

Research Opportunities in the Area of Mental Health Promotion, Prevention, and Intervention for Children and Youth

MeSH TERMS

- health promotion
- leisure activities
- mental disorders
- occupational therapy
- research
- social development

The American Occupational Therapy Association (AOTA) Evidence-Based Practice Project has developed a table summarizing the research opportunities on mental health promotion, prevention, and intervention for children and youth. The table provides an overview of the state of current available evidence on interventions within the scope of occupational therapy practice and is based on the systematic reviews from AOTA's Occupational Therapy Practice Guidelines Series. Researchers, students, and clinicians can use this information in developing innovative research to answer important questions within the occupational therapy field.

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Planning a research project requires consideration of many factors. Level of interest and knowledge in a specific area, access to appropriate populations of participants, support of mentors and other researchers, and funding availability all help determine the focus of a future project. An additional component to be considered is whether adequate, up-to-date research has already been completed on a topic; if sufficient evidence is available in a given core area, this area might not be the best choice for another research project.

The best research topic may be one in which either little research has been done or the research to date is insufficient, inconclusive, or mixed. In addition, when research conducted to date provides a low level of evidence and is of limited quality, additional high-quality research in the area is needed.

The “Research Opportunities Table on Mental Health Promotion, Prevention, and Intervention for Children and Youth” provides an overview of the state of current available evidence on interventions within the scope of occupational therapy practice. The table is based on the systematic reviews from the Occupational Therapy Practice Guidelines Series developed by the American Occupational Therapy Association’s Evidence-Based Practice Project. The table lists specific interventions and indicates either that the evidence is sufficient to support the intervention or that moderate, mixed, or few studies support the intervention and therefore it is a priority research area. Please refer to the *Occupational Therapy Practice Guidelines for Mental Health Promotion, Prevention, and Intervention for Children and Youth* (Bazyk & Arbesman, 2013) and the *American Journal of Occupational Therapy* article “Systematic Review of Occupational Therapy and Mental Health Promotion, Prevention, and Intervention for Children and Youth” (Arbesman, Bazyk, & Nochajski, 2013) for more information on the topic area and the systematic review process.

This table also is posted online for researchers to use to inform the occupational therapy community about their work. The table is linked to Google Drive and offers a place for researchers to include information on recently completed and ongoing research. It is hoped that this information will make the

Research Opportunities Table on Mental Health Promotion, Prevention, and Intervention for Children and Youth

| Theme | Specific Intervention | Strength of Evidence |
|---|--|------------------------|
| Tier I: Universal mental health promotion and prevention services | | |
| Social skills | Whole-school and emotional learning programs to improve social and emotional skills | Research sufficient |
| | After-school programs incorporating a goal of social skills to improve social behaviors and reduce problem behaviors | Research sufficient |
| | School-based bullying prevention programs to prevent bullying and victimization | Research sufficient |
| | Problem-solving skills to improve coping behavior | Research sufficient |
| | Problem-solving skills to improve peer interaction in preschool-age children | Priority research area |
| | Parent education to improve child compliance | Priority research area |
| Health promotion | Parent education as part of a multicomponent school program to prevent aggressive behaviors in at-risk kindergartners | Priority research area |
| | School-based stress management programs for Grades 3–8 to reduce stress and improve coping skills | Research sufficient |
| | Mental health literacy programs for adolescents to improve knowledge and attitudes about mental illness | Priority research area |
| | Back education program for elementary school children to improve back posture while lifting objects and carrying backpacks | Priority research area |
| | Yoga to improve physical fitness and cardiorespiratory health | Priority research area |
| | Yoga to reduce negative behaviors in response to stress | Priority research area |
| Play, recreation, and leisure | School-based programs to improve self-efficacy | Priority research area |
| | Participation in performing arts programs to improve social interaction and social skills | Research sufficient |
| | Use of recreation facilitators in after-school programs to increase participation in physical activity | Priority research area |
| | Participation in performing arts programs to reduce emotional problems | Priority research area |
| | Team-building activities during physical education to improve self-concept | Priority research area |
| | Teaching of cooperation skills to elementary school children to increase cooperation and reduce competitive behaviors | Priority research area |
| | Skill-based activity groups to reduce involvement with the legal system | Priority research area |
| | Skill-based activity groups to improve behavioral outcomes | Priority research area |
| | Participation in performing arts programs to improve social interaction and social skills | Priority research area |
| | Tier II: Targeted mental health services | |
| Social skills | Social skills training for disliked or rejected children and adolescents to improve social interaction, peer acceptance, and social standing | Research sufficient |
| | Social skills programming for at-risk, aggressive, or antisocial children and adolescents to improve attention to tasks, peer interaction, and prosocial behaviors and to reduce aggressive, delinquent, and antisocial behaviors | Research sufficient |
| | Social skills programming for children and adolescents with learning disabilities and ADHD to improve communication and social and functional skills and reduce problem behaviors | Research sufficient |
| | Social and life skills programs for children with intellectual impairments and developmental delays to improve life skills, conversation turn taking, initiation of social interaction, self-management, and compliance and decrease problem behaviors | Research sufficient |
| | Parenting programs for teenage mothers and their children to improve mother–infant interaction and parental attitudes and knowledge, maternal mealtime communication, self-confidence, and identity | Research sufficient |
| Health promotion | Yoga for adolescents with irritable bowel syndrome to reduce gastrointestinal symptoms | Research sufficient |
| | A program of yoga, massage, and relaxation for children with behavioral difficulties to improve self-confidence and increase communication | Priority research area |
| | A guided imagery program combined with coping strategies for withdrawn or rejected first graders to increase socialization | Priority research area |
| | A multicomponent training program for children and adolescents with asthma to improve knowledge of asthma and internal locus of control and to decrease days off of school | Priority research area |
| | Yoga for youth with Type 2 diabetes to increase weight loss and self-esteem | Priority research area |
| | An activity-based group intervention for siblings of children with cancer to improve cancer-related knowledge, mood, and communication skills | Priority research area |
| Play, recreation, and leisure | Play groups for abused or neglected children to improve play skills, self-esteem, and positive feelings and to reduce solitary play and behavior problems | Research sufficient |
| | Play and music for children with intellectual and language impairments to improve social skills and attention to peers | Research sufficient |
| | Recreation, leisure, and physical education programs for children and adolescents with intellectual disabilities to improve social interaction | Research sufficient |

(Continued)

Research Opportunities Table on Mental Health Promotion, Prevention, and Intervention for Children and Youth (cont.)

| Theme | Specific Intervention | Strength of Evidence |
|--|--|------------------------|
| | Structured recreation and activity program for children with extreme shyness to increase extraversion and decrease timidity | Priority research area |
| | Creative activities for children and early adolescents with peer difficulty to improve self-confidence in managing peer conflict | Priority research area |
| | Activity-based summer program for children with cleft lip and palate to improve social interaction | Priority research area |
| | Activity-based after-school program for children with identified behavior problems to improve self-concept | Priority research area |
| Tier III: Intensive mental health services | | |
| Social skills | Social skills training for children and adolescents with ASD to improve social behavior, social competence, and self-management | Research sufficient |
| | LEGO® social skills group for children with ASD to reduce social difficulties and improve social interaction | Research sufficient |
| | Social skills interventions for children and youth with diagnosed mental illness or serious behavior disorder to improve social behaviors | Research sufficient |
| | Friendship skills group for children with ASD to improve social skills | Priority research area |
| | Cognitive-behavioral therapy for children with ASD to reduce parent-reported anxiety | Priority research area |
| | Social communication intervention that includes joint attention for preschoolers with autism to improve language and adaptive behavior | Priority research area |
| | Cognitive-behavioral therapy and activities and games for children with ASD to improve assertive behavior and reduce hyperactivity and problem behaviors | Priority research area |
| | Video modeling or direct group instruction in social skills for children and adolescents with ASD to improve prosocial behaviors and social interactions | Priority research area |
| | Self-management strategies, change in instructional content, and differential reinforcement for children with ASD to reduce challenging behaviors | Priority research area |
| Play, recreation, and leisure | Music-related activities (singing, listening to music, playing an instrument) for children with autism to improve nonverbal and verbal communication skills and reduce problem behaviors | Research sufficient |
| | Wilderness experiences for adolescents with behavior disorders to improve cooperative behaviors | Priority research area |
| | Play activities for school-age children with autism to increase play and cooperative behaviors | Priority research area |
| | Use of a program to identify life mission (e.g., Instrumentalism in Occupational Therapy program) for adolescents with emotional and behavioral difficulties to improve participation in occupations | Priority research area |

Note. ADHD = attention deficit hyperactivity disorder; ASD = autism spectrum disorder.

research planning process easier, minimize duplication of research efforts, and stimulate discussions among researchers with similar interests, which can then facilitate the creation of research networks and multisite studies. Researchers, students, and clinicians can use this information in developing innovative research to answer important questions within the occupational therapy field. To add current or ongoing research to the table, visit <http://www.aota.org/researchopportunitiesables>.

Researchers are also encouraged to enter their projects into AOTA's Researcher Database at <http://myaota.aota.org/research/>. This database provides AOTA with information such as relevant clinical settings and populations, *International Classification of Functioning, Disability and Health* level (World Health Organization, 2001), funder (if any), and key words to help guide research advocacy and policy initiatives. ▲

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