The VdT Model of Creative Ability applied to paediatrics by Wendy Sherwood.

This is a general guide to assessment informed by various resources. This would be an excellent topic on which to perform a full literature review. If you are interested in this, please contact Beth White via the VdT MoCA Foundation (UK).

The content of the assessment

1. Information gathering. Gain as much information as possible on the child as a total person of mind, body and drive or motivation.
That is, explore the question: who is this person? What is his/her *past* history in terms of occupational profile, medical history, social history? Who is this person in the *present* - pathology, personality, IQ, occupational profile, culture, contexts of his/her life, roles, patterns of occupation. What is the *future* image of this person – prognosis; social, cultural, economic, occupational future?

Essentially, gathering this information is attending the OT profession's domain of concern: **1) Occupational identity** (past, present, future occupational profile, roles, relationships, aspirations, interests, values etc)**, 2) occupational performance –** ability to fulfill these roles, activities and occupations in the person's contexts/environment.

This information gathering usually precedes assessment of creative ability. I state 'usually', because therapists' practice will vary due to demands and influences in their own workplace contexts. Some therapists may be able to gain a comprehensive amount of information before assessing, while others have less information. This information provides the therapist with a preliminary indication or sense of the client's possible level of creative ability and
"gives direction to the creative ability assessment that follows" (Holsten 2010 p8).

2. **Assessment of Creative Ability**
Firstly, it is vital to understand that in this model, your occupational performance (skills, behaviours, action) and your drive or motivation for occupational performance are both believed to be observable. Your drive or motivation for occupational performance (or "doing", or 'participation'), directs you into "doing". Therefore, if we observe what you do, the way that you do it, where and with whom, we can see what motivates you plus see your skills.

However, we don't just observe you without having any idea of what we're looking at. That is we don't observe you without any idea of what it takes to do something.
First of all, we think about what doing in this world in which we live involves – it involves being able to connect with, understand, use materials (e.g. wood, metal), objects (e.g. table, pen), people and many different situations – everything that we do involves one or more of these. So, we look at a person's ability to relate to these (highlighted in orange in Box 1).

What is more, we have to have an idea of how your mind and body needs to work as a whole in order for you to connect with and use these things so that you can do activity in the environment. The model lists these as the components of creative ability – the occupational performance components (Box 1). These components work together and influence each other all of the time in order for a person to be effective in their occupational performance. These components are items that we look for during the assessment.

- Handling of situations
- Task and other concepts
- Ability to handle tools, materials and objects in the environment
- Norm awareness and compliance
- Anxiety control and range of emotional responses
- Initiative and effort
- Assistance/supervision needed
- Behaviour
- Product
- Ability to relate to people

Box 1. Components of creative ability: items for assessment.

Holsten (2010) has expanded on the components (Table 1) – the components highlighted in blue are the identified components of creative ability as listed in Box 1, but Holsten has provided more details. This is not new information on the components of creative ability; rather it is simply stating them in more detail. This table was provided as part of her Keynote speech at the conference in 2010 – the speech refers to childhood development and the use of the model in the physical field. See the General Information section of the members' area.

1. ABILITY TO HANDLE SITUATIONS
1.1. Comprehension/ Differentiation 1.2. Identification 1.3. Performance • Acceptable presentation of the self • Appropriate and normative behaviour • Emotional control • Problem solving • Originality and Initiative • Optimum (maximum) Effort 1.4 Management of unfamiliar situations 1.5 Creating situations for need fulfillment
2. ABILITY TO PERFORM TASKS – TASK CONCEPT* 2.1 *Task Selection 2.2 *Task Comprehension 2.3 *Task identification 2.4 *Task Initiation 2.5 *Task Implementation (which requires the following plus other skills [particularly pre-vocational and executive function skills not listed here]) • Planning and preparation • Appropriate use of tools, objects, materials • Following instructions • Organization of task/work area • Effective handling of mental demands, knowledge, problem solving, judgment, decision making • Norm directedness: process, time frame, standard, habits. • Initiative, originality • Emotional control/Handling of anxiety

• Capacity of maximum or optimum effort • Effective end product/result • Routine 2.6 *Task Completion 2.7 *Task Evaluation 2.8 *Task Satisfaction/Success * Task Concept (All marked with * are facets of task concept – see de Witt 2003, 2005).
3. **ABILITY TO RELATE TO PEOPLE** 3.1 A stable Self Concept 3.2 Acceptable presentation of self • Appropriate behaviour • Emotional control/Handling anxiety 3.3 Ability to Form and Maintain Relationships • Awareness of people and their needs • Receptivity to contact • Expression of own needs • Expression of adequate interpersonal responses • Relationships that reflect quality 3.4 Adequate Group Relations 3.5 Friends and Friendship

Table 1. Components of creative ability adapted from Holsten (2010)

Which components are present or absent in a person, or the degree to which they are developed and are integrated, culminates in a person's overall ability (creative ability).

Developmentally, a person's occupational performance components and motivation changes. Similar to stages of development, du Toit (with a focus on how we develop as occupational beings), describes levels of creative ability. The levels are detailed by de Witt (2005) and are also found in du Toit's early work reprinted 2006 (see reference list at the end). The levels are also briefly stated in a table at www.modelofcreativeability.com

For consideration in relation to child development, the levels are stated in a table within a chapter by Crouch and Alers (2005, p274-277) – the levels aligned to developmental ages are informed by teaching provided within the University of the Witswatersrand undergraduate OT programme, documented by Barnard 2003.

Table 2 adapts and combines the levels as noted by Barnard (2003) with the levels as stated by Holsten (2010), informed by experts in creative ability in South Africa. It also incorporates the group that levels belong to (see de Witt 2005 and also available at www.modelofcreativeability.com.

MOTIVATION LEVEL (descriptor provided by Holsten 2010)	ACTION LEVEL (descriptor provided by Holsten 2010)	Notes documented by Barnard (2003)	Lay person's understanding	Grouping of the levels (main focus / the outcome of this level)
Tone Biological Existence. Fragile directedness towards living. Egocentric to just maintain existence. Not motivated to find out about self and others	**Pre-destructive** Automatic/reflex action Unplanned Haphazard. Purposeless in relation to survival needs	• Birth to +/- 5 months • Movements are irregular and uncoordinated • Survival responses for needs to be met by the care giver • Dependent on care giver	I want to stay alive	Preparation for constructive action
Self-differentiation Egocentric, feeble, erratic. Usually still directed at satisfying basic needs. Differentiating the self i.e. basic awareness of self, of own abilities, others and environment --- Wanting to achieve control over body and body functions. Prepared to make contact, reach out, touch/hold	**Destructive** Unplanned, purposeless	• +/- 5 months to +/- 9 months • Sensory experiences are the primary activity focus (feeling, rubbing, chewing, biting, tasting, looking) • Child throws, tears and pulls at objects • Starts to recognize parents, smile responses. Communication is mostly receptive	Who am I really? What can I do? I am wondering about my environment	Preparation for constructive action
Self-differentiation	**Incidentally constructive** Early explorative (manipulating, contacting,) action with destructive and incidental results (the Self-diff level is not split into the two levels of action by Holsten, but this descriptor probably fits best within this level of action rather than the Destructive level) see also **	• 10 months to +/- 2 years old • Aware of self as an entity (separate from mother and environment) • Interaction is short-lived (1 step) & outcomes are unplanned and immediate • Objects are manipulated more (holding, placing, rubbing) but no tool handling or skill • Repetitive movements • Communication is limited. Responds	Who am I really? What can I do? I am wondering about my environment	Preparation for constructive action

		to 'known' people. Limited expressive vocabulary; one word sentences		
Self-presentation Intention , willingness to explore self, abilities and world. Learn and explore basic skills. Tentatively present self and abilities to others and in different situations To enquire	**Explorative** Intentional exploration of materials, objects, and of basic skills and abilities, involving both process and product. Exploratio n of ability to influence the world. Presents skills to receive feedback. Shows a growing awareness of norms. Becomes task and product cons cious	• +/- 2 years to +/- 5 years old • Starts to control interaction with the environment • Materials are explored to determine its properties • Products still largely unplanned but with step-by-step approach 4-5 step product can be successfully made. No norms of quality / speed • Develop a task concept and tool manipulation is explored and tested • Development of basic concepts occurs • Explores social boundaries. Seeks approval from others. Communication now two-way but more for the child's benefit (egocentric). Does not fully understand situations and oblivious to the subtleties of body language and innuendo • Fantasy play + role-modeling enjoyed	Have a look at what I can do , what I have learned already! Am I not smart?	
Passive participation Directed at participation in activities, relationships and situations, however needing guidance. Wanting to meet norms and require ments	**Experimental** Norm directed constructive acti on. Task concept is present, but not consolidated. Experimental course of action without being sure of ev entual outcome.	• School going child (pre and primary) • Interaction is product centred with a consolidated task concept but external motivation / stimulation still required. Step or sequence prompting occasionally required • Tool handling more product centred	I can do my daily activities so well! But I need you to help me - but only a bit.	Behaviour and Skill Development for norm compliance

	Habituated activities are norm compliant	and practice leads to some levels of skill • Product evaluation is a need of the child, but negative evaluation is not well accepted • Active learning, but still not self-directed. Do not like to participate in unfamiliar situations. More comfortable in familiar situations + sequences that have been previously experienced • Relationships are less dependant and more self maintained. Development of peer acceptance + norming is a focus, but selected peer groups may vary frequently		
Imitative participation Prepared to participate in all daily activities. Desire to comply with norms. To accomplish acceptable product, experiencing task fulfillment. To be accepted and do like others do	**Imitative** Imitative, norm compliant actio n. Action according to imposed norms and demands. Evaluation of product and behaviour . Consolidated task concept is present	• Early adolescent • Task participation is product centred and self fulfillment orientated, but initiative still limited • Experienced at a variety of tool and material handling • Works well from a model and evaluation of performance becomes comparative instead of quality centred • Socially conforming. Tries to imitate (be identical) to the peer group in all occupational performance areas. Susceptible to peer pressure • Behaviour is socially acceptable	I want to be and act like others	Behaviour and Skill Development for norm compliance

Table 1. Levels of creative ability aligned to age: adapted and combined information from Barnard (2003) and Holsten (2010)

Holsten (2010) breaks the level of Self-presentation down into more detail in relation to the pre-school child, and shows the progression towards Passive Participation. This information has been adapted and presented in Table 3.

	SELF PRESENTATION	**SELF PRESENTATION**	**SELF PRESENTATION**	**PASSIVE PARTICIPATION**
MODALITY	+- 2 – 3 years	+- 3 – 4 years	+- 4-5 1/2 years	SCHOOL READINESS
1. Quality of Exploration	Manipulative exploration, very curious; not very selective	Intentional exploration of basic materials and objects	Intentional exploration to learn basic skills	Attained basic foundation skills
2. Handling objects, materials	Still uses objects/ materials to find out about own abilities. Gross-motor activity still more important. Becomes now interested in fine motor activity.	Play materials requiring fine motor ability attract attention. Process of handling tools, objects, materials is more important.	Creating something useful- the product is more important	Uses objects materials appropriately to create a product. Needs some direction.
3. Tool handling	Handling simple everyday tools e.g. spoon	Exploring/learning basic tool use e.g. scissors	Using basic tools to create product	Skilled use of basic tools with direction.
4. Product	Only manipulation of materials, tools, objects	Process – oriented	Product – oriented	Product – centred
5. Task Concept	No task concept	Partial task concept (Process)	Partial task concept (Product)	Task concept Not consolidated Needs direction
6. Situations	Situations are related to domestic/family scenes. Stereotyped handling of some situations. Imitates adults	More complex imitation of real world. Still centres around family and domestic scenes. Stereotyped handling under supervision of adult. Brings magical into handling.	Reconstruction of real world. independent handling of known situations. Needs supervision.	Reconstruction of real world. Independent handling of known situations with direction. Unknown situations need supervision.
7. Relations with people (observed in play process) Low self esteem is indicative symptom	Parallel play – plays beside other children. Shows affection, turn taking sharing Dependence on parents and immediate care givers	Associative play – with others, doing similar activities. Temperamental, strong, willed, quarrel some, shows empathy. Starts to show some independence from parents and caregivers. Wants to be with other children	Cooperative playing group of 2 – 5, organized around common goal; social give & take; tender; comforts others. Doesn't mind leaving parents. Wants to be with friends, quarrels with siblings. Difficulty in formal situations (too many norms) Loves "teacher"	Cooperation/competition caring Independence from parents, has friends Needs/and is willing to take direction in formative settings
8. Norm Directedness	Aware of few norms	Awareness of norms	Norm awareness well developed	Norm directedness
9. Time Frame	5 – 10 minutes on task	10 – 15 minutes on task	20 – 40 minutes on task	40 – minutes on task
10. Handling of	Awareness of correct behaviour in routine	Awareness of correct behaviour in	Awareness of correct behaviour.	Compliant, needs some direction.

anxiety/ emotional control appropriate behaviour. High baseline anxiety is indicative symptom	situations; compliance as it suits the child	routine situations. Some stereotyped compliance	Most of the time compliant	Situation based anxiety may be present as a normal symptom.
11. Imagination, initiative, originality can occur at any level. Indicates creative potential.	Imagination present, depending on level			

Table 3 The pre-school child. Adapted from Holsten (2010)

Ots working in paediatrics may also want to consider how the cognitive aspects of the levels relate to Piaget's work on cognitive development (an influence on du Toit), and also the work of Erikson (table 4)

Example of how Erikson's stages of development may relate to the levels of Creative Ability by Wendy Sherwood (2012)

Erikson stage	**age**	**Task/purpose**	**Model of Creative Ability level: motivation**	**Model of Creative Ability level: action**
Trust vs mistrust	0-1	Learns needs will be met	Level 1: **Existence**	**Pre-destructive** Appears purposeless/haphazard: no planned action. Fleeting sensory focus. Little or no material or object 'holding' action.
Autonomy vs shame/doubt	1-2	Differentiation of self from others; control over basic physiological functions/social	Level 2: **Self-differentiation** To establish basic awareness of self, the environment and others. Learning how to interact with the world – contact through use of the body and socially (in a basic way).	**Destructive action** Contact with environment often unrelated to actual function or properties of objects/materials; no planning; manages situations in same way **Incidentally constructive** - by chance. Realisation of cause-effect emerges

Initiative vs guilt	3-5	Begins to make/construct things in play / accepts parents as role models	Level 3: **Self-presentation:** To develop a sense of self and showing this to others and in different situations. Motivated to 'find out' – character of motivation is one of enquiry: to try things.	**Explorative** Intentional exploration; "What can I do with this?" The pursuit of gaining knowledge (process) more important than end product. Lacks skills; difficulty selecting appropriate behaviour. Difficulty managing emotions. Does a bit and stops; effort not maintained.
Industry vs Inferiority	6-12	Entering school; child is very proud of accomplishments	Level 4: **Passive Participation** **(note that ages 6-12 are likely to cover level 4 going into level 5)**	**Experimental:** product creation and developing understanding of doing tasks from start to finish properly; self- evaluation begins. Uses tools reasonably well: produces a fair to good product. Experiments; extends knowledge. Interpersonal skills becoming stable. Participates in wider variety of situations; more refined emotions; effort maintained with regular support

			Level 5: **Imitative** Wanting to do as well as /be the same as others: doing what is expected and acceptable	**Imitative:** Focused on producing products and behaviours to expected standards; doing the same as others . Independent. Self-evaluates. Maturity in relationships develops; compensates for others. Sustained effort. Guidance needed
Identity vs identity confusion	adol	Importance of peer relationships; separation from parents; tries new roles	Level 5: **Imitative** Wanting to do as well as /be the same as others: doing what is expected and acceptable	**Imitative:** Focused on producing products and behaviours to expected standards; doing the same as others . Independent. Self-evaluates. Maturity in relationships develops; compensates for others. Sustained effort. Guidance needed

Assessment

In order to assess a child's level of creative ability, the OT needs to have knowledge and understanding of **1) each of the components (Table 1) *plus* 2) the detailed descriptions of the levels of creative ability as detailed by de Witt (2005), briefly represented in relation to children in Table 2.** To understand the components and levels, OTs will also benefit from studying theory of development (including moral development, Piaget's cognitive development, Erikson, sensory integration, motivation theory, sociology).

The levels of creative ability are used as framework for interpreting occupational performance in general (Holsten 2010).
The assessment methods are:

- **Interview** (there is no interview guide but OTs know that they need to find out about the person's occupational profile and performance)
- **Social evaluative group** – seeing the person doing things with other people
- **Task assessment** – seeing the person doing a range of activities, including familiar and unfamiliar activities. The unfamiliar activity enables therapists to see the full range of components and is more of a 'true' reflection of ability that familiar activities that a person already knows how to do.
- **Observation** – this is the key, essential assessment method and is used every time you come into contact with the person. Observation of others is also important e.g. observations of colleagues, nurses, carers, family etc.

To identify the person's overall level of creative ability, you need to gain as much information as you can about his/her ability in as many situations as possible and as broad a range of activities as possible.

Having collected your assessment information, you record your findings on the Assessment /quick reference screening tool developed by Dain van der Reyden. You must know the components and the levels in order to use this tool reliably and you are advised to gain formal training. In simple terms, you select the descriptors on the tool that best describe the person. Add up the scores in each column. The column with the highest score indicates the overall level. However, how you interpret the findings is not a simple process to explain here –it requires clinical reasoning based on sound knowledge of the components and levels, plus an understanding of the most influential components – these become most relevant when you have an equal score in two levels, making it difficult to decide which is the correct level. You also need to know the phases of the levels, in order to identify 'where' in the level the person is.

Phases:
Therapist-directed (TDP): therapist is required to act as an initiator and to provide support +++ for the person to be able to experience/try out. Person is dependent on the therapist for guidance to engage in activity participation. Quality of participation is poor. Performance facilitated (made possible by direct therapist intervention) (Sherwood 2012)
Patient-directed (PDP): the person can sustain performance at level independently and initiate **(a degree of competence); shows some self-initiated participation**. More characteristics of current level are evident and quality is improving (Sherwood 2012)
Transitional: Performance independent for those tasks and self assured in a consistent way. An individual's ability to perform action 'free' from anxiety indicates readiness for growth towards the next level of creative ability. Shows characteristics of the next level

for those tasks. Performance at level is consistent with elements of next level evident (Sherwood 2012).

De Witt (2005) suggests the use of a grid on which to record the level and phase for each of the four occupational performance areas:

- Personal management
- Social ability
- Work ability
- Use of free time.

Again, you will require to read the guidance on interpreting the findings on the grid.

Experienced therapists will be able to identify the person's level in each occupational performance area and know the phase for each. This means that you can then pitch your intervention at the right level and with the right amount of assistance/support for the person, whatever they are doing. That is, the person may have higher ability in personal management that work ability when undertaking certain tasks. Therefore, your intervention for personal management will be pitched at a higher level than for other particular tasks that s/he does in their roles and routines.

Knowing the level and phase means that you can go on to use the treatment guide to help you understand the focus of the level (what the general aims are) and how to go about achieving those aims through activity. DeWitt (2005) provides a detailed guide for each level. The guide includes application of treatment principles which guide grading your use of yourself, the environment and activities so that it poses the 'just right challenge'.

The treatment principles are:

- Activity requirements (a guide to the characteristics of an activity e.g. requires planning, requires problem-solving, duration)
- Structuring – the time and environment – a guide to how to set up the activity e.g. individual or group, already prepared or does the peson have to plan the activity, how long, what type of environment)
- Presentation – how you facilitate / present the activity
- Handling – how you use therapeutic use of self in your interactions

Based on what you know about the person's occupational profile, future image and level and phase of creative ability, you develop your OT intervention. If the client is self-presentation or above, s/he may be able to contribute to the development of the intervention plan i.e. tell you what s/he needs and wants. However, therapists must also know for themselves what would be the aims and goals of therapy, informed by many factors including aims of the service, desired outcomes etc.

As you work with the person, you continue assessing and evaluating their ability and progress or decline. The assessment tool can be used again, providing a measure of change.

Resources as references:

Barnard P (2003) Vona du Toit's Model of Creative Ability applied to paediatrics. Unpublished Undergraduate course notes, University of the Witwatersrand, Johannesburg

Crouch R, Alers V (2005) Occupational therapy intervention with children with psychosocial disorders IN R Crouch, V Alers (2005) *Occupational therapy in psychiatry and mental health*. 4th edition. London: Whurr Publishers

De Witt P (2005) Creative ability: a model for psychosocial occupational therapy IN R Crouch, V Alers (2005) *Occupational therapy in psychiatry and mental health*. 4th edition. London: Whurr Publishers
Du Toit HJV (2006) *Patient volition and action in occupational therapy*. Vona and Marie du Toit Foundation.
Holsten AE (2010) Accessing the creative self. Keynote speech delivered at the International Model of Creative Ability conference, London
Sherwood W (2012) ICAN training content.

The Crouch and Alers text refers to the model in many chapters – you are advised to look at the application of the model in practice.