doi.org/10.1891/1540-4153.11.3.142](https://doi.org/10.1891/1540-4153.11.3.142)



FUTURE

# GenNext

## Kate Holford MA '14 Occupational Therapy

### HOMETOWN

Denver, Col.

### UNDERGRADUATE STUDIES

BS, Business Administration and minor in Cinema Studies from USC

### OT AREAS OF INTEREST

Primary care and *Lifestyle Redesign*

### MEANINGFUL OCCUPATIONS

Indoor cycling/spinning, reading, seeing movies and trying new restaurants.

### PREVIOUS LIFE

Before coming back to USC for her master's degree, Kate worked in public relations for the entertainment industry for five years.

### HER 10-YEAR PLAN

I'd like to be a role model and a mentor to younger occupational therapy students and other young people who want to make a positive change in themselves and others.

### What initially drew you to occupational therapy?

I wanted a career that would give me a fulfilling purpose, that was flexible and not monotonous and that gave me job security.

### Who are your role models?

Facebook COO Sheryl Sandberg for being a fearless role model for women, Dr. Florence Clark for her outstanding contributions to occupational science and occupational therapy and Dr. Seuss for the simple wisdom that we should always be kind to others and be comfortable in our own skin.

### If you weren't an OT, what's a second career choice you could see yourself doing?

I could see myself being a shoe designer. Everyone who knows me knows I love shoes, and I might as well follow my passion!

### What is the most misunderstood aspect of OT?

That our sole job is to rehabilitate people after an injury or trauma. I love helping people get back to their meaningful activities; I also love to ensure that people engage in health-promoting occupations before something unfortunate happens.

### Which USC classes have made the biggest impact on you?

I really enjoyed my primary care elective (OT-500) this past fall. I had an opportunity to observe and shadow residents at two primary care clinics. I also had the opportunity to participate in the USC Student-Run Clinic, a clinic for L.A.'s underserved population, incorporating interdisciplinary care from the medicine, occupational therapy, physician assistant and pharmacy programs. [The students] work under the supervision of licensed professionals from USC.

### Why did you become a Trojan?

I became—and remained—a Trojan because I know no other academic institution that gives you such a balance of academic challenge and the feeling that you belong to a family. I am proud to be a second-generation Trojan, and I hope the legacy will continue some day.

### In what way would you like to propel the profession forward into the 21st century?

I want to be at the forefront of how occupational therapy plays a vital role in preventative medicine. "Health" and "wellness" are such huge buzzwords in our society today, and I feel that occupational therapists can assist people in ensuring that their routines and everyday habits are ones that promote their best selves.



# In Print

(Continued from page 24)

**Cheryl Mattingly** authored “Moral Selves and Moral Scenes: Narrative Experiments in Everyday Life” in *Ethnos: Journal of Anthropology*. The article examines how individuals utilize moral work not only to create a better life for themselves but also for the social and material spaces they inhabit. Three moral imaginaries—the trial, the artisan workshop and the moral laboratory—are used to illustrate this moral work.

**Stacey Schepens Niemiec** co-authored “Effects of Cognitive Task Demands on Subsequent Symptoms and Activity in Adults with Symptomatic Osteoarthritis” in the *American Journal of Occupational Therapy*. While adults with osteoarthritis regularly experience fatigue that is negatively related to physical activity, this study seeks to understand the effect of cognitive task demands on fatigue and occupational performance. Results show increased fatigue and decreased pain for two days after completing the given lab task, suggesting that cognitive task demand may contribute to fatigue and pain in adults with symptomatic osteoarthritis.

**Deborah Pitts** co-authored “Assessment” in *Best Practices in Psychiatric Rehabilitation*, published by the Psychiatric Rehabilitation Association.

**Beth Pyatak** co-authored “Living Legacy of Diabetes: Intergeneration Influences on Diabetes Care in Latino Families.” Students Kristine Carandang PhD '18 and Shain Davis MA '12, OTD '13 were also co-authors. The paper won the Citation Abstract Winner at the Society of Behavioral Medicine's 35th annual meeting.

**Shawn Roll** co-authored “Use of Contrast Enhanced Sonography to Investigate Intraneural Vascularity in a Cohort of Macaca Fascicularis with Suspected Median Mononeuropathy” in the *Journal of Ultrasound in Medicine*. The study provided clinical evidence for using contrast-enhanced sonography to detect and quantify changes in intraneural vascularity due to median mononeuropathy, proving that controlled exposure models can demonstrate change in intraneural vascularity of the median nerve between working and recovery.

**Derek Snyder** co-authored “Comparison of the Hedonic General Labeled Magnitude Scale with the Hedonic 9-Point Scale” in the *Journal of Food Science*. The study argues for use of the hedonic general Labeled Magnitude Scale to yield valid group comparisons especially because the scale is more suitable for across-group comparisons of food palatability.

## Journal of Aging and Physical Activity

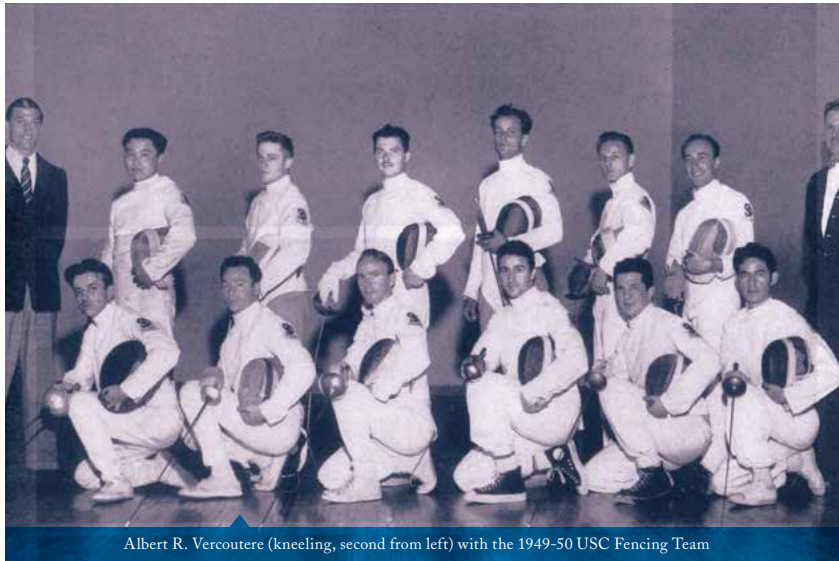
### IN THIS ISSUE

Cardiorespiratory Fitness, Obesity, and Functional Limitation

Assessment of Physical Activity in the Cognitively Impaired

Physical Activity Post-Hip Fracture

**Rachel Proffitt**, a postdoctoral fellow in USC's Training in Rehabilitation Efficacy and Effectiveness Trials T32 postdoctoral training program, co-authored “Comparison of Older Adults' Subjective Experience with Virtual and Real Environments During Dynamic Balance Activities” in the *Journal of Aging and Physical Activity*. The study compared the subjective experiences of older adults working with virtual and real settings. Results found that participants favored the virtual activity over the real activity. Participants also exhibited an increase in presence and absorption during the virtual task. The findings will help develop balance training games for homes and communities.



Albert R. Vercoutere (kneeling, second from left) with the 1949-50 USC Fencing Team



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## IN MEMORIAM

*Albert R. Vercoutere '53*

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Albert R. Vercoutere '53 died Nov. 19, 2013, at his home in Atascadero, Calif. He was 91.

Vercoutere served in the U.S. armed forces in Burma during World War II and was awarded two bronze medals for his efforts. After returning stateside he enrolled at USC and graduated in 1953. He held positions as an occupational therapist and as assistant supervisor of rehabilitation at the newly opened Atascadero State Hospital, a forensic psychiatric hospital in Atascadero, Calif.

Although art therapy was still in its infancy, Vercoutere implemented a variety of therapeutic modalities with patients, including construction of a 1-to-25 scale model of the Mission San Juan Bautista, recognized at the time as the most exacting replica of a California Mission ever produced. It is still on display at the mission today. A collection of pre-psychotropic artwork produced by patients under his supervision, numbering more than 300 pieces, has been featured in 13 college-level textbooks.

Vercoutere later held various positions at Camarillo State Mental Hospital (in Camarillo, Calif.), including chief of rehabilitation services, assistant to the hospital director and director of acute psychiatric intervention, alcohol/drug abuse and research. While working at Camarillo State Hospital, he proposed and received funding for seven federal grants to support therapeutic programming.

Vercoutere also held faculty positions teaching courses on supervision and management at Ventura College (in Ventura, Calif.), Oxnard College (in Oxnard, Calif.) and San Fernando Valley State College (now known as California State University, Northridge). He also served on various boards for the National Institute of Mental Health (in Bethesda, Md.), Veterans Rehab Project (in Sawtelle, Calif.), National Mental Health Association (now known as Mental Health America) of Greater Los Angeles and of Ventura, and Camarillo State Hospital and Atascadero State Hospital.

In retirement, Vercoutere moved back to Atascadero and continued to work part-time as an occupational therapist in hand and cognitive therapy.

—Janice Vercoutere



# A Deeper Meaning

Every issue, we invite someone from the Division to share with the Trojan Family their inspirations—past, present and future—in their personal and professional life. Here, Associate Professor and Associate Chair for Curriculum & Faculty Ann Neville-Jan tells us why she became an OT.

BY ANN NEVILLE-JAN

*It's Always Something.* That was the title of Gilda Radner's autobiography, which she wrote in 1989 near the end of her battle with ovarian cancer. She was definitely a fighter, and her book was described by critics as “seriously funny,” up front and honest, but charming too. Throughout my career in occupational therapy, my inspirations have been always something though never just one thing.

In high school, one of the nuns—a science teacher—inspired me. I took all the science classes I could; I loved science. Another teacher—my art teacher—also inspired me. I remember her saying, ‘I think you could do something in art,’ but I never went that direction.

As an undergraduate in college I majored in biology. All of my lab partners were pre-med, but medical school was just never an option for me. I thought I was going to be a genetics scientist, but during my junior year I decided I wanted to work with people, not with test tubes.

I have spina bifida and growing up I only received physical therapy, never occupational therapy. So I didn't know much about the profession. Actually, my sister had a career book that talked about OT, which is where I first heard about it. If I never read that career book I would never have thought about a career in occupational therapy! The idea of occupational therapy's combination of the arts and sciences is really what inspired me first.

Along the way I had really good mentors too. I initially went into mental health practice because I had a great psychosocial mentor and field-work instructor. I remember my mentor taking me to lunch one day and saying, ‘You know, I think you should write up your program and submit it to [the American Occupational Therapy Association] Conference.’ It was accepted, and I went to my first AOTA Conference where I met Gary Kielhofner MA '75 who then became my next career mentor.

As far as my inspirations today, I've started taking painting classes. The instructors lead you through sketching, then to drawing, charcoals, shading, oil painting in grays and finally oil painting in colors. I've been painting still life, which really lets me relax during the day-to-day and lets me use my right brain more. So that's what's inspiring in my personal life right now.

But in my professional life, all the people at USC—the faculty, students and administrators—their works and efforts, are what inspire me today. Right now I'm teaching clinical reasoning and therapeutic use of self to students in our entry-level master's degree program, getting them to look at their own prejudices and perspectives. Those are two of the main reasons why I first got into the profession, and what I still love about OT: you're always changing and learning about yourself. Occupational therapy has been more than just my career; it's all integrated into who I am.



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