

Review Article

Occupational therapy in mental health: between the field and the professional core

Terapia ocupacional em saúde mental: entre o campo e o núcleo profissional

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Abstract

Introduction: Recognizing the complexity of various aspects involved in the field of mental health, it is essential that professional competencies be combined in care provision. However, the debate on the boundaries and limits of occupational therapy has proven necessary for the technical-scientific development of the profession.

Objective: To outline occupational therapy actions that constitute common clinical practice within the field of mental health and those that define its professional core.

Method: The Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) Checklist was used as the scoping review guide. Theoretical studies published in Portuguese from 2012 to May 2023 were included. The literature search was conducted in the Redalyc, Google Scholar and Digital Library of Theses and Dissertations (BDTD) databases, resulting in the analysis of seven studies. **Result:** The analysis of the studies showed that the specific core of occupational therapy is seldom described as the field of mental health and its premises summon occupational therapists to conceive and practice care mediated through hybrid technologies integrated with other knowledge areas. According to the studies presented, when referring to the professional core, occupational therapists base their actions on human activity, human doing, occupation, and everyday life.

Conclusion: There is a need to expand the debate on the professional core of occupational therapy in the field of mental health, not to discipline practices, but rather to preserve the profession's core work.

Keywords: Occupational Therapy, Mental Health, Professional Competence.

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Resumo

Introdução: Ao reconhecer a complexidade de muitos aspectos que envolvem o campo da saúde mental é importante que, na produção de cuidado, as competências profissionais sejam articuladas entre si. No entanto, o debate sobre os contornos e limites da terapia ocupacional tem se mostrado necessário para o desenvolvimento técnico-científico da profissão. **Objetivo:** Delinear as ações da terapia ocupacional que compõem a clínica comum ao campo da saúde mental e as que identificam seu núcleo profissional. **Método:** Utilizou-se o guia de revisão de escopo *Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR)*. Foram incluídos estudos teóricos publicados em português entre janeiro de 2012 e maio de 2023. O levantamento foi realizado nas bases de dados Redalyc, Google Acadêmico e Biblioteca Digital de Teses e Dissertações (BDTD), resultando na análise de sete estudos. **Resultado:** A análise dos estudos evidenciou que o núcleo específico da terapia ocupacional é pouco descrito, uma vez que o campo da saúde mental e suas premissas convocam terapeutas ocupacionais a conceber e exercer uma prática mediada por tecnologias híbridas com outros saberes. Segundo as pesquisas apresentadas, ao se referirem ao núcleo profissional, os terapeutas ocupacionais sustentam suas práticas relacionando-as à atividade humana, ao fazer humano, à ocupação e ao cotidiano. **Conclusão:** Identifica-se a necessidade de ampliar o debate sobre o núcleo profissional da terapia ocupacional no campo da saúde mental, não em uma perspectiva de disciplinar as práticas, mas para preservar o próprio trabalho profissional.

Palavras-chave: Terapia Ocupacional, Saúde Mental, Competência Profissional.

Introduction

Over the years, occupational therapy in Brazil has gained prominence across various fields of practice, initially focusing its expertise on the health sciences. This trajectory has expanded as the field matures both technically and scientifically, enabling its incorporation into other fundamental fields, such as social, educational, cultural, and environmental sectors, among others. This scenario is enabled by the ongoing involvement of professionals and researchers in discussions aimed at the technical-scientific and political advancement of the profession and its practices.

Occupational therapists have been prompted to look within their profession to analyze the potential of their practice and its implementation in the Brazilian context. Theoretical-methodological discussions have been conducted to improve and recognize the specificities of occupational therapy in its various fields of practice. As pointed out by Galheigo et al. (2018, p. 724), “[...] understanding occupational therapy as a professional core composed of knowledge and practices implies exploring, knowing, and debating the trends and tensions that have been produced longitudinally in professional know-how”.

In this regard, occupational therapy professionals have made efforts to investigate the specific practice of the profession in the field of mental health. The professional core of occupational therapy in mental health has been the subject of discussion among area researchers within the Mental Health Working Groups (GT) of the National Occupational Therapy Research Seminar (SNPTO). These discussions have highlighted

that, despite occupational therapy's contribution to knowledge production in mental health, it is essential to outline this profession's specific contributions to the field, namely, the delineation of its professional core.

At the same time, it is understood that mental health practices in the Brazilian context—as highlighted in the 4th National Mental Health Conference: Intersectoriality, Inter-professionalism, and Multidimensionality—can only be realized through the sharing of knowledge with other professionals and their specific expertise. This does not entail defending a specialty-focused policy or corporatism, nor rigid professional identity with protocol actions and procedures aimed at resolving situations classified *a priori*. Rather, it involves considering mental health as a territory for knowledge-sharing and “hybrid practices” (Lima & Ghirardi, 2008).

It can be stated that care production in the field of mental health occurs through a “common clinic” (Feuerwerker et al., 2013) that is realized in the encounter of professional differences, resulting from interactions among distinct singularities, events, and perspectives of health and care production. This clinic produces a commonality “[...] by establishing itself in the work of finding, beneath the ‘apparent persons’ (I’s, ‘you’s, ‘we’s), the potency of an interesting impersonal, a movement of ‘everyone’ that is by no means a generality but rather a precision of singularities, in a high degree of subtle experiences” (Henz et al., 2013, p. 38).

This common clinic in mental health can only be achieved through new actors and technologies that ensure an understanding of users' complexities and their sociocultural relationship with the illness process, in addition to matrix actions that expand and qualify care at various levels of health care (Miranda & Cardozo, 2018). A feasible clinic based on policy guidelines grounded in the principles of the Brazilian Psychiatric Reform and the psychosocial care paradigm, that is, methods of producing mental health focused on overcoming the asylum model, with user acceptance and integration in shared decision-making in their therapeutic process and other aspects impacting this development.

This scenario adds to the challenges faced by mental health workers and target populations in Brazil who live in territories marked by social, structural, and economic inequalities, as well as structural racism, homophobia, sexism, bullying, and other social markers that are determinants in a process of psychological illness. Thus, it is fundamentally important to consider the intersectionality among the various characteristics that influence individuals' subjectivities in mental health, such as race, gender, disability, and social class. In this way, intersectionality, as a conceptual tool for understanding social dynamics and their relationship with health, has gained traction in the mental health field (Romagnoli & Silva, 2022).

Recognizing the complexity and interconnectedness of many aspects that involve the mental health field, it is essential that professional competencies be articulated. In this sense, what is occupational therapy's contribution to this field? What are the characteristics of occupational therapy in the Brazilian mental health context? To guide this discussion, we find it pertinent to reference the field and the professional core, understanding them as pathways that can provide clues for such elaborations. However, in addressing this theme, we must be cautious to avoid the disciplinary limitations to which this discussion may easily lead us.

Campos (2000, p. 220) warns that, to escape this paradox, new proposals for the concepts of field and core were necessary. The “[...] core would demarcate the identity

of an area of knowledge and professional practice, and the field, a space of imprecise limits where each discipline and profession would seek support in others to fulfill its theoretical and practical tasks”. In this perspective, the boundaries between one and the other are understood as permeable. However,

[...] within the core, knowledge and practices would coalesce, forming a certain professional and disciplinary identity. Metaphorically, the cores would function similarly to the concentric circles that form when an object is thrown into still water. The field would be the water and its context (Campos, 2000, p. 221).

It can be stated that the mental health field in Brazil comprises the complexity of psychosocial care, seeking to overcome the biomedical model and construct a new social place for madness, with the affirmation of social participation and rights for individuals in psychological distress and their families (Amarante & Torre, 2017). A field marked by theoretical-practical and political debate among various knowledge areas and professional practices that interconnect in the reinvention of mental health and the production of life and sociability (Oliveira & Daltro, 2020).

Costa-Rosa (2013) highlights the “in-depth integration” of knowledge in this field. For this author, such integration counters the asylum logic, adopting a transdisciplinary stance that aligns with the ethics corresponding to the effects of the Psychosocial Paradigm. In this sense, mental health care production occurs amidst the deterritorialization of professional actions through the collective act of teamwork.

Despite the lack of clear boundaries between specific professional practices and the intersections between the various professional cores that compose the mental health field, it is possible to identify contributions from some specific professions. For instance, medication is the responsibility of physicians, psychotherapy that of psychologists, specific care procedures that of nurses, among others (Constantinidis & Cunha, 2016). However, what is the professional core of occupational therapy in mental health?

Although tracing the trajectories and knowledge production of occupational therapy in the mental health field is beyond the scope of this study, it is noteworthy that research in the field has aimed to present practices in direct actions with mental health facility users, from a psychosocial care perspective, and/or has focused on the process of constructing clinical reasoning. Additionally, the theoretical-methodological perspectives of occupational therapy—such as the Dynamic Occupational Therapy Method (Benetton & Marcolino, 2013), the Excavation Method (Furtado & Fischer, 2011), among others—the reflection perspective of occupational therapy as “life production” (Quarentei, 2001), and the systemic and complex approach of this profession (Pádua & Feriotti, 2013) significantly contribute to practice in this field.

It is necessary to reflect on the practice of occupational therapy in mental health within an interconnected field of practice with other professional practices, in a common clinic. According to Paim (2006), professional practice allows us to elucidate the professional core. Thus, in occupational therapy practice, there is an intersection of objectives and instruments with the mental health field, leading to the conception of a more open and complex professional core.

The goal is not to seek the uniformity or homogenization of occupational therapy practices, methods, and theories in mental health but rather to identify elements that

characterize and distinguish their role in this field. Despite advancements in knowledge production and professional practice, the need to characterize the professional core of occupational therapy in mental health more comprehensively remains evident. The definition of this professional core is still open, in search of more precise delineations, and, in this perspective, this study seeks to chart an underexplored path: to collaborate in defining this core within the practices developed in mental health in Brazil. Therefore, this study aims to identify professional actions that constitute the common clinic in the mental health field and actions that define its professional core.

Methodological Aspects

To address this study's objective, a scoping review proved to be the most suitable method. This type of review is intended to map the literature within a specific field of interest, especially when it involves a novel review (Cordeiro & Soares, 2020), condensing and publishing data and highlighting gaps in existing studies (Arksey & O'Malley, 2005).

This review follows the Preferred Reporting Items for Systematic reviews and Meta-Analyses extension for Scoping Reviews (PRISMA-ScR) (Tricco et al., 2018). In line with the PRISMA-ScR guidelines, a guiding question was developed for this study, with key elements including population or participants, concepts, and context. Consequently, the following question was formulated: How does the scientific literature address discussions about the field and professional core of occupational therapy in mental health within the Brazilian context?

Both empirical and theoretical studies published in Portuguese between January 2012 and May 2023 were included, encompassing articles, theses, and dissertations. Studies that did not address the mental health field were excluded.

Data collection was conducted in three stages between May and June 2023. In the first stage, research was conducted in the Redalyc and Google Scholar databases; in the second, the reference lists of articles from the first stage were reviewed to ensure the inclusion of relevant literature; in the third, studies were searched in the Digital Library of Theses and Dissertations (BDTD). In all stages, the following keywords were used: Occupational Therapy, Mental Health, Professional Core, or Occupational Therapy, Mental Health, and Core of Competence within national databases, as shown in Table 1.

Table 1. Databases, search strategy, and references.

Search Strategies	Databases / Information resource	References retrieved
"Occupational Therapy" AND "Mental Health" AND "Professional Core"	Redalyc	1
	Google Scholar	293
	BDTD	1
"Occupational Therapy" AND "Mental Health" AND "Core of Competence"	Redalyc	5
	Google Scholar	34
	BDTD	0

A total of 334 studies were found, with 23 duplicate studies excluded, resulting in 311 studies for preliminary analysis. Based on title review, 254 studies that did not meet the inclusion criteria were excluded. This led to the selection of 57 articles for abstract review, of which 49 were excluded for not meeting the inclusion criteria. Consequently, seven articles and one doctoral dissertation were selected for full reading, with one of these publications excluded for not correlating the professional core with mental health. From this process, seven studies were included for this review. The data mapping process is presented in the flowchart (Figure 1), created based on the Prisma Flow Diagram model.

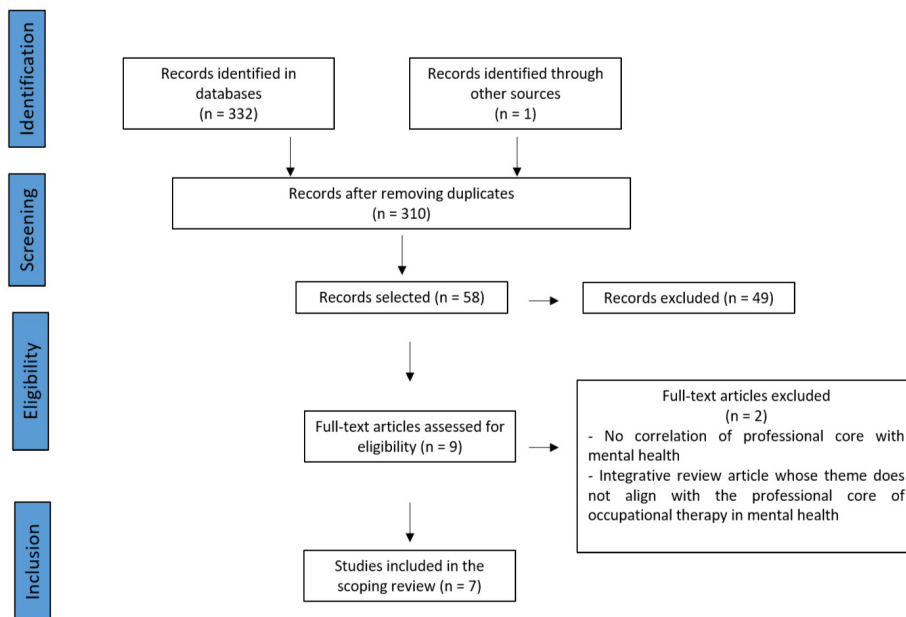


Figure 1. Search flowchart. Source: Moher et al. (2009).

Results

Table 2 presents the characteristics of the selected studies regarding their themes, objectives, and methods.

Table 2. Theme, objectives, design, and participants of the selected studies.

Author(s)	Theme	Objectives	Design	Participants
Gozzi & Lussi (2013)	Initial evaluation conducted by occupational therapists in the mental health network	To study the evaluation process of occupational therapists in different facilities within the mental health service network	Descriptive cross-sectional case study with a qualitative approach	13 occupational therapists
Assad et al. (2016)	Occupational therapists' practices in	To identify care strategies used by occupational	Descriptive study with a qualitative approach, conducted	5 occupational therapists from 3 CAPS

Table 2. Continued...

Author(s)	Theme	Objectives	Design	Participants
	Psychosocial Care Centers (CAPS)	therapists in CAPS and understand how these strategies contribute to psychosocial rehabilitation	through thematic content analysis interviews	
Prodócimo et al. (2018)	Occupational therapy practice in the Street Clinic	To understand and analyze the role of occupational therapy in the Street Clinic alongside teams and users	Qualitative research with an exploratory approach using semi-structured interviews	5 occupational therapists
Oliveira & Ferigato (2019)	Occupational therapy practice with women victims of domestic violence	To identify and analyze occupational-therapeutic intervention practices and technologies in the care of women victims of domestic violence	Qualitative study based on perspectives defined by action research, including participant observation and semi-structured interviews	4 occupational therapists
Bueno et al. (2021)	Care provided by occupational therapists for children and adolescents	To characterize the practices of occupational therapists in the child and adolescent mental health network in Belo Horizonte	Qualitative, exploratory-descriptive study through semi-structured interviews with thematic content analysis	18 occupational therapists
Táparo (2023)	Core competencies of occupational therapy in the child and adolescent mental health field	To identify the perspective of occupational therapists involved in psychosocial care of children and adolescents regarding the core professional competencies of occupational therapy in the child and adolescent mental health field	Descriptive-exploratory study with a qualitative and quantitative approach, using an online questionnaire and focus group	59 occupational therapists and 48 non-occupational therapists
Trevisan et al. (2023)	Occupational therapists' work in a CAPS	To understand the work activities of occupational therapists in a CAPS, examining the knowledge and values guiding them	Qualitative research with an ergological approach using field diaries, implication analysis, and a three-pole dynamic device	4 occupational therapists

Content Analysis of the Studies

Based on the content analysis of the studies, thematic regularities were identified in this research as indicative factors for presentation, as follows: 1. Actions of the specific core of occupational therapy, and 2. The field in mental health and common clinical practice.

Actions of the specific core of occupational therapy

The debate about the specific core appears in the articles from the perspective of describing how occupational therapists have focused on the specific knowledge of the profession in their daily practices in mental health facilities, especially in public services.

Oliveira & Ferigato (2019) present reflections on occupational-therapeutic intervention practices and technologies with women victims of violence in primary health care (PHC), outlining the professional core of occupational therapy in this context. To this end, these authors conducted an intervention-research study with participant observation and semi-structured interviews with four occupational therapists working in health services. They highlight that the encounter between occupational therapists and victims primarily occurs because of the impacts of violence on the mental health of these women.

In this way, these authors found that occupational therapists contribute to the care process offered to women victims of violence because of the technical-scientific framework of occupational therapy, allowing them to intervene in the everyday lives and contexts of these women, broadening their own repertoire and breaking cycles of violence. The practices described by the interviewees, which outline occupational therapy's care technologies for these women, involve the use of expressive activities to identify and elaborate on the experience of violence, identification of occupational roles and daily dynamics that contribute to the maintenance of domestic and familial violence, and the construction of intervention strategies and coping mechanisms for violence with the women and their families; and through income generation, self-care, and therapeutic workshops, they promote increased self-perception, self-sufficiency, autonomy of the woman, and strengthening of social support networks.

Prodócimo et al. (2018) address the role of occupational therapy in the "*Consultório na Rua*" and the professional core with the population assisted. The *Consultório na Rua* is one of the strategies of the Emergency Plan for Expanding Access to Treatment and Prevention in Alcohol and Other Drugs (PEAD), which aims to increase access to health services through street health actions. These authors emphasize that the meeting between occupational therapists and the homeless population is often mediated by involvement in a network of social assistance services, mental health disorders, or other health issues.

To achieve their study objective, these authors interviewed five occupational therapists from three cities in the state of São Paulo. For these authors, occupational therapy has its specificities in this work, emphasizing human activity and the everyday life of individuals. However, they highlight that in teamwork there is an overlap of boundaries regarding actions in PHC and demands arising from the streets. The occupational therapists interviewed do not adopt the specific theoretical framework of the profession. According to these authors, this fact can be understood as a practice without theory, weakening occupational therapy in relation to other professions. According to the interviewees, the presence of the occupational therapist in therapeutic

workshops and daily activities of the teams facilitates the connection between the homeless and the team, fostering care beyond clinical issues, with an approach through the desire for creation, weaving forms of coexistence and encounters that reinvent territories and ways of coping with violence.

Prodócimo et al. (2018) conclude that in on-site work it is possible to broaden the care strategies offered beyond curative actions, while core actions have shown to be a powerful strategy to help users take ownership of their care process. According to these authors, it was possible to identify through interviews that occupational therapy, in collaboration with users, manages the everyday life that the street enables for each one, using activities as a means.

Assad et al. (2016) reflect on occupational-therapeutic practices developed in Psychosocial Care Centers (CAPS) and their role in psychosocial rehabilitation processes. It is a qualitative study that used semi-structured interviews conducted with five occupational therapists from three CAPS.

These authors identified that the practices performed by occupational therapists show that specific actions of this profession's core focus on human activity and everyday life expansion to promote social inclusion and autonomy. They emphasize that these practices are supported in a disciplinary context but also through inter- and trans-disciplinary dynamics that compose work in this field. They emphasize that occupational therapy's core is delineated in proposals and strategies based on everyday life. For them, the specificity of the occupational therapy core, with everyday life as the locus of intervention, aligns with new mental health care proposals, contributing to psychosocial rehabilitation processes.

Bueno et al. (2021) sought to characterize the practices of occupational therapists in the child and adolescent mental health network in Belo Horizonte, state of Minas Gerais. To this end, they conducted semi-structured interviews with 18 occupational therapists distributed across the care network: nine in Complementary Teams, five in Child and Adolescent Psychosocial Care Centers (CAPSij), and four in the regional coordination of the *Arte da Saúde* Program.

The results showed that the practices of occupational therapists in the complementary teams focus on supporting skill acquisition and development. All occupational therapists in these teams identified play as the central axis of their interventions, highlighting its importance for child everyday life and development. In CAPSij, these authors identified a mix of actions that overlap with other professional practices, lacking specific occupational therapy core activities, which generates certain tensions regarding professional identity. These occupational therapists justified their participation in the multidisciplinary team by the "diversity of perspectives" in understanding phenomena/issues presented in the field, rather than by specific professional actions. In the *Arte da Saúde* program, occupational therapists performed management functions.

In line with Bueno et al.'s proposal, Táparo (2023) sought to identify the professional core of occupational therapy in the field of child and adolescent mental health. For this purpose, they conducted a descriptive-exploratory study in two phases, involving 107 professionals, 59 of whom were occupational therapists and 48 from other areas. All participants responded to an online questionnaire in the study's first phase. In the second phase, 32 professionals participated: 20 occupational therapists and 12 from

other fields, distributed across two online focus groups. Two sessions were held for each participant group. The results show that specific occupational therapy activities in child and adolescent mental health care, as identified by the participants, included: occupation-centered practices, ADLs, individual routines, and comprehensive attention to subjects, working in network and intersectorally; addressing intense psychological suffering and managing crises, especially in severe and complex cases. The study demonstrates the specificities of occupational therapy in child and adolescent mental health and the contribution of this profession to care for this population.

Trevisan et al. (2023) investigated the work of occupational therapists in CAPS, addressing the knowledge and values that guide them. They conducted an ergological analysis with four occupational therapists, using field diaries, implication analysis, and a three-pole dynamic device—analyzing knowledge of experience, academic knowledge, and the emergence of new knowledge.

As territorial actions constitute a collective team effort, the reference to everyday life—widely present in occupational therapy’s theoretical-practical framework—enhances interventions in the territory and organization of people’s everyday lives, providing occupational therapists with greater confidence compared to other professionals. Furthermore, even though it is not a central concern in the clinical reasoning of occupational therapists, the use of activities in encounters with users, with meaning and significance in their life history, can facilitate solutions in crisis situations.

These authors highlight that a subtle differentiator of occupational therapists’ practice in CAPS lies in the “perspective,” which may constitute a specific approach that does not necessarily result in actions and/or interventions but in the ability to see and bring potential to life. They conclude that dialogue with the occupational therapists in the study affirmed that core professional knowledge interacts with mental health knowledge and knowledge gained from each participant’s professional and personal trajectory. Occupational therapy’s technical actions involve commitment to social transformation, listening to subjects experiencing psychological distress, and managing each case’s unique characteristics.

Gozzi & Lussi (2013) address the assessment process by occupational therapists in various mental health facilities. These authors conducted a descriptive cross-sectional case study with a qualitative approach, interviewing 13 occupational therapists working in mental health facilities in a health department region in São Paulo state.

The results indicated participants’ difficulty in asserting the professional core of occupational therapy, attributed to a lack of understanding of the profession in justifying procedures within the team. Additionally, they showed that occupational therapists are involved in users’ initial arrival at mental health services and initial assessment. In the assessment process with the team and individual therapeutic plan development, occupational therapists contribute specifically by focusing on activity, everyday life, and social integration of users. Occupational-therapeutic assessments are conducted informally, using instruments created by the professionals.

The demands addressed to occupational therapists within services involve ADLs, autonomy, independence, social integration, occupation, idleness, and affectivity and care. Specific demands for occupational therapy care, according to aspects assessed by mental health occupational therapists, include performance areas; routine, habits, and everyday life; cognitive aspects; organization and interests; and ADLs and IADLs.

These authors also highlight the need to link occupational therapy to occupation, as occupations are the focus of occupational therapy when considered in meaningful, active everyday lives. They emphasize that, despite the possibilities described, this proposal needs to be further explored so that occupational therapy actions are not mistaken for filling idle time. According to these authors, this is a crucial task that requires occupational therapists' commitment to changing this understanding, both from a service practice perspective and theoretically through research on this theme.

The studies share practices emphasizing human activity, occupation, and everyday life, aiming at social integration and individual autonomy. Although these authors do not delve deeply into this discussion, they refer to these care elements as components of the occupational therapy professional core in mental health.

The field of mental health and common clinical practice

In regard to the field of Brazilian mental health and common clinical practice, the provision of care in occupational therapy within this field covers all levels of complexity in the Unified Health System (SUS), thus ensuring, to varying degrees, the population's access to occupational-therapeutic practices. In this sense, the selected studies present the work of occupational therapists at various levels of complexity, as well as with different assisted groups: adults, adolescents, and children. These studies, in addition to addressing the specificity of occupational therapy that defines the professional core of this field, provide contributions of occupational therapy to what we are here calling common clinical practice. The actions highlighted in the studies, which belong to the field of mental health but are not specifically related to the occupational therapists' core competencies, illustrate how occupational therapy is positioned in this field.

Prodócimo et al. (2018) assert that occupational therapy, like other health professions, has its specificities based on the material and immaterial resources that compose the scene of intervention and care. However, teamwork occurs in an area of overlap between disciplinary boundaries, given the needs present in the field of PHC and all other demands that arise from the subject-territory relationship. The study focuses on the work of occupational therapists in the *Consultório na Rua*, whose guiding principles include harm reduction, guaranteeing the rights of the homeless population, and enabling access to the health and support services network. It highlights the contribution of occupational therapy in on-site work, in the possibilities of care on the streets, in the production of culture, and in the life productions offered by the territory.

Oliveira & Ferigato (2019) addressed issues of care for women victims of domestic and family violence in PHC from the perspective of occupational therapy and found that, although the actions in this field were not the main focus of the research, it was possible to identify that the interdisciplinary team views PHC as a strategic space for addressing domestic violence, emphasizing the family health strategy as a facilitator in this process through family, group, individual, and intersectoral interventions.

Some actions aimed at primary care identified by the study participants include “[...] welcoming, humanization practices, mental health follow-up, home visits and follow-up, qualified listening, general and specific guidance, integrative and complementary practices, networking in collaboration with other services and sectors, and socio-assistance support networks” (Oliveira & Ferigato, 2019, p. 518).

Gozzi & Lussi (2013) point out that, in substitute services, assessments conducted by an interdisciplinary team through welcoming groups or initial welcoming are not specific to the occupational therapist. In this sense, Trevisan et al. (2023) highlight the Singular Therapeutic Project (PTS) conducted in CAPS, in which a reference professional, regardless of their practice area, must accompany the user and their family.

In these facilities, which operate under an interdisciplinary logic, the occupational therapists' modes of action involve activity groups and therapeutic workshops developed with other team members as part of co-responsibility for the therapeutic process of the individuals involved. Decisions about the actions performed by occupational therapists are not always exclusive to the occupational therapy core (Gozzi & Lussi, 2013; Assad et al., 2016; Trevisan et al., 2023).

Gozzi & Lussi (2013) emphasize the need to consider that integrating individuals into services through existing activities in institutional spaces does not always meet the demands they present to professionals when they arrive at the service, which is an aspect that should be approached with care and attention.

Regarding the actions developed by occupational therapists in CAPS, Assad et al. (2016), along with Trevisan et al. (2023), point out that some of the strategies used, such as home visits, family care, group work, crisis intervention, mental health support, and case discussions, are not exclusive to occupational therapy but are common strategies among other health professions, such as psychology, nursing, and social work. Assad et al. (2016) emphasize the need for greater coordination among team professionals and reflections on the specificity of occupational therapists' work.

Trevisan et al. (2023) indicate that, although there are differentiators in the practices of occupational therapists in CAPS, the specificity is not claimed by the participants. The participating occupational therapists value interdisciplinarity, even while recognizing the strengths of their education for working in CAPS. These authors also highlight the participants' acknowledgment of the importance of emphasizing the ideals of psychiatric reform during academic education. Their results showed that occupational therapists reaffirm an ethical-political commitment to care in freedom, the importance of active listening, working in the territory, and co-constructing with the individuals, aiming to reduce suffering and to restore and strengthen social bonds.

As stated, occupational therapists actively participate in work within the mental health field, characterized by an interdisciplinary logic, sharing the production of care through various activities in collaboration and/or partnership with other mental health professionals. Occupational therapy is reaffirmed within the fabric of a common clinical practice, seeking a model of psychosocial care in professional practices that transcend the disciplinary boundaries of each profession involved in this process.

Discussion

The studies presented in this scoping review are qualitative investigations, of a descriptive-exploratory nature, with few participants, utilizing semi-structured interviews, which reinforces the production of knowledge focused on the meanings occupational therapists ascribe to their actions within the mental health field and as part of the psychosocial care network. In view of the proposal to delineate the professional core in mental health, the importance of continuing the search for meanings is

highlighted, but the need to explore research with quantitative methods is also emphasized, to access data indicating trends and patterns in the actions of occupational therapists that shape this professional core.

In the context of mental health care practices, occupational therapists have developed their work in a meaningful and powerful way, with the goal of sustaining and maintaining the psychosocial care model. Over the years, occupational therapists have actively participated in the deinstitutionalization of madness and the process of the Brazilian Psychiatric Reform (Wachholz & Mariotti, 2009). These processes, reflections, and assumptions have transcended the logic that upheld the asylum model, shaping professional practices in occupational therapy. Thus, the medical-scientific criteria that ensured guardianship and prevented social participation of the individual with their rights have given way to emancipation. The therapeutic act is centered on the production of autonomy and active citizenship. In this way, occupational therapy becomes part of a project for the emancipation of individuals, moving beyond the mere suppression of symptoms as its primary focus (Constantinidis & Cunha, 2016).

In this context, while new possibilities for action, inclusion in public policies, and new programs emerge, occupational therapy reinforces its actions within a common field and, as indicated by some of the studies in this scoping review, somewhat overlaps the boundaries of the specific core of the profession. This occurs because the field of Brazilian mental health, given its premises and perspectives, invites professional actions into a scenario of interconnected and intersecting knowledge and practices in the production of care and attention.

It is understood that establishing occupational therapy within the mental health field depends on the consistent reproduction of its practices and knowledge. However, this review revealed a limited amount of national research on the theme, with selected articles only tangentially addressing the subject and few works directly focusing on it. Thus, when mapping occupational therapists' practices, we easily find a practice grounded in this hybrid and transdisciplinary proposal, as presented by Lima & Ghirardi (2008). The selection also provides a sample of occupational therapy actions in mental health at different points within the network and with various population groups. The studies in this review also show occupational therapy immersed in the psychosocial care model, building actions common to other professions in structuring a common clinical practice within the mental health field.

In efforts to realize this new model of mental health care and, consequently, this professional field for occupational therapy, it is worth noting that psychosocial care requires professionals who are open to exchanges and interrelationships, moving beyond rigid professional identities, and seeking collective and creative actions. The lack of boundaries and overlapping of limits between disciplines and professions is part of the mental health field within the psychosocial care model (Costa-Rosa, 2013). Moreover, in the conceptual framework proposed by Campos (2000), core and field are mutable and interchangeable, making it difficult to delineate boundaries between them. However, Galheigo's (1999, p. 49) perspective is reaffirmed, for whom "[...] our difficulty is not located in the challenge of opening our discipline to new perspectives, but rather in affirming what the contours of 'our discipline' are". Ferreira (2012, p. 72) states that today "[...] another turn is necessary: from 'everyone does everything' to 'each one does what is relevant to them,' without, however, allowing a return to the

undesirable corporatism that once held a prominent place in history”, and which is constantly driven to resurface. For this author, it is necessary to sustain what is everyone’s task—tasks and management of mental health devices that all professionals can perform—while also recognizing the specific work of each profession.

Returning to Campos’s (2000) definition, the professional core is composed of systematized knowledge and practices that mark an area of expertise and professional practice. In this sense, the selected studies engage with this discussion and, although they highlight the actions of occupational therapists in the mental health field, contribute to systematizing the actions of these professionals in delineating the professional core in mental health. According to the presented studies, when referring to the professional core, the occupational therapists interviewed ground their practices in human activity, human doing, occupation, and everyday life. Human activity, occupation, and everyday life are objects of occupational therapy, part of the profession’s framework, and integral to the area of professional knowledge, constituting the professional core.

Regarding professional practice, which, together with the area of knowledge, forms the professional core, the occupational therapists cited some tools used, such as workshops and income-generating workshops. The participation of occupational therapists in workshops, for instance, is not an exclusive role of these professionals; both the workshops and the activities developed by users in these spaces are interdisciplinary actions (Juns & Lancman, 2011; Constantinidis & Cunha, 2016). However, beyond the unique perspective of the occupational therapist, which does not necessarily result in actions but in approaches (Trevisan et al., 2023), some studies highlight specific occupational therapy practices that facilitate user engagement, bringing them closer through the desire for creation and the construction of new forms of coexistence (Prodócimo et al., 2018; Oliveira & Ferigato, 2019). Additionally, territorial work, characteristic of the mental health field and interdisciplinary work, was identified by one of the studies as an area where occupational therapists demonstrate greater confidence in relation to these actions (Trevisan et al., 2023). In this sense, both management in workshops and territorial actions present specific aspects of occupational therapy that need further elucidation and characterize the profession within the mental health field.

Also regarding the specific occupational therapy activities in mental health care, education in ADLs and IADLs was cited. Education in these activities, in turn, is exclusive to occupational therapy, although it is not unique to the mental health field, being also a responsibility of occupational therapy in other fields.

The goals presented by the participating occupational therapists align with psychosocial care, emphasizing social inclusion, autonomy, and citizenship. In this sense, care is centered on emancipation, the production of autonomy, and active citizenship, moving beyond the guardianship relationship that limits the subject’s potential (Torre & Amarante, 2001).

Final Remarks

This scoping review highlights the need for advancement in research and in the systematization of knowledge on the professional core of occupational therapy in mental health. The studies contribute to outlining certain aspects of this core, presenting

advances in knowledge on the subject. However, we note that the professional core of occupational therapy in mental health is not the central topic of these studies, which results in a tangential treatment of the issues, with limited depth. In this sense, it is important that future research focuses specifically on this theme, so that we can further advance in characterizing the professional core of occupational therapy within the field of mental health.

The research presented in this scoping review comes from qualitative investigations of descriptive nature, aimed at the meanings attributed by occupational therapists to their practice in various facilities within the Psychosocial Care Network (RAPS) and with distinct populations. Given the small number of articles found, the importance of qualitative, quantitative, and mixed-methods research on this topic is reinforced. It is relevant to promote research in this direction, as it may bring new and less explored elements to occupational therapy, such as more objective data that identify trends and aid in shaping knowledge on this theme.

The identified studies come from facilities within the Unified Health System (SUS), developed in services related to the National Mental Health Policy. This fact deserves attention, considering the neoliberal context, in which there is a growing presence of occupational therapists in private services, where the provision of specialized therapies for skill acquisition and behavior modeling, especially for children with autism, predominates. From this perspective, these studies reaffirm the development of occupational therapy in practices conducted within the public health system and aligned with a rights-based agenda.

A limitation of this review is the number of articles identified, which was smaller than expected. In addition to the previously mentioned scarcity of studies on the subject, the keywords “professional core” and “core competence” were used in the search for articles. These keywords refer to theoretical concepts not always employed in studies aiming to identify what is specific to occupational therapy in the mental health field.

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