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Performance of everyday occupations in children with spina bifida assessed with Assessment of Motor and Process Skills; a population based study.

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Introduction: "I suppose he can do it, it's somehow just never done." This phrase is often heard within the clinic when parents whose children were born with spina bifida are asked how well their children perform everyday occupations.

Resent research has shown the children with spina bifida often have deficits in cognitive and executive functions, but the consequents of those dysfunctions in everyday life has not been described. No prior study has, to the best of our knowledge, evaluated the difference in the quality of the performance of everyday occupation between children with spina bifida and typically developed children.

Objectives: To evaluate the quality of the performance of everyday occupations in children with spina bifida.

Methods: The study is population-based. Fifty children with spina bifida, of 65 children in a geographic cohort of western Sweden, aged 6 to14 years, were evaluated with Assessment of Motor and Process Skills (AMPS).

Results: Most of the children with spina bifida had difficulties performing even well-known, self chosen everyday tasks in an effortless, efficient, and independent way, relating to deficits in both motor and process skills. Compared with age-normative values, 60 % of the children with spina bifida were found to have motor ability measures below 2SD and 48 % process ability measures below 2SD. The motor skills hardest to accomplish involved motor planning and the process skills hardest to accomplish were adaptation of performance and initiations of new steps, thus actually getting the task done.

Conclusion: The results of this study imply that even if the child with spina bifida seems to know how to do things, he/she still might have problems getting them done, efficiently, on his/her own.

To reach autonomy in life, children with spina bifida may need particular guidance to learn not only how to do things but also how to get things done.

Contribution to the practice: Occupational therapy for children with spina bifida should focus on the occupational performance, and not just on each performance component.