

DEI ADVOCACY ACTION GUIDE: PROMOTING ALLYSHIP IN OCCUPATIONAL THERAPY

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ACTION GUIDE MISSION STATEMENT

OTA Mission Statement: The mission of the Ohio Occupational Therapy Association, Inc. is to promote the profession of occupational therapy, address professional issues in occupational therapy practice, and advance the practice of occupational therapy in the state of Ohio. Our primary goals are to serve the members of the association by providing continuing education, support, and resources, and to meet the needs of consumers of occupational therapy in the state of Ohio through advocacy and encouraging the delivery of professional and evidence-based practice.

AOTA Vision 2025: As an inclusive profession, occupational therapy maximizes health, well-being, and quality of life for **all people, populations, and communities** through effective solutions that facilitate participation in everyday living.

Our Purpose: The purpose of this action guide is to provide occupational therapists, occupational therapy assistants, students, and educators the tools to become an advocate for the occupational therapy profession and their clients belonging to marginalized communities. An occupational therapy professional's goal is to support meaningful life participation and holistic wellness and many individuals from marginalized communities experience occupational injustice, affecting their health and occupational performance. To meet the needs of occupational therapy consumers, we must have the knowledge to meet the unique needs of all clients and have the confidence to advocate for real change.

DEFINING DEI

Diversity

Diversity is defined as the unique attributes, values, and beliefs that belong to an individual. These factors can include socioeconomic status, race, sex, ethnicity, age, disability, sexual orientation, gender identity, and religious beliefs.



Equity

Equity is defined as an approach that ensures there is an equal opportunity to access resources while seeking to balance the disparities that exist due to a system of oppression and privilege.



Inclusion

Inclusion is defined as embracing the value of all individuals and welcoming diversity to foster acceptance, respect, belonging, and value for everyone.



DEFINING DEI: CULTURAL COMPETENCE VS. CULTURAL HUMILITY

Cultural Competence

While the term cultural competence was widely accepted in the OT community for years, this term implies that there is an end point to the learning process. A culturally competent provider is knowledgeable about other cultures but has a bigger emphasis on the differences between cultures instead of addressing the prejudices and power imbalances that are created as a result of cultural ignorance.



Cultural Humility

The term **cultural humility** has emerged as an alternative learning method to cultural competency. This term emphasizes that recognizing gaps in practice, acknowledging bias, and recognizing power dynamics' impact on both patients and providers is a continual learning process. Through this learning process, providers will have the opportunity to promote positive change will also allowing for mistakes and growth.

ADDRESSING DISPARITIES: BREAKING DOWN BARRIERS TO OCCUPATIONAL JUSTICE

Occupational justice defines an individual's right to participate in meaningful occupations.

There are several **occupational injustices** that an individual can experience based on their identity, background, and experiences.

<p>Occupational marginalization describes the loss of accessibility or lack of opportunities to engage in meaningful occupations.</p>	<p>E.g. A woman is expected to stay home to raise the children and look after the household resulting in loss of meaningful occupations such as leisure activities and social participation.</p>
<p>Occupational deprivation is the unchosen exclusion from occupations for a prolonged period of time.</p>	<p>E.g. A 75-year-old person is socially excluded from using technology and leisure activities because of age.</p>
<p>Occupational alienation is a prolonged instance of disconnection or isolation. This injustice most commonly occurs on a social level.</p>	<p>E.g. Those in refugee confinement or who are incarcerated.</p>
<p>Occupational imbalance is when there are occupations that take up disproportionate amounts of time or energy.</p>	<p>E.g. Individuals who have multiple health conditions spending a disproportionate amount of time tending to their medical needs compared to other occupations such as leisure.</p>

ADDRESSING DISPARITIES: BREAKING DOWN BARRIERS TO OCCUPATIONAL JUSTICE

Individuals who are a part of *minoritized*, *underserved*, or *underrepresented* groups are at higher risk of experiencing negative health outcomes. These groups can be based on, but not limited to:

● **Race/Ethnicity**

● **Sexual Orientation**

● **Gender Identity**

● **Disability Status**

● **Religion**

ADDRESSING DISPARITIES: BREAKING DOWN BARRIERS TO OCCUPATIONAL JUSTICE

Health Disparities Include:

Physical Illness

(e.g. cancer, cardiovascular disease, and diabetes)

Mental Illness

(e.g. depression, anxiety, and PTSD)

Premature Mortality

ADDRESSING DISPARITIES: BREAKING DOWN BARRIERS TO OCCUPATIONAL JUSTICE

Access to care (e.g. insurance, competent health care, affording appointments) is also significantly affected by social determinants of health such as:

Socioeconomic Status

Primary Language

Geography (e.g. rural vs. urban)

Education

Age

The World Health Organization defines *social determinants of health* as the conditions in which people are born, grow, live, work, and age and can account for up to 80% of an individual's health outcomes. **Health equity is not possible without meaningful reductions in disparities.** In order to reduce health disparities and increase quality of life, the *functional, social, and emotional needs* of our clients need to be identified and addressed.

OCCUPATIONAL THERAPY'S ROLE IN DEI ADVOCACY: DEFINING ADVOCACY

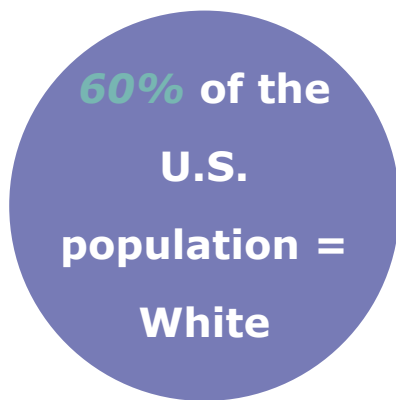
Advocacy is the act of speaking up or working on behalf of the interests of another person, group, or cause (Hart, 2019).

“Occupational therapy practitioners can advocate for increased access to care, improvement in treatment outcomes, and equity in service provision for the clients they serve. In addition, recognizing and incorporating the intersectionality of clients’ social identities during service provision is imperative”
(Hart, 2019).

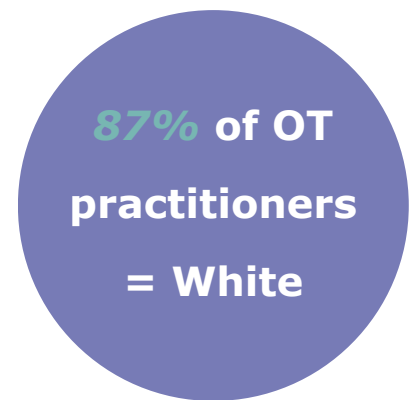


DEI ADVOCACY IN ACTION: STEPS TO BE AN ALLY

The racial and ethnic makeup of occupational therapy practitioners is not reflective of the diversity of the U.S. population



VS



The National Institute of Health's Office of Diversity, Equity, and Inclusion defines **Allyship** as when a person with privilege works in harmony with marginalized communities to help break down the systems that challenge that population's rights, equal access, and ability to thrive in our society.

While those who are well-represented fear the loss of power, feeling uncomfortable, and doing the wrong thing when they advocate for change, people from *marginalized, discriminated, and underrepresented* groups fear being the lone voice and of the impact discrimination has on their daily lives. Being an ally is hard and takes practice, but it has the power to *promote equity, foster community, advance inclusion, and address bias.*

(Dickenson, 2021).

DEI ADVOCACY IN ACTION: STEPS TO BE AN ALLY

Effective, Transformative **ALLYSHIP** Involves:

Reflecting on your own identity and values.

Beginning to recognize other's identities and whether they are privileged or marginalized in this society.

Standing with the communities you are trying to support and not speaking over them.

Practicing the 7 Allyship Behaviors in Your Daily Life. These include:

- 1. BE CURIOUS: EXPLORE THE IDENTITIES OF THOSE DIFFERENT FROM YOU**
- 2. HUMBLE ACKNOWLEDGMENT: ADMIT THAT YOU DO NOT AND WILL NOT KNOW AND UNDERSTAND EVERYTHING**
- 3. VULNERABLE INTERACTIONS: WORK WITH OTHERS TO IDENTIFY BIASES**
- 4. HONEST INTROSPECTION: UNDERSTAND YOUR OWN BIAS**
- 5. EMPATHETIC ENGAGEMENT: HELP PEOPLE UNPACK THEIR BIAS-DRIVEN BEHAVIOR**
- 6. AUTHENTIC CONVERSATIONS: BE HONEST AND OPEN**
- 7. COURAGEOUS RESPONSIBILITIES: INCLUDE THOSE WHO ARE NOT PREVENTED FROM BEING SEEN AND HEARD BY SOCIETY**

DEI ADVOCACY IN ACTION: DAILY PRACTICE LEVEL

Occupational therapy practitioners must demonstrate occupational therapy value to clients before articulating it to stakeholders (Hart, 2019). Daily practice-level advocacy involves applying occupational therapy knowledge and skills in various settings, such as clinical, educational, community-based, and research environments on a daily basis (Hart, 2019).

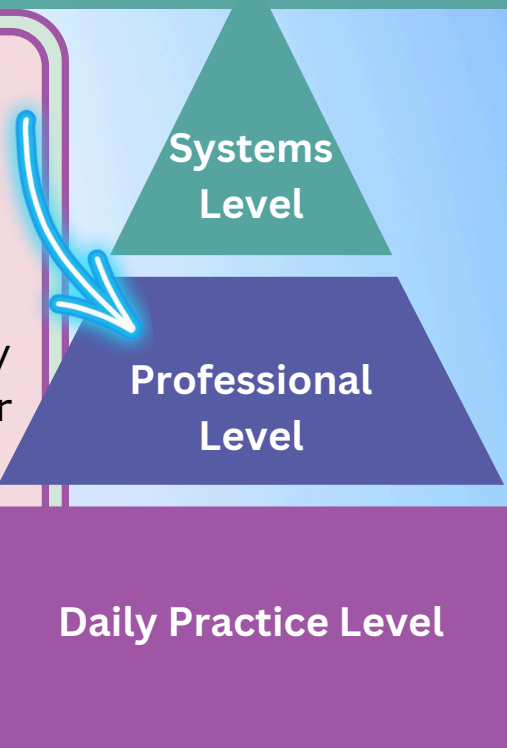


Taking Action in Daily Practice Level Advocacy

- Ensure that client interventions and interactions are tailored to their cultural background, preferences, and specific needs.
- Include culturally relevant and evidenced activities into therapy sessions.
- Document cultural factors that influence the delivery and outcomes of occupational therapy interventions. This includes noting any cultural preferences, beliefs, or practices that impact the client's engagement in therapy and their progress toward goals.
- Take proactive steps to educate clients about how occupational therapy can help them achieve their goals within the context of their cultural background. This includes explaining the relevance of occupation-based interventions and empowering clients to advocate for their own cultural needs within the healthcare system.

DEI ADVOCACY IN ACTION: PROFESSIONAL LEVEL

Practitioners can advocate by using their skills to improve clients' accessibility to occupational therapy services and promote best practices, connecting day-to-day work with the profession's recognition at the systems level (Hart, 2019). Advocacy at this level starts when practitioners identify opportunities to apply their unique perspective to tackle challenges at work or in the community (Hart, 2019). This involves forming strategic partnerships with other disciplines, administrators, management, and external coalitions.

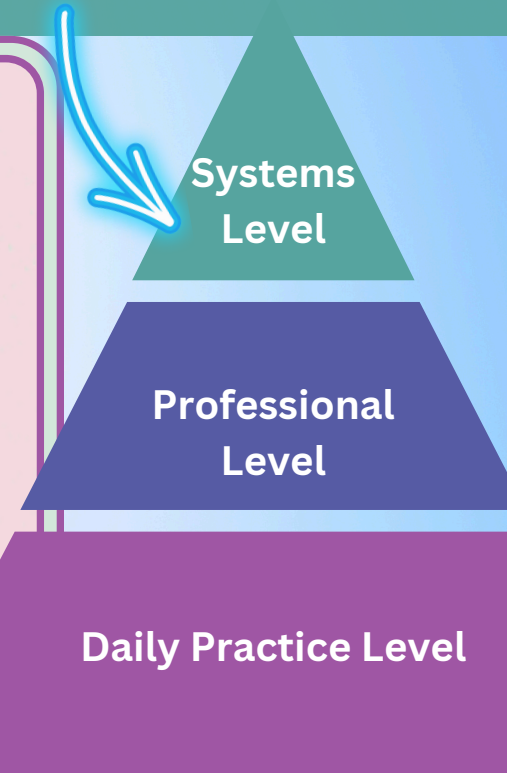


Taking Action in Professional Level Advocacy

- Advocate for the establishment of DEI committees within the workplace or professional organizations.
- Organize workshops for local occupational therapy practitioners, students, and community members about DEI and its value in healthcare.
- Participate in DEI initiatives within professional organizations or communities such as attending DEI-related events, and contributing expertise to initiatives aimed at promoting D in healthcare.
- Collaborate with community organizations, advocating for funding for outreach programs, and developing innovative approaches to reach individuals who face barriers to accessing healthcare services.

DEI ADVOCACY IN ACTION: SYSTEMS LEVEL

Systems-level advocacy occurs where policy is introduced, debated, or passed and can be performed at local, state, or federal levels (Hart, 2019). Government policymakers rely on occupational therapy practitioners and other healthcare professionals to develop sound policies (Hart, 2019).



Taking Action in Systems Level Advocacy

- Support legislation that addresses health disparities, access to service delivery for underserved populations, and cultural competence training/education.
- Engage in legislative processes concerning DEI issues, providing input, formulating policies, and evaluating effectiveness.
- Work with state occupational therapy organizations and the American Occupational Therapy Association to advocate for policies that promote DEI within the profession and the healthcare system as a whole.
- Communicate with legislators through letters, emails, calls, or meetings to promote DEI in healthcare.
- Collaborate with regulatory agencies to provide input on proposed regulations in order to influence the development of policies that promote DEI within their profession and the broader healthcare system.

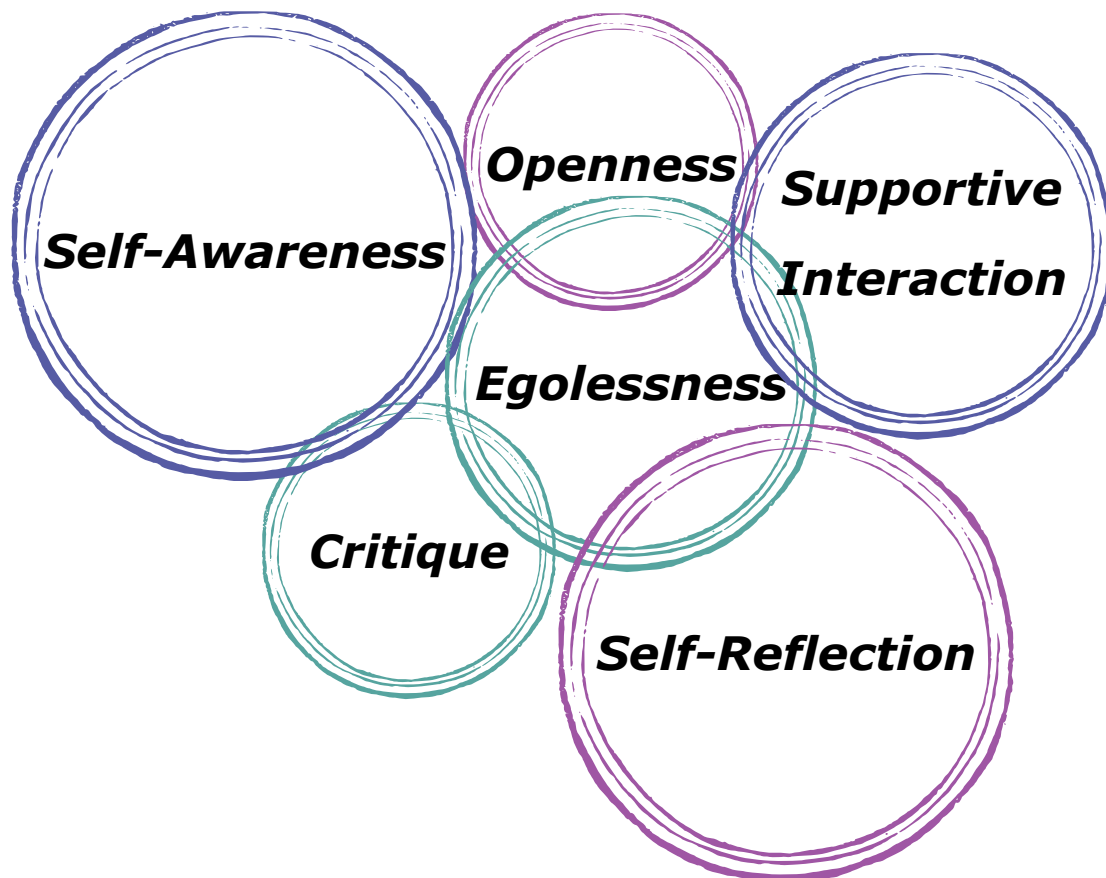
DEI ADVOCACY IN ACTION: DEVELOPING CULTURAL HUMILITY

Occupational therapy practitioners evaluate clients to identify barriers to meaningful participation. With this information, OT practitioners should provide culturally inclusive and effective services that focus on the client's functional, social, and emotional needs to improve health outcomes and reduce disparities.

The lifelong learning process referred to as

CULTURAL HUMILITY

is made up of 6 core components which include:



DEI ADVOCACY IN ACTION: DEVELOPING CULTURAL HUMILITY

1 **Learn About Yourself:-**
*Practice self-assessment
and reflection to identify the
role of culture in your life*

2 **Learn About Different Cultures:**
*Explore different journal articles,
books, documentaries, and more to
consider a new perspective*

**The American
Psychological Association
outlines 5 opportunities
to become a more
inclusive practitioner and
build cultural humility.**

3 **Interact with
Diverse Groups:**
*Seek unfamiliar
cultures and discuss
with your peers*

5 **Lobby Your Organization!:**
*Challenge yourself and your
colleagues. Push for better
education on DEI-related topics
in both higher education and in
the workplace.*

4 **Attend Diversity-Focused
Learning Opportunities:**
*Explore the literature and
expand your knowledge*

DEI ADVOCACY LINKS AND RESOURCES

Check out our other projects!



[Increasing Cultural Inclusivity Within Your Practice: DEI Toolkit for Occupational Therapy Practitioners](#)



[Ohio Legislative Advocacy Toolkit: A Guide for Occupational Therapy Practitioners and Students](#)



[Cleveland State University 2024 Dissemination Poster - Kaitlyn Deere](#)



[Huntington University 2024 Dissemination Poster - Erika Eustaquio](#)

DEI ADVOCACY LINKS AND RESOURCES

Check out our other projects!



[OOTA Advocacy Day 2024](#)



[LGBTQ+ Reference Guide: Inclusive Action Steps for OT Practitioners](#)



[LGBTQ+ Pocket Guide: Inclusive Action Steps for OT Practitioners](#)

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