

[EDITORIAL COMMENT]



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Since going online in 2011, the SAJOT has been hosted on its own unique platform. This edition of the SAJOT, Volume 54 no 3, will be the last one that will be published on the SAJOT website. As mentioned in our announcements on the landing site, our Journal will now be hosted and managed on the ASSAf/KHULISA platform. We trust that this move will provide greater exposure and visibility to the work that we publish, as our journal now also has Diamond Open Access status. We extend our sincere gratitude to OTASA for their financial support towards this transition. For further details regarding articles currently in the workflow as well as regarding new submissions, please read our announcement by clicking [here](#).

Overview of this issue:

'Contextual, diagnostic and cultural relevant practice', features strongly in this issue of the SAJOT. In their integrative review, McAdam et al.¹ point out that, as most instruments for assessing functional capacity, ADL and iADL are developed in the Global North, the lack of household amenities and other constraints in rural settings in our country, limit the use of these instruments in such areas. The authors strongly advocate for the development of more contextually relevant assessment instruments for the assessment of ADL and that students are made aware of the limitations of existing ones in more rural areas.

Generally, in public health care in low and middle-income countries such as South Africa, mental health care interventions are notoriously low on budget and resource allocation². A rapidly expanding area of practice, psychiatric day hospitals, was the focus of a scoping review by Masango et al.². The authors set out to explore the modes of intervention used by occupational therapists in these centers globally. They found that no contextually explicit practice guidelines for interventions in psychiatric day hospitals exist in the literature and recommend that the specific role and scope of practice in this area requires further development and investigation.

South Africa's unique palliative burden of care due to illnesses that shorten the life expectancy and impede the quality of life for persons with life-limiting diseases, was explored by Van Biljon et al.³. The unique global scope of occupational therapy practice in this context is outlined in this article and highlights the need for incorporating local beliefs around death and dying that exist in our country into our under and post graduate training.

A blended approach in education is explored by Abbas et al.⁴ in a rapid review. This approach combines online, and face-to-face learning and the results showed that it may be a feasible option for students to become more self-directed in their learning process. The authors do point out however, that for the successful and effective implementation of this approach, further training of educators is required as meticulous planning, time management and experience are essential to reach better outcomes in student learning when using this approach⁴.

The outcomes of an online approach versus task-orientated intervention for addressing functional, cognitive deficits in patients with mild to moderate traumatic brain injuries (TBI), were assessed and compared longitudinally at three intervals by Franzsen and Msengana⁵. This study found that cognitive retraining using an online programme or task-oriented activities

resulted in positive changes in a therapist-directed in-patient programme, but that a structured, graded, online programme was more effective in supporting significant improvement in cognitive functional performance when used together with an outpatient home programme⁵.

The use and effects of splints to immobilize affected joints in the hand is common practice in many clinical settings. The factors influencing therapists' decision on the most effective splint design when describing orthoses are investigated by Mathenjwa et al.⁶ with specific reference to the orthotic management of stenosing flexor tendon tenosynovitis (trigger finger). The authors found that, irrespective of the therapists' background, experience or setting, their considerations when deciding on splint type are consistent. They do, however, recommend that evidence-informed guidelines be made available regarding aspects such as the splint regime, exercises and longer-term management as large discrepancies in participant responses emerged in this regard.

Multi-sensory environments (MSE) are often used in conjunction with sensory integrative techniques in the paediatric field. Solomon and Botha⁷ explored therapists' and teachers' perceptions of children's performance in the classroom after therapy in one such MSE, the Snoezelen® room. Both therapists and teachers agreed that learners' level of arousal, focus, academic performance and task-centeredness improved significantly after a session in this area, and strongly recommend that school-based therapists motivate for the establishment of an MSE at their schools⁷.

This issue also includes two OTASA position statements, one on pain management to enable occupational engagement⁸ and another on neonatal care⁹. Both papers reflect our Association's practice directives and guidelines for therapists working in these two specialised fields and were both ratified by the OTASA Council meeting in 2024.

The unique role and the contribution the occupational therapy support staff can play and make to expand the occupational therapy workforce in all settings and areas of practice (including those published in this issue), is addressed by the 24th Vona du Toit Memorial Lecture (2016) by Theresa Lorenzo¹⁰. However, the number of occupational therapy technicians and assistants have dwindled – as reflected in the title of this lecture "Where have all the OTTs gone?". She urges the profession to "continue, and where feasible, to increase its bold efforts in championing for the development of National Qualification Framework (NQF) accredited career laddering pathways of OTTs"^{10:4}. Lorenzo also points out that research is crucial to provide evidence of their contribution and to investigate the contribution they could make to a wider population. For this to be possible, the training curricula need to be evaluated and monitored to effectively map the outcomes and impact of national training programmes and services.

A review of the book: *Children in Mind. Their mental health in today's world and what we can do to help* written by Jenny Parker¹¹ concludes this edition. It provides valuable insights on how the modern, techno-centered world impacts our children's mental health and it provides valuable guidelines for teachers,

parents, and health workers alike on how to protect our children and simply, to let a child be a child.

In conclusion, may I express my sincere gratitude to our technical support staff, Anna Dani (2011-2021) and Mark Letley (2021-2024) for their continued and valued technical support on the SAJOT website. Your knowledge, assistance and especially your patience in all things technical is much appreciated and made a huge contribution to the success and technical quality of our journal.

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