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**THE ROLE OF OCCUPATIONAL THERAPY IN MODERN REHABILITATION PRACTICE**

**Introduction.** Since 2006, the Cabinet of Ministers of Ukraine included occupational therapy to the list of physical rehabilitation services, which was provided to the people with impaired locomotor apparatus and nervous system [2], however, higher education institutions in Ukraine did not train specialists in this specialty. CMU Resolution No. 53 of 01.02.2017 [2] has enacted a new specialty 277 "Physical Therapy, Occupational therapy", which will fill the labor market with the demanded specialists in the field of healthcare – occupational therapists. In Ukraine, as well as in Kazakhstan, occupational therapy as a sphere of professional activity is uncommon, but relevant in the market for rehabilitation services, so this topic is actively discussed by scientists and practitioners at various conferences.

**Research results.** Occupational therapy as a profession arose in the 20th century, although the scientific substantiation of the use of activities and movements for therapeutic purposes was carried out later. Most authors agree that this profession was first introduced in the field of psychiatry in the late XVIII-XIX c.

In 1917, the American National Society for the Promotion of the Promotion of Occupational Therapy was founded, and in 1921 it was renamed to the American Association of Occupational Therapists. After the Second World War, when the world community faced the problem of massive disability of people of working age, national organizations of occupational therapy began to appear in many countries. In 1952 the World Federation of Occupational Therapies (WFOT), which has 73 national organizations, was established. There is also the Council of Occupational Therapists for the European Countries (COTEC – http://www.coteceurope.eu), which publishes special journals, congresses and conferences. COTEC was established in 1986 to coordinate the views of the National Association of Professional Therapies of the then member countries of the European Communities. In 1983, the European Council in Brussels agreed that "mutual recognition of diplomas is an important step in creating satisfactory conditions for the pursuit of a number of occupations," including professional therapists. In Malta, the first General Assembly of COTEC was held in Malta in 2013. In 2016, the first COTEC ENOTHE congress in Ireland was held. Occupational therapy has been successfully developed in Australia, Canada, the United States, and Sweden.

The analysis of literature in recent years has shown a lack of consensus among scholars regarding the interpretation of the term "ergotherapy". In Russia, this type of activity is defined by the term "occupational therapy". Ukrainian scholars define ergotherapy as employment therapy [1], noting that the word "occupation" used in English comes from the Latin "occupatio" and translates into "employment" and refers to the orientation that a person "involve or capture". Other researchers use the terms "ergotherapy" as "occupational therapy", "healing by labor," referring to the process of performing this type of activity [4].

The modern system of physical and social rehabilitation is patient-centric and includes a new approach to rehabilitation – occupational therapy – improving the quality of life of people with a health deviation. Occupational therapy helps people of all ages with a disease, cognitive impairment, developmental deviations, and physical defects to be as independent as possible (defined by the American Association of occupational therapists). The purpose of occupational therapy is not only the restoration of lost functions, but also adaptation to normal life, assistance in achieving maximum autonomy, mobility in everyday life. The tasks of occupational therapy include: the detection of existing disorders, the development of functional capabilities of man, which are necessary in everyday life; helping a person with a disability or a state of health to become as independent as possible through the use of special devices; creation of optimal conditions for the development and self-realization of a person with disabilities through her employment in various spheres of life. For this purpose, modern technologies of medicine, pedagogy, psychology, sociology, ergonomics and other sciences are used, therefore, occupational therapy is an interdisciplinary branch.

In ergotherapy, the term "occupation" refers not only to occupational therapy, it characterizes the various activities that occur in the life of each person and give it meaning. Traditionally, activity is distinguished in everyday life, activity in work and productive activity, activity in the game, recreation and interest.

Activity in everyday life includes: measures for personal hygiene (hair care, washing, toilet use, etc.); dressing; meal; observance of the rules necessary for maintenance and preservation of health; socialization; functional communication and mobility; the opportunity to be mobile in society; satisfying sexual needs.

The activity in work and productive actions includes: fulfillment of home duties (care of clothes, apartment cleaning, cooking, maintenance of cleanliness, safe living in an apartment); care for other people; the opportunity to learn something new; research activities (choice of profession, search and execution of a particular job, retirement planning, voluntary participation in something).

Activity in the game, recreation and hobbies include: the ability to choose a game, ways of rest, types of hobbies; possibility to perform necessary actions during rest, games.

Occupational therapy is based on the following principles: 1) an individual approach – when planning the rehabilitation process, the needs and interests of the person in need of help are taken into account; 2) scientifically grounded and culturally oriented practice – use of modern scientific achievements, taking into account cultural norms of each individual; 3) integrity – the application of an interdisciplinary approach, involving a person in meaningful employment, which will positively affect her health, well-being and bring her life satisfaction.

Occupational therapy involves the process of cooperation with the client and his family; includes diagnostic evaluation, goal setting, and intervention program implementation. The occupational therapist evaluates: functional disorders, actual problems and opportunities of the client; physical and social environment at home and out of the home; the influence of the above factors on activity in everyday life.

In the domestic system of rehabilitation distinguish three main forms of occupational therapy: 1) consolidating (tonifying), aimed at increasing the vital tone of the patient, creating the psychological preconditions necessary to restore his ability to work; 2) restorative (functional) – based on the prevention of motor disorders or restoration of temporarily reduced functions of the motor apparatus through the development of the lost function, the launch of compensatory mechanisms. To do this, light workloads are used to provide the maximum amplitude of movements (threading, toy making, etc.), restore muscle strength (work with a saw, shovel, etc.) and develop coordination (weaving, knitting); 3) professional (production), which facilitates the restoration of the affected by the disease of production skills. In this kind of occupational therapy the professional capabilities of patients are evaluated; patients, which have with lost professional ability or its partial sustained reduction, can be prepared for the training of a new profession [3].

The program of occupational therapy is usually carried out in a natural environment for the person (at home, at work, sanatorium, etc.), since the performance of any task depends on the motivation of the patient and the environment in which it occurs. The occupational therapist can adapt the objects used by the patient (clothes, computer), the situation (to install the handrails, to pick furniture, to change the location of items in the room, to expand the door openings, etc.) or to pick up the necessary special equipment (wheelchairs, walkers, hobbies items, etc.)

**Conclusions.** Occupational therapy is needed in cases where the patient experiences problems with self-care, work and leisure. Occupational therapists will help to realize medical, physical, psychological, pedagogical, professional measures of a restorative nature, aimed at preventing the progress of pathologies, eliminating or maximally compensating for limitation of life, rehabilitation of health and work skills.

**Список використаних джерел**

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