

BOOK REVIEW

Recreational Therapy for Specific Diagnoses and Conditions

by Heather Porter (2015)
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This book explains how to connect a specific diagnosis or condition with recreation therapy interventions. Each of the 39 diagnoses are organized into separate chapters with a format common to each and the index presented in alpha order by diagnosis. Diagnoses encompass life-long and acute events such as intellectual disability to burns, and total joint replacement. Likewise, the spectrum of conditions covers mental, physical, and social impairments experienced by all ages; for example, borderline personality disorder, cerebral palsy, neurocognitive disorders, and gambling disorder.

Chapter formats are similar: Each begins with a description including incidence or prevalence, ages, causes, systems affected, secondary problems, and prognosis. The assessment section considers the team and recreation therapy assessments with specific tools identified and connected to the categories of the WHO International Classification of Functioning, Disability, and Health. The closing section of each chapter identifies relevant interventions with participant goals including research and literature to support the efficacy of recommended practices. A resource list concludes each chapter and identifies agencies and internet sources applicable to the diagnosis. An appendix presents ICF core sets for a number of specific diagnoses such as breast cancer and cardiopulmonary conditions for acute and post-acute care. Three of the strengths of the publication are the common chapter format, the ICF core set appendix, and the resources listed with each diagnosis.

Two other foundational aspects of the publication stand out: Practices are grounded on evidence or evidence-based practices—literature and research document use of specific assessments, goals, and interventions with, for example, cancer (p. 81), cerebral palsy (p. 91), diabetes mellitus (p. 127–128), intellectual disability (p. 127–128), and osteoarthritis (p. 282). A second aspect is the identification of the strengths approach to practice-specific reference is made to assessing assets and supports with intellectual disabilities (p. 205) and major depressive disorders (p. 218), for example. Throughout the publication, holistic health is recognized and the continuum of recreation service settings is addressed: Examples are found with epilepsy (p. 137–138) and neurocogni-

tive disorders (p. 249–252). Even though a chapter section is labeled “Secondary Problems” the narrative describes holistic treatment and refers to environmental features like caregivers as illustrated on pages 105–106 with cerebrovascular accident—external supports described in strength-based approaches.

There are specific features of the text that readers will find extremely beneficial. Whether a professional or student, the readability of the text is useful and practical. For example, the sudden signs of a stroke summarized on page 103 (F.A.S.T.) or the explanations for the causes of Alzheimer’s disease, pages 242–243, are presented in such a way that the information lends itself to immediate application. Current information is shared concerning medications (p. 248) and treatments (p. 45). Assessment information and tools are extensive and well documented with each diagnosis. Descriptions of interventions connect goals to planning and ICF codes and professionals after reading the sections on “Recreational Therapy Interventions” could develop intervention programs based on the most recent evidence. Interventions presented with each diagnosis are appropriate to each participant’s environmental context, whether the setting is residential, acute, or inclusion as illustrated by substance-related disorders (p. 391), amputations, and prosthesis (p. 17), and intellectual disability (p. 209). Thus, the text is very appropriate for use by students and professionals across the service continuum.

This publication may be adapted as a textbook and purchased as a reference by practicing professionals. With students, the book might be used in a course focusing on disabilities, a foundations class, and a course on assessments and treatment or intervention planning. Professionals might use the book to become familiar with assessment tools, professional organizations and internet sources, and to validate their selection of participant goals and interventions. Both students and professionals will find the ICF codes incorporated in the chapter content and the core sets in the Appendix useful to assessment and planning as application of the ICF brings standardization to these processes. With consistency comes accountability and improved documentation of outcomes. Professional credibility is enhanced by the evidence generated and used by these applications.