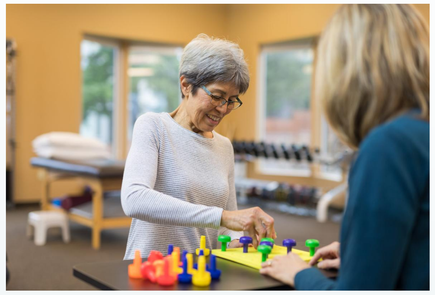
Comparative Analysis of Pediatric and Mental Health Level I Fieldwork: Case Studies

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Introduction

Level I fieldwork provides occupational therapy assistant (OTA) students at San Jacinto College with opportunities to apply classroom knowledge, develop clinical reasoning, and observe how occupational therapy can support participation across diverse populations and practice settings. Occupational profiles help identify a client's occupational history, interests, values, needs, and contextual factors to support client-centered intervention planning. This comparative case study examines two Level I fieldwork experiences in pediatric and mental health/community-based settings. The pediatric case involved a 2-year-old child with Autism Spectrum Disorder who experienced challenges with communication, play, social participation, transitions, and sensory regulation. The mental health/community case involved a 45-year-old woman with a history of left cerebrovascular accident (CVA) who experienced right-sided weakness, neglect, visual impairments, and limitations affecting activities of daily living (ADLs) and instrumental activities of daily living (IADLs). The purpose of this project was to compare occupational challenges, contextual factors, intervention approaches, and student learning experiences across the two Level I fieldwork settings.

Methodology

The comparative case study design examined two cases of Level I fieldwork experiences completed by an OTA student in pediatric and mental health/community-based settings.

Case 1:
- Pediatric setting
- 2-year-old child with Autism Spectrum Disorder who attended a Montessori-based educational setting.

Case 2:
- Mental health setting
- 45-year-old woman with a history of left CVA who resided in an independent living facility.

Data was collected and organized through occupational profiles, clinical observations, identified occupational challenges, intervention experiences, and observed progress. Similarities and differences between the two settings were then identified to examine how intervention approaches and clinical reasoning were adapted to each population and environment.

Results

Strengths of Case 1 and 2

Pediatrics: Strengths	Mental Health: Strengths
• Independent mobility and movement • Engages in preferred play and hands-on activities • Follows familiar routines • Responds well to structure and predictability • Engages with familiar caregivers and adults • Demonstrates potential for participation with appropriate supports	• Motivated to maintain independence • Participates in community, social, and leisure activities • Demonstrates use of compensatory strategies • Engages in meaningful daily activities • Demonstrates ability to adapt to functional challenges • Utilizes available resources and support systems • Maintains participation in an independent living environment

Results Continued

Similarities	Differences

• Both benefited from client-centered approaches
• Both interventions considered:
  • Individual needs, Interests, Abilities
  • Occupational goals
• Both emphasized:
  • Participation
  • Functional independence
• Therapeutic rapport was important for engagement
• Effective communication supported participation
• Interventions were adapted to each client's abilities and needs
	•**Pediatric:** Focused on development, play, communication, sensory regulation, transitions, and peer participation.
	•**Adult:** Focused on independence, safety, UE function, visual skills, self-care, and community participation.
	•**Environment:** Pediatric client benefited from structured classroom routines, while the adult client utilized resources and had access to social and community opportunities within an independent living facility.



Conclusion

Both experiences provided opportunities for consistency of a structured environment and increased clinical reasoning. As well as interventions must be adapted to the individual, their goals, and their environment while supporting their independence and community participation. Overall level 1 field work provided valuable opportunities to connect academic knowledge with real-world occupational therapy practice and increase understanding of the OTA's role in promoting participation, independence, and quality of life.

Discussion

Level I FW opportunities for each setting include:
- Pediatrics: peer interaction, communication, sensory regulation, and caregiver carryover could have further supported the client's participation in age-appropriate occupations.
- Adult: additional interventions included would have targeted visual scanning, bilateral upper-extremity use, functional reaching, fine-motor skills, safety, and ADL/IADL participation that could have further addressed the client's goal of maintaining independence.

Future Level I fieldwork suggestions that would strengthen the experience are:
- Opportunities for observation prior
- 1:1 OT/OTA interventions

Overall, these experiences demonstrate how exposure to varied Level I fieldwork settings can enhance OTA education and strengthen clinical reasoning. At a broader level, continued emphasis on client-centered, occupation-based, and opportunity to view different scopes of practice can enhance occupational therapy by promoting meaningful participation and independence across the lifespan.

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