

OTAT-1320: FUNDAMENTALS OF DEVELOPMENTAL DISABILITIES

Cuyahoga Community College

Viewing: OTAT-1320 : Fundamentals of Developmental Disabilities

Board of Trustees:

2018-01-25

Academic Term:

2018-01-16

Subject Code

OTAT - Occupational Therapy Assisting

Course Number:

1320

Title:

Fundamentals of Developmental Disabilities

Catalog Description:

Overview of developmental disabilities including physical and psychosocial conditions commonly referred to and treated by occupational therapists.

Credit Hour(s):

2

Lecture Hour(s):

2

Lab Hour(s):

0

Other Hour(s):

0

Requisites

Prerequisite and Corequisite

OTAT-1300 Occupational Therapy Principles, and departmental approval.

Outcomes

Course Outcome(s):

Research an assigned developmental disability condition most commonly addressed by occupational therapy practitioners and present findings to classmates.

Essential Learning Outcome Mapping:

Critical/Creative Thinking: Analyze, evaluate, and synthesize information in order to consider problems/ideas and transform them in innovative or imaginative ways.

Objective(s):

1. Define developmental disability, identify types of developmental disabilities, and recognize the impact of developmental disabilities across the lifespan.
2. Discuss the incidence, etiology, clinical features, and prognosis for children and adult diagnosed with developmental disabilities.
3. Recognize how to identify and utilize the right treatment activity to facilitate and obtain outcomes and goals.
4. Discriminate between commonly seen pediatric condition and use professional literature to make evidence-based practice decisions regarding appropriate occupation-based intervention plan based on the client's needs.
5. Explain the role of the occupational therapist and occupational therapy assistant in assessment of and intervention with children and adult with developmental disabilities.
6. Compare different strategies to improve the participation of individuals with developmental disabilities.

Course Outcome(s):

Apply the general principles of child development theories to occupational therapy practice situations and justify a developmental sequence of skill acquisition in performance and areas of occupation.

Objective(s):

1. Recognize and describe the contribution of key classic developmental theorists according to OT domain of function.
2. Define key terms in genetics and apply them to behavior development and health.
3. Compare and contrast developmental theories and their application to occupational therapy.
4. Discuss the interconnectedness of different facets of development and how they influence human function.
5. Verbalize understanding of the basic evolution of sensorimotor, psychosocial and cognitive development of the child from birth through adolescence.

Course Outcome(s):

Develop an action plan to implement culturally responsive practices within this particular population

Essential Learning Outcome Mapping:

Cultural Sensitivity: Demonstrate sensitivity to the beliefs, views, values, and practices of cultures within and beyond the United States.

Objective(s):

1. Describe the essential components of cultural awareness and cultural competence.
2. Recognize how culture shapes individual perceptions, beliefs, and values.
3. Discuss the complex interaction and differences between the terms culture, ethnicity, and race.
4. Explain how developmental expectations and developmental progression are culturally influenced.
5. Define paralanguage and offer examples of how it relates to culture and life span development.
6. Explain the effect of culture on health care beliefs and practices for OT practitioners and patients.
7. Use culturally competent practices in the provision of occupational therapy services.
8. Identify personal barriers to providing culturally competent care.

Course Outcome(s):

Identify the developmental and social considerations associated with augmentative and alternative communication strategies.

Objective(s):

1. Define communication as an aspect of human activity and participation.
2. Discuss the interrelationship between culture and communication.
3. Differentiate between the terms voice, speech, expressive communication, and receptive communication.
4. Discuss the implications of establishing communications with people who are limited to concrete symbols in communication.
5. Identify possible implications or limitations that may complicate communication with individuals with language or hearing impairments.

Course Outcome(s):

Recognize the signs and symptoms of behavioral and mental health disorders seen in children and adolescents.

Objective(s):

1. Define psychosocial occupational therapy practice for children and adolescents.
2. Explain how the occupational therapy assistant assists the occupational therapist in the evaluation process.
3. Identify assessment tools used by the occupational therapy practitioner to develop intervention.
4. Use evaluation results to guide psychosocial and mental health practice.
5. Select activities that support evidence-based practice.
6. Describe the types of occupational therapy group interventions used with children and adolescents who have psychosocial and mental health disorders.

Methods of Evaluation:

1. Research paper
2. Oral presentation
3. Exams
4. Quizzes

Course Content Outline:

1. Overview of developmental theories
 - a. Child development
 - b. Domains of development
 - i. Physical domain
 - ii. Cognitive domain
 - iii. Social/emotional domain
 - c. What is a theory?
 - d. Importance of theories
 - e. Theories
 - i. Psychoanalytical Theories
 1. Psychosexual - Sigmund Freud
 2. Psychosocial: Erick Erikson
 - ii. Behavioral and social learning theories
 1. Behaviorism: classical conditioning & operant conditioning
 2. Social learning - Albert Bandura
 - iii. Biological theories
 1. Maturationism - G. Stanley Hall & Arnold Gesell
 2. Ehtology - Konrad Lorenz
 3. Attachment theory - John Bowlby
 - iv. Cognitive theories
 1. Cognitive development: Jean Piaget
 2. Social cultural : Lev Vygotsky
 3. Information processing
 - v. Development sytems theory
 1. Ecological systems theory
 2. Bio-ecological model
2. Prenatal influences; children at risk
 - a. Prenatal development
 - b. Conception
 - c. Developmental process
 - d. From blastocyst to implantation
 - e. The Fetal support system
 - f. Cephalocaudal (Head to Body) Development
 - g. Prenatal development
 - i. Embryo at 4 weeks
 - ii. Embryo at 5-6 weeks
 - iii. Fetus at 9 weeks
 - iv. Fetus at 11-12 weeks
 - v. Fetus at 16 weeks
 - vi. Fetus at 18 weeks
 - vii. Fetus at 20 weeks
 - viii. Fetus at 28 weeks
 - h. Fetal behavior
 - i. Fetal experience
 - j. Fetal learning
 - k. Hazards to prenatal development - miscarriage
 - l. Risk factors
 - i. Age
 - ii. Nutrition
 - iii. Stress
3. Cultural proficiency in rehabilitation
 - a. The purpose of rehabilitation
 - b. Why cultural proficiency in rehabilitation?
 - c. Cultural proficiency
 - d. Overview of predominant ma
 - e. Mainstream American values
 - i. Scientific orientation
 - ii. Control of the natural environment

- iii. Progress and change
 - iv. Materialism
 - v. Individualism
 - vi. Moralistic orientation
 - vii. Time orientation
 - viii. Doing rather than being
 - ix. Egalitarianism
 - x. Role of woman
 - xi. Friendliness and openness
 - f. Cultural characteristics
4. Pediatric Health conditions
- a. Orthopedic conditions
 - i. Acquired musculoskeletal disorders
 - ii. Amputation
 - iii. Arthrogryposis
 - iv. Congenital hip dysplasia
 - v. Juvenile rheumatoid arthritis
 - vi. Osteogenesis imperfecta
 - vii. General Interventions
 - b. Genetic conditions
 - i. Achondroplasia
 - ii. Duchene muscular dystrophy
 - iii. Fragile X syndrome
 - iv. Prader-Willi Syndrome
 - v. Trisomy 21 (Down syndrome)
 - vi. General interventions
 - c. Neurologic conditions
 - i. Erb's palsy (brachial plexus injury)
 - ii. Seizures
 - iii. Spina Bifida
 - iv. Shaken baby syndrome
 - v. Traumatic brain injury
 - vi. General interventions
 - d. Developmental conditions
 - i. Attention deficit hyperactivity disorder
 - ii. Autism spectrum disorders
 - iii. Developmental coordination disorder
 - iv. Rett syndrome
 - v. General interventions
 - e. Cardipulmonary system
 - i. Cardiac disorders
 - ii. Pulmonary disorders/respiratory disorders
 - iii. Hematologic conditions
 - f. Sensory system conditions
 - i. Vision impairments
 - ii. Hearing impairments
 - iii. General sensory disorganization
 - iv. Language delay and language impairments
 - v. General interventions
 - g. Other pediatric health conditions
 - i. Burns
 - h. Neoplastic disorders
 - i. Leukemia
 - ii. Tumors of the central nervous system
 - iii. Bone cancer and tumor
 - i. Immunologic conditions
 - i. Human immunodeficiency virus
 - j. Environmentally induced and acquired conditions

- i. Lead poisoning
 - ii. Prenatal drug exposure
 - iii. Fetal alcohol syndrome disorders
 - iv. Failure to grow
- 5. Assistive technology
 - a. Definitions
 - b. Assistive technology team
 - c. Role of the Occupational Therapy Assistant
 - d. Characteristics of assistive technology
 - e. Assistive technology myths and realities
 - f. Assistive technology assessment
 - g. Assistive technology for pediatrics
 - i. Technology for leisure activities
 - ii. Environmental controls
 - iii. Simple communication technologies
 - h. Funding for assistive technology
- 6. Childhood and adolescent psychosocial and mental health disorders
 - a. Understanding psychosocial and mental health disorders
 - b. Neurodevelopmental disorders
 - i. Attention deficit/hyperactivity disorder
 - ii. Motor disorders
 - iii. Specific learning disorders
 - c. Disruptive, impulse-control and conduct disorders
 - i. Conduct disorder: childhood onset
 - ii. Oppositional defiant disorder
 - iii. Intermittent explosive personality disorder
 - d. Anxiety disorders
 - i. Generalized anxiety disorder
 - ii. Separation anxiety disorder
 - iii. Social anxiety (social phobia) disorder
 - e. Obsessive-compulsive and related disorders
 - i. Obsessive-compulsive disorder
 - ii. Body dysmorphic disorder
 - iii. Hoarding disorder
 - iv. Trichotillomania (hair pulling) disorder
 - v. Excoriation (skin-picking) disorder
 - f. Trauma and stressor related disorders
 - i. Reactive attachment disorder
 - ii. Disinhibited social engagement disorder
 - iii. Posttraumatic stress disorder
 - g. Depressive disorders
 - i. Disruptive mood dysregulation disorder
 - ii. Major depressive disorder
 - iii. Bipolar disorder
 - h. Schizophrenia spectrum and other psychotic disorder

Resources

American Psychological Association. *Publication Manual of the American Psychological Association*. 6th ed. American Psychological Association, 2009.

Case-Smith, J., O'Brien J.C. *Occupational Therapy for Children and Adolescents*. 7th ed. Mosby, 2012.

Cronin, A. Mandich M.B. *Human Development and Performance Throughout the Lifespan*. 2nd ed. Boston; Gengage Learning, 2016.

Wagenfeld, A. *Foundations of Theory and Practice for the Occupational Therapy Assistant*. 1st, ed. Baltimore; Wolters Kluwer, 2016.

Bonder, B., Martin, L. Miracle A. *Culture in Clinical Care*. 2nd ed. Thorofare; Slack Incorporated, 2006.

Mulligan, S. *Occupational Therapy Evaluation for Children*. 2nd ed. Philadelphia; Lippincott Williams Wilkins, 2014.

Solomon J.W. O'Brien J.C. (2016) *Pediatric Skills for Occupational Therapy Assistant*, St. Louis: ELSEVIER.

Resources Other

1. OhioLink.
2. Netscape.
3. Videos (updated as appropriate).

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