Professional Issue Forums (PIFs) are held annually at the Canadian Association of Occupational Therapists (CAOT) Conference. PIFs address priority health and social issues, and emerging practice areas in occupational therapy. PIFs involve presentations from a panel of experts and participants are invited to contribute their perspectives. The discussion leads to strategies and recommendations for action for CAOT, individual occupational therapists and stakeholders to advance occupational therapy practice and the profession’s presence in these areas.

CAOT hosted a PIF on “Diversifying the occupational therapy profession” on May 28, 2015, at its conference in Winnipeg. There were approximately 60 participants at the session, which was organized by Elizabeth Steggles and Havelin Anand from CAOT and moderated by Brenda Beagan from Dalhousie University. The session explored empirical evidence regarding diversity as a justice issue, and sought to better understand:

1. where there is and is not a need for concerted recruitment and retention strategies,
2. more about the experiences of under-represented minorities in the profession and
3. priorities for recruitment and retention efforts to improve diversity in occupational therapy. The intent was to think beyond recruitment to issues of belonging and marginalization within the profession.

Background

There is extensive evidence showing that greater diversity among health professionals improves care for underserved communities (Institute of Medicine of the National Academies, 2004), yet disabled people, Aboriginal people, members of some racialized and ethnic minority groups, and people from working-class backgrounds are not entering the health professions in numbers parallel to their proportions in the Canadian population (e.g., Young et al., 2012). Recruitment and retention of Aboriginal people is an ongoing concern, in part as they may often experience educational and practice settings as unwelcoming (Smith, McAlister, Gold, & Sullivan-Bentz, 2011). Though the number of internationally trained ethnic minorities is increasing in all health professions, these individuals face systemic blocks to career advancement (Salma, Hegadoren, & Ogilvie, 2012). Racialized and disabled health professionals face systemic barriers at work, resulting in frequent changes of career paths (Nuñez-Smith et al., 2007; Neal-Boylan, 2012, 2014). As levels of required educational credentials rise, people from lower socio-economic groups are systematically hindered from entering the health professions, and face narrowed career options when they do (Canadian Medical Association, 2009; Oldfield, 2010). And, while proportions of gay, lesbian, bisexual and transgender health professionals are unknown, there is evidence that they frequently experience professional work settings as heterosexist, if not
homophbic, and engage in numerous identity management strategies to navigate disclosure. As well, they may face barriers to career progression (Riordan, 2004; Beagan, Carswell, Merritt, & Trentham, 2012; Schuster, 2012).

Despite inadequate statistics in Canada, we know that occupational therapy remains predominantly white, Western and middle-class (Hammell, 2011). The number of internationally educated therapists is slowly increasing in Canada (Canadian Institute for Health Information [CIHI], 2012), yet core theories and models of practice that have developed out of Western middle-class cultural world views may prove very challenging for minority therapists to implement (Iwama, 2003). The profession remains persistently female-dominated at 92% (CIHI, 2012), despite ongoing concerns about gender equity (Birioukova, So, & Barker, 2012; Mendez & Cooper, 2014; Whalen, Tang, Jung, & Chan, 2014). If the profession had a more diverse composition, it could help us better meet the health needs and occupational needs of all Canadians.

**Panel presentations**

Brenda explored the concept of diversity in general, discussed gender segregation in a range of job categories, with a focus on gender in the profession of occupational therapy.

Brenda Beagan presented on gender in occupational therapy, demonstrating that almost all job categories in Western societies are gender-segregated, with only one-third of employed women and one-quarter of employed men working in job categories that are gender integrated. She emphasized that while women move into “men’s” jobs, decades of research from multiple countries indicates that men are only likely to move into women’s jobs during times of economic downturn.

Michelle Owen, from the University of Winnipeg, delved into the question of what it is like to seek accommodation that would enable a worker to remain in the workplace. She presented on her research with academics who have multiple sclerosis, arguing that professionals with chronic conditions are encountered as “unexpected workers,” and they face considerable barriers to seeking accommodations, with varying results. They are forced to employ numerous strategies to navigate stigma and discrimination, which negatively affect productivity. The point was also made that there is far too little research on disability within occupational therapy.

Josephine Etowa, from the University of Ottawa, discussed diversity in health professions with a demographic profile of Canadian nurses in terms of gender, race and ethnic backgrounds and how these factors effect workplace dynamics. She presented on her research with racialized and Aboriginal nurses, highlighting the everyday experiences of racism that make their work untenable. She stressed the importance of naming racism, even though Canadians are culturally dissuaded from naming or identifying race, disability, sexual orientation and so on. “Uncomfortable conversations,” she emphasized, are important for moving forward. Too often, professionals from minority groups are left isolated, dealing with inequitable treatment alone.
**Roundtable discussions**

Roundtable discussions were facilitated by Jeff Boniface, Phillip Wendt, Les Smith and Tal Jarus, with the assistance of student note takers Sara Smits, Isabelle Savage and Sarah Slocombe.

The following ideas on recruitment, retention and priorities for improving diversity in the occupational therapy profession emerged during the small group discussions:

- Collaboration with CIHI to improve data collection and analysis on diversity in the profession. Provincial regulators are a potential source for this information.
- Inclusion of curriculum within occupational therapy programs to encourage dialogue amongst diverse populations about the meaning of the concept of diversity and to help facilitate difficult conversations, beyond “political correctness,” which too often silences fruitful engagement. Accreditation standards should take strategies on diversity into consideration.
- Provision of financial resources and other supports, e.g., mentors for students from marginalized backgrounds to optimize their experience and performance in school and in the workplace.
- Early recruitment of students of diverse backgrounds from public schools through exposure to role models in the profession, to ensure that students have the appropriate prerequisites to enter the profession.
- Identification of occupational therapy as a health profession, rather than a health care profession, and to emphasize the profession’s work in multiple community and institutional settings.
- Development and implementation of strategies to enable integration of professionals from diverse backgrounds in education programs and the workplace.
- Education for clinicians in the practice arena to start conversations and ask the “right” questions that pertain to diverse clients and their needs.
- Creation of environments within the profession that are conducive to discussion of diverse experiences; expression of comments, perspectives and opinions; as well as publication of articles.
- Making “diversifying the occupational therapy profession” one of CAOT’s strategic priorities.
- Targeting COTF funding for research on diversity. For more on CAOT’s work related to diversity, refer to the Joint Statement on Diversity:

**References**


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