

Asia Occupational Therapy Association Exchange Meeting (November 9, 2023) Post COVID-19 issues particularly in each country

POST COVID-19 ISSUES IN JAPAN

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International Director of JAOT, Kitasato University Higashi Kanagawa Rehabilitation Hospital Kayoko TAKAHASHI Masatoshi TAHARA

OUTLINE

Post COVID-19 issues as Association (JAOT)

Post COVID-19 issues in OT education

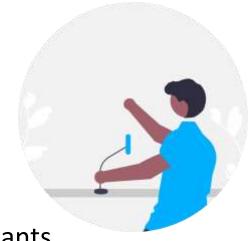
Post COVID-19 issues in clinical settings

Post COVID-19 issues among therapists



POST COVID-19 ISSUES AS ASSOCIATION (JAOT)

CONGRESS



✓ Congress style has been changed and so the number of participants

Year	Congress style	Number of participants
Pre-COVID	on-site only	About 4,000
2020	on-demand web conference	3,300
2021	live and on-demand web conference	2,700
2022	onsite (Kyoto) and on-demand	Over 2,700

- ✓ When only on-site conferences were held, venues were selected only in major cities to accommodate the size of the conference.
- ✓ With the hybrid format, venues are no longer limited to major cities, giving attendees more options in both style and location.

CONTINUING EDUCATION



- ✓ E-learning has been introduced partially since 2018. Since COVID-19 pandemic in 2020, most non-practical courses are now online.
- Comments from JAOT members:

"I can now attend seminars whenever and wherever"

"I could take courses at home with small children"

"It is good for more experienced (older) generation who feel uncomfortable attending courses with young/novice group"

"On-line courses has lowered the bar to take seminars in other areas of interest"

Number of participants for continuing education continues to grow steadily

MANAGEMENT



- ✓ Prior to COVID, prefectural association leaders from all over Japan needed to gather at the central training program to gather. Now, online meting allows us to deliver information quickly and widely at once.
- ✓ While online meetings allows to exchange ideas among, it is difficult to build a close relationship to stay in touch afterward.
- ✓ The decline in the organization rate has also become a major concern, and we are reviving face-to-face meetings so that people can feel the benefits of connecting with others through the association.

Online meetings is convenient but difficult to feel the benefit to connect



POST COVID-19 ISSUES IN OT EDUCATION

PLACEMENT/FIELDWORK



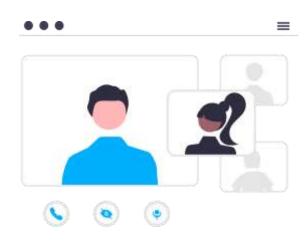
On-site clinical placement is carried out without any problems

✓ Notification from the Ministry of Health, Labour & Welfare (October 17, 2023)

In the event that an outbreak of infectious diseases at a school training institution or practical training facility during the period when the practical training is to be conducted makes it unavoidably difficult to conduct the practical training, it is allowed to substitute on-site placement to on-campus practice (March 31, 2024).

✓ Teaching materials (case scenario and videos) created during pandemic are now distributed and shared among schools.

ONLINE COURSES



What we can do ONLINE has been expanded

- ✓ We are now able to hold lectures by lecturers both in Japan and abroad without having to invite them to campus.
- ✓ Online module (ie. Google classroom) is still used to give handouts, assignment, and feedback. This allows the transparency of class/grading.
- ✓ More opportunities for online international exchange. Interacting online before studying abroad is now possible, resulting in a smoother international experience.





Changes in the clinical environment

- ✓ Separate training areas for inpatients and outpatients
- ✓ Home evaluations, shopping practice, and outdoor training were completely prohibited at the beginning of the pandemic, but were gradually allowed
- Educational programs that used to be held for patients and their families, with instructors such as occupational therapists, doctors, and nurses, are now held ondemand on each floor



Restrictions on patient and family support

- ✓ Family members will be prohibited from visiting the rehabilitation training room
- ✓ There are restrictions on family visits, and depending on the infection situation within the hospital, there may be cases where the visit is limited to 30 minutes or where the visit is prohibited
- ✓ Lectures for families will be limited to 30 minutes a day and will be held in a private lecture room



Changes in occupational therapists

- ✓ At the beginning of the pandemic, staff members were prohibited from having meals together and unnecessary going out, but this was gradually allowed
- ✓ It is still mandatory to wear a mask when commuting to work

Our hospital manual for each infection control phase

Phase 1: No COVID-19 infections

Rehabilitation for inpatients continues as usual

Phase 2: Hospitalized patient infected with COVID-19

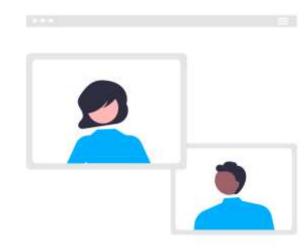
Infected patients are isolated and trained by therapists wearing PPE

Phase 3: Secondary infection occurs within the hospital

New hospitalizations are restricted and family visits are prohibited

Patients train in the ward and are prohibited from giving lectures to their families

Therapists are prohibited from training outpatients



Impact on Collaborative Practice

Collaboration with out-of-hospital service providers was limited compared to inhospital

✓ Since care managers who support patients after discharge were restricted from meeting with patients, we used a web conferencing system (ZOOM) to check patient movements and adjust post-discharge services



Impact on outside training

Training outside of places where many people gather, such as shops and stations, was restricted

✓ We selected a deserted road as a training course and conducted mock shopping practice inside the hospital



Impact on outside training

There were no restrictions on conducting house evaluations before discharge

✓ Thorough infection control measures were taken, including changing masks and disinfecting hands upon returning to the hospital



Impact on family support

Family members were prohibited from entering the rehabilitation room, and opportunities to observe training progress were limited. Because visitation was restricted, gathering and sharing information from family members was restricted



Impact on family support

- ✓ We filmed the training on a tablet and provided the information to the family during informed consent
- ✓ Family lectures on transfers, diaper changes, etc. were held for 30 minutes a day in a private room
- ✓ Gathered information from family members and listened to their needs over the phone, and shared goals using a web conferencing system



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COVID-19 impacts the mental health of occupational therapists

- ✓ Insufficient information from the workplace and increased workload are associated with depression, anxiety, and insomnia, and depression is associated with poorer quality of care
- ✓ The impact of the pandemic is different in the physical disability area and the psychological area, with increased workload being a factor associated with anxiety and depression in the physical disability area
- ✓ Providing adequate information significantly reduces the risk of insomnia and depression

Ito A, Sawamura D, Kajimura S, Miyaguchi H, Nakamura H, Ishioka T. Quality of therapy and mental health among occupational therapists during the COVID-19 pandemic. Front Public Health. 2022 Dec 15:10:1053703.

Sawamura D, Ito A, Miyaguchi H, Nakamura H, Ishioka T. Different Impacts of COVID-19 on Quality of Therapy, Psychological Condition, and Work Life Among Occupational Therapists in Physical and Mental Health Fields. Front Public Health. 2022 Jun 3;10:887069.

Ishioka T. Ito A. Miyaguchi H. Nakamura H. Sawamura D. Psychological Impact of COVID-19 on Occupational Therapists: An Online Survey in Japan. Am J Occup Ther. 2021 Jul 1:75(4):7504205010.

The COVID-19 pandemic is an occupational justice/injustice issue

- ✓ The pandemic brings about critical social inequalities and affects people's occupational justice
- ✓ The Occupational Justice Framework (OJF) approach is useful for estimating how systemic inequalities (limited access to health care, employment opportunities, government resources) affect work participation and the impact on mental health
- ✓ The role of occupational therapists is to advocate for opportunities for meaningful and satisfying occupational participation in a time when isolation and social distancing inhibit occupational participation

Impact of the COVID-19 on OTs from our research

- Cross-sectional study targeting medical workers during the first state of emergency declaration from April 30th to May 6th, 2020 (76.2% were occupational therapists)
- ✓ 66.1% had GHQ-12 above the cutoff value and had problems with their mental health
- ✓ Risk factors for mental health conditions include women, infrequent communication with friends, and high anxiety about infection
- ✓ Protective factors include good health, high job satisfaction, and high satisfaction with new activities started since the pandemic

Impact of the COVID19 on OTs from our research (unpublished)

- Cross-sectional study targeting therapists (OT: 614, PT/ST: 198) during the first state of emergency from April 30th to May 20th, 2020
- ✓ OTs have poorer mental health than PTs/STs, are more anxious about infection, and experience occupational injustice and occupational imbalance.
- ✓ Risk factors for mental health conditions in OTs include living alone, less communication with friends, high anxiety about infection, and being occupational marginalization
- ✓ Protective factors for mental health in OTs include good health and high job satisfaction

Impact of the COVID19 on OTs from our research (unpublished)

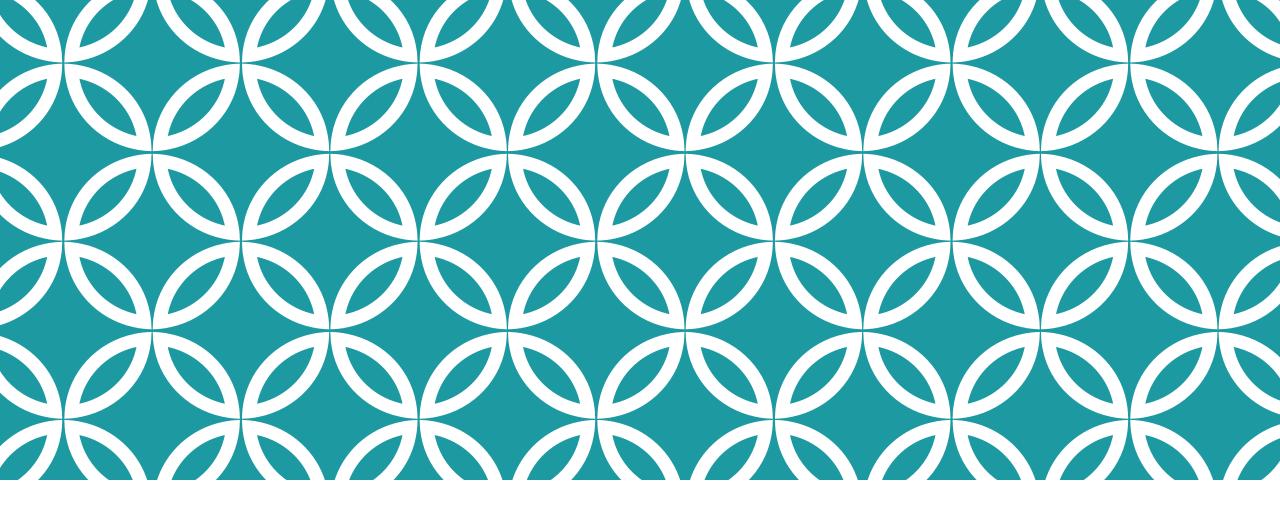
- ✓ A consecutive cross-sectional study of therapists (OT/PT/ST) comparing the beginning of the pandemic and one year later
- One year later, anxiety about infection decreased slightly, and satisfaction with leisure, work, and daily life improved (especially with daily activities such as shopping)
- ✓ At the beginning of the pandemic, risk factors for mental health were being female, living alone, less communication with friends, high anxiety about infection, and low life satisfaction
- ✓ The risk factors for mental health conditions have changed one year after the pandemic, with low financial security and low levels of leisure and job satisfaction

Impact of the COVID19 on OTs from our research (unpublished)

- ✓ A continuous cross-sectional study targeting therapists (OT/PT/ST) surveyed during the 3rd state of emergency declaration and 6 months before and after.
- ✓ Satisfaction with leisure time decreased during the third state of emergency, and a high percentage of people were in a state of work deprivation.
- Compared to previous studies prior to the pandemic, they were more likely to experience work deprivation, work imbalance, and work marginalization during the pandemic.

SUMMARY

- ✓ The clinical environment for occupational therapists has changed due to the COVID-19 pandemic, and there have been various restrictions.
- Services were provided using new intervention methods that adapted to changes and used ICT etc.
- ✓ During the pandemic, occupational therapists' workload increased, and their mental health declined.
- ✓ Various restrictions during the pandemic raise issues of occupational justice/injustice



POST COVID-19 ISSUES SUMMARY

POST COVID-19 ISSUES IN JAPAN

- ✓ During COVID-19 pandemic, occupational therapists experienced firsthand that occupation in society is what makes a person's life unique and well.
- ✓ This experience is reflected in our five-year strategy slogan "Occupational therapy that supports people's activities and participation and contributes to building a community-based society".
- ✓ The experience of the COVID-19 pandemic has made us realize once again that
 the role of the association is to support occupational therapists who support
 people's activities and participation, no matter what the situation in society is.



THANK YOU