



Occupational Therapy Europe Interest
Group Displaced Persons: Template
Position Paper on OT with Displaced
Persons

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Occupational Therapy
Europe

Introduction

According to the United Nations High Commissioner for Refugees (UNHCR), over 71.4 million people worldwide were suffering the consequences of displacement by the end of 2017 (UNHCR, 2018). For displaced people¹ fleeing their homes is the only means of escaping violence caused by national and international conflict, and/or persecution due to their religious or ethnic identification; gender, sexual orientation, illness or disability. Factors driving forced migration include the need to escape said violence and persecution, but also include food insecurity, environmental degradation and economic insecurity in home countries (European Parliament, 2017; UNHCR, 2018). World conflicts (man-made and natural) combined with current international policy and trends in the global economic system, force groups of people to migrate within their current country, where they become internally displaced persons (IDPs), or across international boundaries, where they become asylum seekers or illegal immigrants (UNHCR, 2018). This period of displacement puts individuals at risk in regards to their mental, physical and social well-being.

Recognizing this risk, the World Federation of Occupational Therapists (WFOT) released a position paper in 2012, which was further revised in 2014, where it highlighted:

“Occupational therapists are positioned to play a significant role in enabling displaced people to bridge former and current contexts and meet human needs, human rights and health through participation in valued and meaningful occupations” (WFOT, 2012)

Occupational therapists and occupational therapy (OT), are experts in the everyday doing, or as referred to in the profession, *occupations*.

In occupational therapy, occupations refer to the everyday activities that people do as individuals, in families and with communities to occupy time and bring meaning and purpose to life. Occupations include things people need to, want to and are expected to do (WFOT, 2012)

Occupational therapists recognize the importance of meaningful occupations in promoting mental and physical well-being, and in minimizing the negative health impacts associated with occupational deprivation. Occupational therapists work in a manner that evaluates the person or the group and the capabilities and challenges that they have. Utilizing this information, OTs

¹ The authors recognize the diversity in terminology used in this area including refugees, asylum seekers, migrants, forced migrants, economic migrants, among others. This paper uses the term *displaced persons* as a term which recognizes the important differences and differing experiences between these groups, but uses one term for the purpose of discussion.

evaluate the occupations these individuals or groups aim to engage in but are no longer able to. Lastly, OT considers the environmental impacts: social, cultural, physical, institutional, political, historical (amongst others) which have an influence on the person's ability to perform these occupations. This unique threefold focus in OT on 1) person or group 2) occupations and 3) environment, allow for an integrated understanding of the issues and their root causes. From there, occupational therapists adopt a collaborative, person- or community-centred approach to developing intervention and advocacy strategies to minimize situations of occupational injustice, working towards fulfilling the basic right of occupational engagement, which OT's believe all humans possess.

Occupational Therapy With Displaced Persons

Throughout the history of Occupational Therapy (OT) there has been a recognition of the value that the profession's occupation-focused approach brings to the context of displacement, acknowledging that the initial conflict and escape, together with the subsequent process of seeking asylum and pursuing resettlement introduce significant disruptions to daily routines and roles (Huot, Kelly, & Park, 2016; Trimboli & Taylor, 2016). These disruptions in occupations occur across life areas including: work, education, life skills, social roles, identity, community engagement and well-being (Bennett, Scornaiencki, Brzozowski, Denis, & Magalhaes, 2012; Berr, Marotzki, & Schiller, 2018; Huot et al., 2016; Trimboli & Taylor, 2016). The ability to engage in meaningful occupation is restricted or supported by social resources, government policies, social stigma and the established humanitarian response, as well as internal factors such as mental health issues, trauma and cultural navigation (Crawford, Turpin, Nayar, Steel, & Durand, 2016; Morville & Erlandsson, 2017; Steindl, Winding, & Runge, 2008). Barriers have the potential to persist as long-term obstacles to re-establishing occupation are sanctioned or ignored by governments and social systems. Research shows that a long-term imbalance of occupational behaviour can trigger serious health and social problems (Steindl et al., 2008; Suto, 2009).

Occupational therapists, as described above, adopt a broad perspective of the environment and the impact it has on the everyday functioning of individuals. By viewing the impact of not only the physical environment, but also the political, social, cultural, historical and policy environment that is shaping the occupations or occupational deprivation of displaced persons, they are better able to critically and appropriately respond in their interventions. This broad perspective also allows for a broader view of integration. OT's value the often promoted marker of integration of paid employment, but also value integration in the other contexts in which displaced persons exist, including social and cultural integration as measures of success (Blankvoort, Arslan, Tonoyan, Damour, & Mpabanzi, 2018).

Occupational Therapy with Displaced Persons in (enter country name here).

Here professional organizations can explain the current situation in their own country and describe how and where OT's could be beneficial. Example of items to explain:

- *Asylum procedures in the country*
- *Number and frequency of asylum requests*
- *Asylum processing procedures (length of time, institutional vs. community living, occupational engagement opportunities while waiting for approval).*
- *Community and labour market integration programs, policies, laws and approaches once individuals receive their refugee status*
- *Long term integration aims for refugees in the national country*

Position Statements

Occupational therapists are experts in the enablement of participation, despite barriers present in the contexts in which once exists. This unique perspective, with an aim of meaningful engagement, can be critical throughout the refugee process: from first arrival, to the period of waiting for decision, through to the process of integration, which follows thereafter.

[Professional organization title] recognizes the detrimental impact to health which can be seen due to past traumatic experiences, institutionalized refugee accommodation, restriction of movement, lack of perspective for future and challenges in building a new life in a new setting. The occupational therapist, when utilizing an enabling, participatory and person- and community-centred approach, in work with marginalized populations has been shown to be beneficial to refugees, their health, well-being and eventual integration. [Professional organization title] adopts the position that occupational engagement is a basic human right, which all humans, despite their legal status have a right to.

[Professional organization title] recognizes that [country name] currently is dealing with a reality of: (Describe summary of previous section) and that occupational therapy [prof org] adopts the following positions and is prepared to respond, through meaningful partnerships, in order to maintain them

- *5-10 key position points which **specifically** relate to how OT, in the country you are in, can contribute to the situation.*

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