



Improvement of Quality-of-Life and Occupational Participation for Women with Substance Use Disorder

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Mariposa Women & Family Center

- * Non-profit, privately supported, outpatient mental health clinic

Mission & Philosophy Statement

“Empower Orange County’s women and families to achieve positive changes in their lives by providing high quality, low cost mental health & substance abuse counseling, life skills, and supportive services to women, men, children, and families who otherwise would be unable to afford the help they need.”



Needs Assessment Summary

- * Additional funding and resources
- * Assistance with performing ADLs: dressing and grooming/hygiene tasks, IADLs: financial management and home management & maintenance, work, social participation, leisure exploration & participation, and community re-integration
- * Provide education, training, and implement interventions to help clients return to their roles and routines

Limitations

- * Frequency of Group
- * Small Sample Size
- * Inconsistency of Participants Attending Group
- * Time
- * Funding

Literature Review

- * Use of occupation-based interventions resulted in better occupational performance and health outcomes for individuals with mental health disorders (D’Amico et al., 2018).
- * Group interventions improved life skills and coping skills as well as promoted satisfaction with occupations (Holmefur et al., 2019).
- * Lack of social support support for individuals with addiction negatively affected the continuation and adherence treatment (Cruz-Feliciano et al., 2017).

Student Individualized Learning Objectives

- * At the end of the DEI, the occupational therapy doctorate student ran weekly groups with supervision of another therapist
- * At the end of the DEI, the occupational therapy doctorate student analyzed and evaluated the effectiveness of the program
- * At the end of the DEI, the occupational therapy doctorate student developed resource tools such as handouts and pamphlets for clients during group sessions

Student-Led Occupation-Based Program

To be implemented and facilitated by an occupational therapy doctorate student or licensed occupational therapist

Program Topics

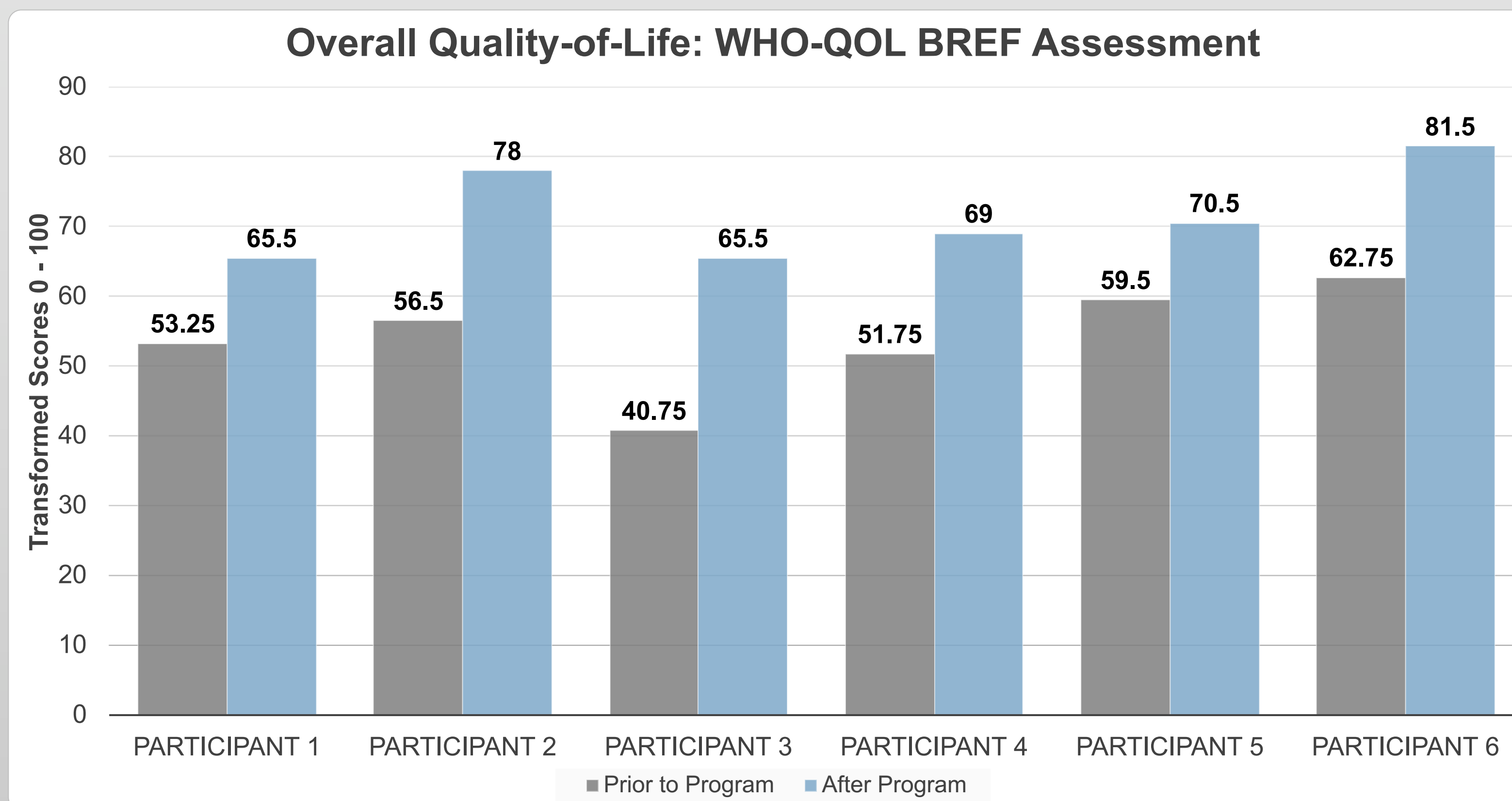
1. Coping Skills – Stress Management
2. Leisure Exploration & Participation
3. Work – Resume Building.
4. IADLs – Financial Management
5. ADLs – Self-Care
6. Life Skills

Project Outcomes

WHO-QOL BREF Assessment: Quality-of-life Efficacy from Pre-test to Post-test ($p < 0.05$)

T-Test: Paired Two Sample for Means for Overall QOL	WHO-QOL BREF	
	Post-Test	Pre-Test
Mean	71.6666667	54.0833333
Variance	44.2666667	58.8416667
Observations	6	6
Pearson Correlation	0.73591121	
df	5	
t Stat	8.14071322	
P(T<=t) one-tail	0.00022709	
t Critical one-tail	2.01504837	
P(T<=t) two-tail	0.00045417	
t Critical two-tail	2.57058184	

WHO-QOL BREF Scoring:
Higher Scores denotes Higher Quality-of-Life



Scholarly Deliverables

Physical and Digital Binder Handouts and Pamphlets



7 Group Protocols | 20 Handouts & Pamphlets

Implications for Occupational Therapy

- * Played a critical role to one’s life addressing issues that many healthcare professionals may neglect
- * Made a difference to the lives of each participant
- * Helped develop the necessary skills to be independent and participate in the things they need and want to do
- * Occupational therapy helps foster hope, change, empowerment, and motivation

Acknowledgements

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References Available Upon Request