Appendix 5.5:
Case Study Report 5 Bob
Bob is 12 ½ years old. He lives in Seaview, a semi-urban seaside community with his parents, Tracy & Tony, & his younger brother Dan. Bob is New Zealand European.

One year 10 months ago Bob sustained a severe TBI when he was 10 years & 8 months old in a road accident. His injuries included multiple skull fractures, intercerebral contusions, & hemorrhages. His GCS was 5/15 on admission to hospital & he had post-traumatic amnesia for 9 weeks. He was in hospital for 4 weeks, then had in-patient rehabilitation for 12 weeks. Bob made a good recovery, but continues to have difficulties with fatigue, memory, & speed of information processing. He mobilizes independently, & is independent in self-care activities.

Bob attends a Year 7 intermediate class at Seaview School full time. He is no longer receiving rehabilitation services.

Bob has always been very active. Before his accident he enjoyed rugby, hockey, athletics, long-distance running, swimming, skateboarding, climbing trees, cycling, & playing with his friends.

**Ninety five Percent**

“Bob is reported to have continued to make a very good recovery from his injury ... Indeed, his family report that from their perspective it seems as though Bob is 95% back to normal” (Rehab Npsyc, p. 2).

**Close to the Front**

“And last year when we were doing fitness training, the runs, I was normally really close to the front. Yeah.... Only one person passed me last year” (Bob, Faml, pp. 64; 67).
Introduction to Bob. The poster Bob made about his occupations.

Contents of the case study. Key to the abbreviations used to identify quotations.

Display of participants and data sources in the case study. Quotations provide information about the data sources & Bob.

Timeline of key events since Bob’s accident.

Bob’s recent occupations. Quotations illustrate some of the occupations.

Diagram: What was important about Bob’s participation.

Discussion: Important aspects of Bob’s participation: The concepts in the diagram are explained & illustrated.

Qualifying the problematic situation.

Determining solutions.

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**Key to Colors for Participation**

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<tr>
<th>Color</th>
<th>Participation Area</th>
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<tr>
<td>Green</td>
<td>Family</td>
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<td>Yellow</td>
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<td>Blue</td>
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<td>Pink</td>
<td>Rehabilitation</td>
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**Key: Abbreviations used in citations of data sources for Bob’s case study**

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>Faml</td>
<td>Family Interview</td>
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<td>Chl</td>
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<td>T1I</td>
<td>Teacher 1 Interview (Fiona R)</td>
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<td>T2I</td>
<td>Teacher 2 Interview (Beth W)</td>
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<tr>
<td>Obs CVSw</td>
<td>Observations Classroom Visit &amp; Swimming</td>
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<td>Obs PlgLang</td>
<td>Observations Playground &amp; Language</td>
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<tr>
<td>Rehab SRA</td>
<td>Rehabilitation Document: Social Rehabilitation Assessment Report</td>
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<td>Rehab DC</td>
<td>Rehabilitation Document: Inpatient Rehabilitation Discharge Report</td>
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<td>Rehab TAide</td>
<td>Rehabilitation Document: Needs Based Teacher Aide Assessment Report</td>
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<td>Rehab Ped</td>
<td>Rehabilitation Document: Pediatric Review</td>
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<td>Rehab Npsyc</td>
<td>Rehabilitation Document: Neuropsychological Assessment Report</td>
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NB: Demographic details, including dates & the gender of some participants have been altered throughout the case study to support participant confidentiality.
Tracy & Tony: Parents to Bob & Dan
Have lived in Sea View area for 4 years. Tracy is a graphic designer & Tony is a mechanical engineer. Tracy gave up her job to look after Bob, but now works part-time. She is on the PTA & helps out with school activities. She plays hockey with the local woman’s hockey team. Tony works full time. He enjoys rugby & scuba diving.

Helping Everyone.
"Here we know everyone, every neighbor" [Tony]. “Even if you didn't know them you soon knew them after his accident. People would stop you in the street & say ‘oh, & how’s your son?’” [Tracy] (FamI, p. 31).

Help from the Community
“When Bob was in hospital they did all stuff like a heap of baking…. The neighbors mowed the lawns”. A couple of ladies in the area … organized meals. There was a roster done so there was meals for about six weeks” [Tracy]…. “We had people offer to come in & clean the house…. There was lots of help from the community. Um petrol vouchers, we got an anonymous donation … The local rugby club… did a collection … That side of it was pretty special…. Like no one likes to accept help … normally you’d think you stand on your own two feet but it was quite humbling” [Tony] (FamI, pp. 2-9).

Bob
Took part in the family interview, took photos of the occupations he values around his home, made a poster about his occupations, & answered questions about his occupations.

All I Ever Wanted to do is be an All Black [national rugby team player]
“[The pediatrician] she sort of, right at the end she says ‘oh nah, he won’t be playing again’. And he was quite upset at that … And then when we went to [another pediatrician] the guy says ‘absolutely not’ and Bob broke down in tears & started crying & he says ‘but all I ever wanted to do is be an All Black’ & that was quite hard. That was hard” (Tony, FamI, p. 59).

Fiona R (Teacher 1): Bob’s Year 6 Teacher, Sea View School 2007
A teacher for 10 years – 4 years in Australia, 3 years at Sea View. Had taught Bob for 6 months when the accident happened.

One of your Own
“I went (to the hospital) a couple of times … It was just such a shock of it actually happening so it was really nice to be able to go & support him & the family as well…. I had quite a good bond with the class … You have one of those things happen to one of your kids, it’s like it’s almost one of your own … just wanted to go as well so that I could tell the other children … it made them feel a little bit better as well” (Fiona, T11, p. 1).
Beth W (Teacher 2): Bob’s Year 7 Teacher, Sea View School 2008

Building a Community
“We spend quite a lot of time at the beginning of the year building a community in our room … you can’t learn if you’re … not in a situation where you feel comfortable” (Beth, T2I, p. 14).

Their Own Voice
“The peer group becomes more important [at Bob’s age] & the appearance … the whole wanting to fit in & not wanting to fit in. Because that’s kind of what they go through in adolescence is, heavily wanting to fit in & then really wanting to make their own stand…. Getting them to express it … To survive in a college class they’re going to need their own voice” (Beth, T2I, p. 3).

Observations Sea View School: Year 7 Room 12 Classroom Visits, Playground, & Swimming at the Beach

“…The little kids are having fun in the sandpit, jumping up and down, trying to build sand castles, boys with arms around each other, or wrestling, girls holding hands or pulling each other” (Obs CV PlgL, p. 2).

Rehabilitation Reports

An Exceptionally Good Recovery
“Bob … has made an exceptionally good recovery from this injury, is back at school full time where he is achieving at a [sic] age appropriate level… Scores on the formal tests completed both in this assessment, & in the recent [hospital] intellectual assessment, are consistent with this picture, & almost all scores fell into the expected average range. Thus verbal & non-verbal skills, executive functioning, & information processing all appear largely intact. The main exception to this seemed to be on tests of memory, where Bob did display some difficulties in encoding information into memory. The other area of difficulty seemed to be on tests with a "strong visual scanning component" (Rehab, Npsyc, p. 5).
Fully dependent for mobility, self-cares, communication

**Key**
- Rehabilitation Participation
- Medical Participation
- School Attendance & Support
- Out-of-School Participation
- Data Collection for Study

**Time Frames for Key Events & Changes for Bob since Injury**

**Hospital**
- 05/07 – 06/07 (4 weeks)

**Social Rehabilitation (Support Needs) Assessment completed**
- 09/07

**Home Exercise Program 09/07**

**In-Patient Rehabilitation**
- 06/07 – 09/07

**Ophthalmology Assessment**
- 08/07

**Audiology Assessment**
- 08/07

**Injury Event**
- 05/07

**Training for Independence Program:**
- 09/07-04/08
- PT & OT - Monthly

**Neuro-psychologist Assessment**
- 06/08

**Home Exercise Program**
- 09/07

**Out-of-School Participation**
- Swimming at the beach 12/07
- Running & biking with parents in evenings 02/08
- Cross Country Running 04/08

**School Attendance & Support**
- Attending School 4 mornings/week 01/08
- Attending School full-time 04/08
- Teacher Aide support discontinued 04/08
- Needing supervision on uneven ground 04/08

**Data Collection for Study**
- Trip to Australia with family 11/08
- Will not play in contact sports again 12/08
- Data Collection commenced for study: Family Interview 03/09

**Medical Participation**
- Bump to head in playground 06/08
- Pediatric Review & Discharge 12/08

**School Interviews & Observations**
- 04/09

**Neurovocational Assessment**
- 06/08

**PT & OT**
- Monthly

**Power naps at weekend**
- 12/08

**Ran in school athletics**
- 02/09

**Fully dependent for mobility, self-cares, communication**
- 02/09

**Teacher Aide support discontinued**
- 04/08

**Teacher Aide support**
- Discontinued 04/08

**Data Collection commenced for study: Family Interview**
- 03/09

**Data Collection for Study**
- Trip to Australia with family 11/08
- Will not play in contact sports again 12/08

**School Interviews & Observations**
- 04/09

**Trip to Australia with family**
- 11/08

**Running & Contact Sports**
- Will not play in contact sports again 12/08

**Cross Country Running**
- 04/08

**School Attendance**
- Attending School full-time 04/08
- Attending School 4 days/week 01/08
- Attending School 4 days/week 01/08

**Ophthalmology Assessment**
- 08/07

**In-Patient Rehabilitation**
- 06/07 – 09/07

**Hospital**
- 05/07 – 06/07 (4 weeks)

**Pediatric Review & Discharge**
- 12/08

**Otolaryngology Assessment**
- 08/07

**School Attendance & Support**
- Attending School 4 mornings/week 01/08
- Attending School full-time 04/08
- Teacher Aide support discontinued 04/08
- Needing supervision on uneven ground 04/08

**Data Collection for Study**
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**Medical Participation**
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- Pediatric Review & Discharge 12/08

**Pediatric Review & Discharge**
- 12/08
<table>
<thead>
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<th>Bob’s Recent Occupations</th>
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<tr>
<td><strong>Chores at Home</strong></td>
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<td><strong>Leisure Occupations at Home</strong></td>
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<td><strong>Occupations with Family &amp; Friends</strong></td>
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<td><strong>Class Occupations</strong></td>
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<td><strong>Extra-curricular Occupations</strong></td>
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<td><strong>Playground</strong></td>
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<td><strong>Community Sports</strong></td>
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What was Important about Bob’s Participation?
Changeable Participation Over Time with Others
The twisted strand in the diagram represents the way Bob’s participation was intertwined with other participants, & the way this participation evolved over time. Others in the Sea View community were involved throughout his hospitalization, rehabilitation, return to home, & school. Bob’s parents took him in for an early visit to his classroom on the day he was discharged from inpatient rehabilitation. “He was, happy we got into his class & all the other kids were trying to get into his room…. They sat down, they ended up doing a game with him…. It was good for the kids, good for him” (Tony, Faml, p. 22).

Initially, Bob’s participation changed markedly. “Tony reports that Bob’s accident has had a huge impact on the family & has ‘turned their lives upside down’” (Rehab SRA p. 3). Over the time of his rehabilitation, Bob participated with a wide range of specialists, & regained many of his abilities. Formal assessments suggested most of these had returned to average levels, although discussions suggested changes compared to his pre-injury function. “His reading is a bit lower … And his writing probably isn’t quite where it should be. It’s quite, it’s a bit lower” (T2I, p. 8). After 11 months, participation with rehabilitation specialists ceased, but Bob’s “miraculous recovery” (T1I, p. 6) meant he was “special” (Faml, p. 27). This changed others responses to his participation. “They did a Mini Olympics at school…. They had a special guest that brought in the flame…. He had to come out & he had to run around the court & then up to the flag pole…. It was open to all the parents that day … And you looked & there was everybody in tears because it was Bob” (Tracy, Faml, p.27).

Changeability also refers to the ease with which aspects of participation, including people, time, place & occupation, could change. Safety concerns meant that specialists advised Bob against participating in Rugby, understanding that the structure of that game could not be changed. Despite this, Bob continued to contribute, albeit changing his role. “He’s actually going to be involved again this year but purely as a water boy … Run the water on for his mates…. His team kept him involved, & asked if he wanted to be involved, so he, he’s been the water boy ever since” (Tracy, Faml, pp. 57;61).

Arrows point two ways indicating participants looked to the past & to the future. “What nails him at the moment is the, fatigue side of it but maybe in one or two years now he can get back into his running” [Tony]. “Just can’t do the distance where he was. It used to, be nothing for him to go & run five ks” [Tracy] … And like now he can go and run bloody eight ks now but he’d be absolutely shattered tomorrow” [Tony] (Faml, p. 66).

What was important about Bob’s Participation?
Shared Occupation
Occupations that were shared with other participants were central to Bob’s participation.

Through family connections Bob continued to share occupations with a range of people. In hospital, there were signs that Bob was aware of others & the things they were doing. “They [friends] would come in & crack jokes & do all sorts just to, even though he was out to it, they would just come in & you know do things or talk to him & things like that” (Tracy, Faml, p. 15).

Occupations were also shared with toys, these connecting with other people & experiences. While on their trip overseas, Bob’s teddies almost got lost when a cleaner threw them in the rubbish. “Tell me about these different teddies. I can see two in there”[in the photograph taken by Bob] [R]. “That one I go when I was really little. When I was born…. My nana knitted that for me. That one I got from McDonald’s” [Bob] (CL, p. 7). Occupational experiences were indirectly shared with others through communication, although this was more difficult for Bob. “I actually have to stop them [classmates] & let other people [Bob] have their say as well” (Beth, T2I, p. 2).

Sharing occupation was a means of people coming to know about & connect with each other, the places they went & the things they did, & learning how to carry out unfamiliar occupations. In the hospital “Some came in & like some would just look at him, they were just, didn’t know what to say to him…. Bevan & Kerry & them got used to it” (Tracy, Faml, p. 15).

Connections
Connection was about relationship between others, occupation, place & time. It was often expressed with the word “knowing” (e.g. Fl, p. 63) & was also signified by words such as “involved” (Fl, p. 63), “close” (Fl, p. 85), “linked” (T1I, p.2), “bond” (T1, P. 1), & “tight” (T2I, p.11). At Sea View School, Bob shared in learning occupations that were closely connected with the natural environment “Because we’re an environmental school as well, we try & relate to the real world…. I think it’s good for the kids because it makes a connection to there. Like they can see a purpose for that learning” (Beth, T2I, p.4).

Whilst some connections shifted & changed, others were closely woven & continuous. These continuous connections provided a stable background for other participation experiences, & were expected to ease the change for Bob beginning at a new school. “Kevin will look after him [at college]…. One of his rugby mates. But him & Kevin got quite close at camp last year. Kevin really looked after him…. Yeah, he’s at [college] now. He’s a year older” (Tracy, Faml, pp. 85-86).
What was important about Bob’s Participation?

Patterns
Bob’s shared occupations were patterned in terms of the people, times, places & occupations. Regular temporal patterns were particularly evident, initially with the regular short sessions of school attendance, & gradual increases in these hours. Short sessions of activity were interspaced with relaxation times. “About 10 minutes, & then we zipped him home. Just little like, because at that stage it was still um, not to, get the brain too active for too long like” (Tony, Faml, p.22).

The pattern of Bob’s shared occupation was also characterized by diversity, such as the range of children’s developmental stages in his class, & enjoyment of diverse occupational experiences. “[Bob’s classmates] did silly photos & um, I think it gave, Tracy & Tony um, just something more to talk to him about…. I know he was going to be in there [hospital] for a while so it was yeah just trying to do something a little bit different” (Fiona, T11, p.2).

Fit
The degree to which Bob’s abilities matched with aspects of others sharing in an occupation, aspects of the occupation itself, and with the location and timing of that occupation. After Bob’s accident there were some misfits between his energy levels and thinking, and the demands and risks of his previous occupations. In addition to Bob’s recovery, others actions helped address misfits and enabled him to participate.

“His reading went backwards a bit, it’s only just starting to pick up now. He just couldn’t, read, he just didn’t have that time. Like when he did go back [to school] he had a couple of tests, & I’d read him the story, & then he’d answer the questions … by the time he’d read the story he was too tired to answer the questions” (Tracy, Faml, p. 77).
Contributing: sharing experiences, ideas, & abilities with others in an occupation. Bob’s contribution to occupations was supported by others who provided him with adequate time to complete tasks & compensated for his lost abilities. Bob’s contribution was also supported when leaders created opportunities & valued diversity.

“He still goes [to rugby], he does training…. Bob went along there one day to watch [his mate] being a ball boy [for a provincial game], & one of the guys didn’t turn up, so he got to be a ball boy” (Tracy, FamI, pp. 61-62).

“Bob sits still with little interaction. He has not contributed to class discussion at all” (Obs, PlgLang, p. 4).

Caring: “keeping an eye on” & supporting other’s wellbeing in shared occupation (Beth, T2I, p. 5). Bob was nominated & voted in as a House Leader at school. “We had a house leader meeting last week, & at the end of it they shared their goals & concerns. [Bob] said that he was concerned that he would forget to do things that he should have been doing as a house leader. And the group … they said ‘there’s 12 of us here, we’ll all help you, we’ll all support’” (Beth, T2I, pp. 7-8).

Valuing: aspects of shared occupations which were important to participants. The Sea View community valued their physical and social community, interdependence, competition, & achievement.

It was difficult to engage Bob during his interview. However he talked enthusiastically when I asked him about his rugby achievements & running medals.

“Those are for running ... coming third. Um, these are from rugby. These are from touch I think, & those are from [manufacturer who sponsored triathlon]. That’s what I got when I came third in the North Island cross-country champs … that’s from being first for the fun run. That’s from rugby & that’s from rugby” (Bob, Cl. pp. 6-7).

“Everyone’s out here for the same reason I think, for the kids” (Tony). “Kids & the community out here, it’s just the thing” (Tracy, FamI, p.32).
Driving: visioning; learning about, & weighing up opportunities; planning for, preparing, & pressing to contribute to shared occupation. Bob played a part in driving his own participation with clear ideas about what he wanted to do, taking up opportunities, & pushing himself to use his abilities. His family were also proactive in driving his participation. Bob & his family were supported in their efforts by an extended network of family & friends in the close-knit community.

“In his cross country, it’s actually, it’s actually a race, & we would just want him to compete, like take part, but ... he likes to do his best as he can, so he tries to pass .... He’s quite stubborn. He makes his mind up & he usually does it .... If he says he’s going to win that day he’ll go out & win that day” (Tony, FamI, pp. 66-70).

“The person he’s sitting with at the moment is quite outgoing. A boy... who’s quite outgoing. Um, which seems to hel Bob to participate because he’s kind of pushed in to it a little bit more” (Beth, T2I, p.2).

Regulating: limiting a person’s participation in shared occupations. Bob’s participation was regulated in response to medical advice about the risk of a repeat head trauma, seizures, & fatigue. This was balanced by allowing him to participate in occupations where, after careful deliberation, no immediate risk was perceived. Bob & others came to understand the limits enforced for his participation & Bob generally complied with these limits. He & his family grieved for occupations lost to him.

“One thing that’s stuck with our minds was S. [Bob’s pediatrician], she always says to us,” (Tony) “Don’t wrap him up in cotton wool!” (Tracy). “Yeah. ‘If he wants to climb a tree you’re going to be absolutely horrified but let him climb the tree. And if he falls, well no one’s going to know what’s going to happen, but you can’t wrap him up in cotton wool’. So that’s why this year, uh we says nah go and play touch & the first couple of games we were like oh Jesus but now at the end of the year it’s like no worries yeah.... We thought oh put him into soccer.... And the doctor says to us, ‘do you know actually there’s some really serious head injuries with soccer’ ... He said ‘soccer’s a no-no’. ‘What about hockey?’ ‘Oh no, no hockey’. You know so, it’s numbered the sports he can play” (Tony, FamI, pp. 64-65).

Leading: Directing a shared occupation. Leaders who modeled & promoted respect for diverse views & abilities when directing a shared occupation facilitated participation.

“I ... believe they should all be able to work with anyone in the room.... & with a wide range of people regardless of how they feel about them” (Beth, T2I, p. 2).

Important Aspects of Bob’s Participation: People
**Adjusting:** Altering a shared occupation in a way that enables another to be involved. Adjusting was not prominent in the data, but was used to good effect by Bob’s teacher, when she adjusted time frames & occupations.

“At the start of the year] we were just doing games that involved the short term memory to remember names of people in the room…. I changed that round very quickly so that Bob was at the beginning of the name game & not at the end of it. It’s like okay well we’re going that way and like Bob was number two you know, rather than like number twenty in the line…. so that he only has three or four things to remember” (Beth, T2I, p. 13).

**Achieving:** Performing a shared occupation to a satisfactory level. Achievement facilitated a positive participation experience. It was valued in the community, & was recognized through shared ceremonies with awards.

“How did that [swimming evaluation] go?” (Researcher). “Good…. It was good & it was fun. Oh & I finished it. Oh we had to swim 200 metres without stopping … in the sea. Mum was there, parents, teachers” (Bob, ChI, pp. 1-2).

“I didn’t want not just the class, but the whole school to forget what he’s actually going through & the achievements he was making. So we have what’s called the Big Award at school…. It’s a very special one, & I think they used to get maybe some movie vouchers or something as well as a trophy & I gave one to Bob” (Fiona, T1I, p. 3).

**Having a Say:** Sharing preferences, understandings, & experiences with others. After his accident, along with some of his peers, Bob did not readily have a say in class, but was facilitated to do so by his teacher’s leadership, & by being given more time. Some reduced ability for expressing his ideas was evident during our interview.

“The fact that they’re feeling, able to share their opinions on things I guess is the beginning point of a year” (Beth, T2I, p. 3).

“He has been told at class that he needs to speak up and voice his opinions a little bit” (Tracy). “I have been speaking up a bit more this year (Bob). “You have to if you’re a house captain, so you have to” (Tracy). “Yeah I am” (Bob) (Faml, p. 80).

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**Important Aspects of Bob’s Participation: People**
Including: actions aimed at facilitating others to be involved in a shared occupation. This involved actions such as talking to another, joking, noticing & greeting, inviting, encouraging, offering help, & not singling others out as different. When I visited, actions towards me were inclusive, with greetings, introductions, & invitations. The junior school had a “friendship seat” where children could wait if they felt lonely & peers would invite them to play.

“If you took him anywhere, everybody … would say hello to him but not as if they were singling him out you know … if they wanted to know anything about him they’d always talk to him … ask him ‘how are you feeling’, or ‘how are you getting on at school’“ (Tracy, FamI, p. 35).

“I wouldn’t put [Bob] in the category of needing a teacher aide. A teacher aide would be great but…. having a teacher aide stuck to a child creates a stigma as well so…. You want to try, & make them look you know, make it feel like that teacher aide is there for more than just this one person” (Beth, T2I, p. 9).

Reciprocating: responding to each other in kind.

“There’s quite a bit of working with a partner, & then sharing back after that so they’ve got time to talk it through” (Beth, T2I, p. 2).

“We’d like to think some time if someone else has a problem in there, we might be able to help out in some way you know, as a bit of pay back or something, a bit of repayment” (Tony, Faml. p. 9).

Abilities: Capacities that enable performance of a shared occupation. Bob made a good recovery after the accident, & had capacity to participate in competitive sports activities. Bob, his family, teaching staff, & peers were aware his capacity to share in occupations had changed, reflecting memory & information processing difficulties, subtle changes in social judgement, & decreased endurance. Rehabilitation assessments showed that apart from memory he was achieving in the average range. They emphasized his “remarkably good outcome” (Rehab NPscy, p. 5).

“When Bob first came out … he was different … the drugs were still in his system, he was tired all the time & he wouldn’t talk as much as he normally did … he couldn’t run around & follow the kids like he used to … some of his good friends have really stayed & some of his good friends have moved on” (Tony, Faml, p. 17).

“A lot slower in doing things or processing information…. It’s probably him pushing himself so much, that made him so tired” (Fiona, T1I, p. 6).
Knowing: Understanding how to use inclusive actions to help others share in an occupation. When there had been change for Bob, such as after the accident, or with a shift of school, others didn’t know how to participate with him. Through sharing in occupation together they came to know better.

“Last year I had a girl that was Bob’s memory! Tracy would say ‘just tell Kirsty & it will get to us’. And Kirsty would ring him at home and say ‘Bob it’s learning pathways tomorrow, have you got your covered shoes? We’re going swimming tomorrow, don’t forget your togs…. I didn’t set that up. I think she just took it on her” (Beth, T2I, p. 11).

Communicating: exchange of information. The school & wider community used multiple avenues to share information, supporting people to know about events & each other’s needs. Flexibility facilitated direct communication, such as Tracy being able to drop in to Bob’s class and the staffroom to talk with the teacher. Communication occurred through word of mouth, group discussions, the local newspaper, classroom websites, school assembly, & the school radio station. Rehabilitation providers communicated directly during visits, but relied on written material to communicate assessment information & advice.

“We emailed, I think we recorded some messages for Bob” (Beth, T2I, pp. 1-3).

Alternative Interpretation
This quote could be interpreted as Kirsty adopting a “mothering” role towards Bob. However, her actions are considered in the context of a community that was pro-active in enabling each other to participate. It is also noted that Kirsty had specifically identified that Bob needed help to remember things and responded accordingly

Important Aspects of Bob’s Participation: People
Proximity: The location of people to each other or to an occupation. In the small community, Bob & his friends lived close to each other, the school, & the beach. This facilitated them to regularly share in occupations. In class, proximity of Bob & other children facilitated them to exchange information & materials during shared occupations. Beth regularly moved the children’s seating positions so they would get to know each other.

“What happens after school?” (Researcher).... “I walked ... I walk with my friend ... he lives down the end of the walk” (Bob, Chl, p.1).

“There is quiet talk as children share ideas, or show each other completed work. Some children stand & move around quietly to obtain items such as worksheets or pencil sharpeners.... I notice Bob is talking, sharing ideas with a girl across his cluster of desks” (Obs PlgLang, p. 5).

While Bob was in the hospital & rehabilitation settings, the distance from the community meant Tracy & Tony struggled to participate in rehabilitation, work & home occupations.

“We were probably using ... over a hundred dollars of fuel a week.... We worked week about to keep both employers happy.... Usually it’s alternating, one night would be Tracy, one night would be me, & we’d switch & swap.... From when we woke up at eight o’clock in the morning you’d just about be there all day until ... eight o’clock that night. There’d be someone with him the whole time” (Tony, Faml, pp. 7-13).

Opportunities: Openings & resources for shared occupation afforded by the environment. Rehabilitation reports reflect the availability of rehabilitation resources for Bob, but give little or no consideration to opportunities & resources in his community. Observations & interviews found the community provided multiple natural & built opportunities to facilitate participation in shared occupation. Flexibility in the curriculum enabled classroom activities to take advantage of these opportunities, creating connections between people & place.

“The new curriculum is quite broad, it’s quite open, & it is up to each individual school to reflect their community’s needs.... So we do stuff that does relate to the beach, like going down to swim at the beach & we participate in the cockle counting, the shellfish monitoring surveys.... And the junior team are going to do a beach clean-up” (Beth, T2I, p. 4).

Noise
Tracy & Tony were made aware of the negative effects of noise for Bob during rehabilitation. The children seem to participate quietly together in written language tasks during my visit.

“The room is very quiet while the children fill in the worksheets. Beth explains to me that the children asked for quietness at the start of the year when she asked them what they needed for their reading contract” (Obs PlgLang, p. 5).

Important Aspects of Bob’s Participation: Place
Important Aspects of Bob’s Participation: Occupation

Challenge:
When Bob was able to achieve an occupation that was challenging, he experienced a sense of achievement.

“I think he didn’t approach me because I think he wanted to be able to do it on his own. I have a feeling he just wanted to do it on his own just to try & prove that he can do it” (Fiona, T1I, p. 9).

“He represented his school in the [cross country] … last year. Didn’t come anywhere. But it’s a real gruelling one. But you know he finished it, & he came ahead from of the guys in the school…. It was a real tough one though” (Tracy, Faml, pp. 68-69).

Structure: the features & steps of a shared occupation. Early after his accident, occupations that had a simple structure supported Bob to participate. Flexibility in the structure of an occupation also meant it could be adjusted to fit with children’s abilities. At the beach, classroom swimming was able to be individualized for groups of children with diverse abilities.

The day Bob was discharged home, Tracy & Tony took him to his class for a short visit. He participated in a game with simple structure. “They sat down, they ended up doing a game with him... passing a ball around the room…. Silent ball (Tony).... “Really easy, because I didn’t talk at that time.... And you’re not allowed to talk in silent ball so I won most of the time, except I would drop it” (Bob) (Faml, pp. 22-23).

Roles:
Some occupations involved diverse roles. This meant that when Bob couldn’t contribute in one role, other roles were available to him. 
I used to run a touch rugby tournament ... he’d sit & watch that & it would be quite hard. But actually I got him reffing in the end, so that was quite good” (Fiona, T2I, p. 7).

“I’m going to go to my team’s rugby games. Because I’m the water boy” (Bob, ChI, p. 9).
**Physicality**: the level of physical activity provided by an occupation.

At this age, along with his peers, Bob valued more physical occupations, but these were regulated due to the risks involved.

“When they were younger they wanted to swim at the beach. Now they’ve got older they want to jump off the wharf at the top. So when I take them down they normally just jump down off the wharf & ah, no they enjoy that…. He sort of knows what his limits are like you know he won’t go & climb up a cliff with rocks & no ropes & things like that” (Tony) .... “All the boys go & climb that other cliff. That rock thing” (Tracy).... He wants to do it.... Now as he gets older he wants to but…. Maybe one to two years from now he’ll do it” (Tracy) (Faml, pp. 96-100).

**Risks**: The degree to which an occupation might result in an accident & further injury.

“Extra precaution needs to occur to ensure repeated & cumulative head injury doesn’t occur. Bob should avoid any activities where there is an increased risk of falling or further head injury i.e. Contact sports. Bob will require 1:1 adult assistance when participating in water activities due to the increased risk of seizures associated with a head injury” (Rehab SRA, p. 11).
**Pace**: the rate at which aspects of a shared occupation occurred. Although Bob enjoyed fast-paced physical occupations, his processing abilities were slower, & he found it hard to keep up with fast-paced class-room discussions & activities.

“*He needs more time to process it*” (Beth, T2l, p. 1).

**Time Frame**: the duration or point in time of a shared occupation. Where time frames were flexible, they could be lengthened to facilitate Bob’s participation, however this was not always possible in testing situations. Time frames for improvements in Bob’s function were long-term, as were time frames for him to begin participating in more physical occupations. The duration of the school day seemed long for Bob.

“School … boring school work…. it seemed to go on forever” (Bob, Chl, p.1).

“But maybe in one or two years from now he can get back into his running” (Tony, FamI, p. 66).

During his rehabilitation, Bob regularly visited his class for short time frames. “keep it short & sharp & then relaxation time…. Like you know it was a ten minute visit if that … It was in & out” (Tony, FamI, pp. 21-24).

**Schedule**: the patterning of shared occupations over time. After the accident, Bob’s schedule changed. He had reduced attendance at school & regular times of rest to help manage fatigue. Over a period of seven months, the amount of time he participated at school gradually increased. Regular participation in therapy ceased with a return to full time school. Bob felt that his rests took up too much time in his schedule, although his schedule was sometimes busy.

“It [rehabilitation] got him into a routine you know he had to, get up in the morning, have his breakfast by a certain time, go down for his first session…. so it got all that happening” (Tony, FamI, p. 48).

“Bob typically attends school full time … he does tend to fatigue easily & tends to have “power naps” on the weekends as catch up…. Tracy is managing Bob’s fatigue well, pulling him out of school if necessary” (Rehab Ped p.1).

“How do you feel about power naps?” (Researcher). “They suck…. Because they do. Takes up my, takes up time in my day” (Bob, Chl, p. 2).

“And rugby practices you go to?” (Researcher) “Yeah just the ones I can make it to because I got something else on a night that we’ve got rugby training” (Bob, Chl, p. 9).

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**Important Aspects of Bob’s Participation: Time**
Torn Threads: Bob’s accident parted him from participation in many of his usual occupations.

Dropped Connections: Some of Bob’s friends found it hard to know how to relate to him after the accident. Some fell away, finding new friends, & interests. With a transition to a new school, further changes in the network of friends & adult around him were anticipated.

Tensioned: Over the time of his hospitalization & rehabilitation, Bob’s family were pulled in different directions. Tensions occurred as they strove to simultaneously meet Bob’s needs, take part in rehabilitation, support his sister, & manage financial & employment demands. As Bob recovered, he stretched his abilities as far as he was able to participate in occupations.

Misfitting: Although Bob made a good recovery, misfits occurred between his abilities & the challenges posed by occupations he would typically have participated in. This occurred at a time for him & his peers, when there was a normal developmental tension between children wanting to blend in but equally wanting to stand out for their own viewpoints & achievements.

Closely watched: People felt the need to protect Bob from further injury. They described wanting to wrap him in cotton wool, & monitored him with care.

Uncertainty: Bob & his family initially felt unconfident about the things they needed to do to help him to participate. They were concerned they might “follow the wrong path”, and were unsure of the future. Some of Bob’s friends didn’t know what to expect. They were didn’t know how to interact with him. Bob was hesitant & lacked confidence in his abilities.

Whoever picked up Dan in the afternoon, would pick up a meal, bring it back in … I stayed the first night with Bob, Tony came home with Dan. And then he came in the next morning and then to give me a break, I’d come home for a while but then I came back in with Dan & then I would come home again afterwards. Sometimes we were doing two or three trips in, especially when he [Dan] was back at school…. Friends of his … a few of his mates wanted to come visit… and we said no, & that was while he was in intensive care because we just didn’t think it was right for them to see how he was. But then when the other ones … came in & like some would just look at him, they were just, didn’t know what to say to him … Joey’s only just now … coming back. Like you know he’s hanging out with Bob again now but, he just, he went a little bit funny (Tracy). “When Bob first come out … he was different in a sense that the drugs were still in the system, he was tired all the time & he wouldn’t talk as much as he normally did … couldn’t run around & follow the kids like he used to” (Tony) (Faml, pp. 10-17).
Interlinked: Bob & his family were linked in as members of a close knit but extensive community. The linkages gave strength to the community. When one link was weakened, the whole remained firm & supported by the remaining linkages.

Continuous Connections: Throughout, connections with immediate & extended family, close friends, classmates, & teachers were maintained & constant.

Blended: Where there was diversity amongst the people participating in an occupation, differences in people’s abilities, experiences, & understandings were readily appreciated & accommodated as part of the wider community.

Flexible: A degree of give in routines, time frames, & in available occupations allowed for experienced leaders to adjust things to fit with the needs of Bob & his family.

Knowing Boundaries: Where people became aware of the limits placed for Bob & the reasons for them, they accepted & supported his participation within those boundaries. Bob’s own awareness & acceptance of the boundaries was facilitated.

Creativity: People around Bob began to generate ideas for novel ways to include him in their occupations.

Familiarity: With repeated involvement in shared occupations, Bob & others became better able to participate.

Regularity: Tracy & Tony had learned that episodes of shared occupation were better for Bob if short and balanced with episodes of rest or less demanding occupation.

Building Up: The amount of time Bob spent in shared occupations in the wider community was driven & led slowly & steadily by his family, teacher, & other people in the community who had experience of his needs.

Pulling Away: Dedicated adult support was drawn away from Bob, in line with his preference to achieve challenging occupations alongside his peers without assistance.
It’s time for the swim. The children are told to go & get their bags, & get ready for their walk…. As we walk, the mums & children all talk with each other - Tracy talks about hockey & rugby - she knows most of the children by name, & also knows their parents. It sounds like some of the mums played hockey together when they were still at school. We walk under the pohutukawa trees down the steep concrete steps to the beach…. Children are allocated to parents- approximately 5-6 per group…. I notice the range of different sizes the children are at this age- big variation…. One group of swimmers begins quickly, & swim along the beach out to the tree, taking care not to move too far off shore. Another group of non-swimmers sit on the posts & bushy bank along the beach. Another group put on the life-jackets. Miss W. prompts & encourages them, giving instructions about practicing floating, lifting their feet off the bottom, & taking steps. The swimmers return- Bob is in the lead, swimming ahead of the others on his own. Tracy monitors him closely when he gets back, helping him with his goggles, checking for dizziness…. I asked Tracy how she comes to be helping with swimming … she answers that she ‘got roped into this’. The children can only go swimming if enough parents help (Obs - Swim, pp. 4-5).