

# Occupational therapy home programmes for children with unilateral cerebral palsy using bimanual and modified constraint movement therapies: A critical review. Oral Presentation 3.

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# **Oral presentation 3: Occupational therapy home programmes for children with unilateral cerebral palsy using bimanual and modified constraint induced movement therapies: a critical review**

YM Milton, SA Roe

## **Introduction**

Home programmes involve a family focused approach to ensure best practice and meaningful participation in specific intervention activities. The aim of the critical review was to gain a deeper understanding of how bimanual therapy and modified constraint induced movement therapy or constraint induced movement therapy methods are used within occupational therapy home programmes (OTHPs) from an occupational perspective.

## **Method**

A literature search focussing on children with unilateral cerebral palsy was conducted using health research e-databases; five studies met the inclusion criteria. These were critically appraised and analysed according to the relevant supports and barriers of the Person–Environment– Occupation conceptual model of practice.

## **Results**

Family collaboration, strategic use of outcome measures, construction of the programme within the home environment and occupation-focused goals and activities emerged as commonly used methods. Enhanced descriptions of intervention context, the child's voice in defining goals and challenges in optimising occupational balance surfaced as gaps in the programmes.

## **Conclusion**

This review is the first to use a conceptual model of practice to identify how motor approach methods are applied within OTHPs for children with unilateral cerebral palsy. Bimanual therapy and/or CIMT or m-CIMT methods are used in different ways within OTHPs and occupational performance is enhanced through collaboration, parental support/education, occupation-focused goal-setting and the use of outcome measures. Implications for practice and research include combining motor and non-motor approaches, using core occupational therapy skills, working within individual contexts, valuing family preferences; using child specific goal setting instruments would strengthen the child's voice and promote participation within a wider range of occupations.