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Increasing Cultural Inclusivity Within Your Practice: DEI Toolkit for Occupational Therapy Practitioners

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Increasing Cultural Inclusivity Within Your Practice: Creating a DEI Toolkit for Occupational Therapy Practitioners

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Abstract

Background

In the world of healthcare, there is an alarming amount of inequity and health disparities in the United States. Diversity, equity, and inclusion, also referred to as DEI, are values held by an organization that works to support marginalized groups including but not limited to women, ethnic/racial minorities, people with disabilities, and the LGBTQ community. The occupational therapy community acknowledges that health equity, which is when everyone has the opportunity to be healthy, and social determinants of health greatly impact health outcomes. Increasing education efforts and cultural humility is an effective strategy to reduce health disparities and improve the effectiveness of occupational therapy services to clients.

General Focus

The focus of my capstone project was to increase awareness surrounding DEI-related issues in occupational therapy. There is a large gap in provider knowledge of DEI that is evidenced by practitioner's implicit bias and ineffective treatment that comes from not understanding their client's culture. My project will not only address health disparities and other inequalities, but will also provide strategies and concrete action steps to increase cultural humility and clinical competence.

Capstone Site

I partnered with Becky Finni (OOTA president) and Christie Tuttle (OOTA president-elect) from the Occupational Therapy Association to guide me through my project. The mission statement of the Ohio Occupational Therapy Association aligns with my project goal which is to meet the needs of occupational therapy consumers. In order to meet our client's needs, we need to understand their culture and their environment which is likely different from our own experiences.

Methods

Throughout the 14-week capstone experience, I participated in a variety of professional development opportunities to enrich my experience and create my deliverables. This included cultural seminars, meetings with Ohio legislative members, and collaborating with other students. I also conducted extensive research using both scholarly, peer reviewed articles and organizations dedicated to diversity-related issues. During the research phase of this capstone experience, I decided that the main points that will be covered in my materials would be race/ethnicity, the LGBTQ community, social determinants of health, and advocacy.

Results

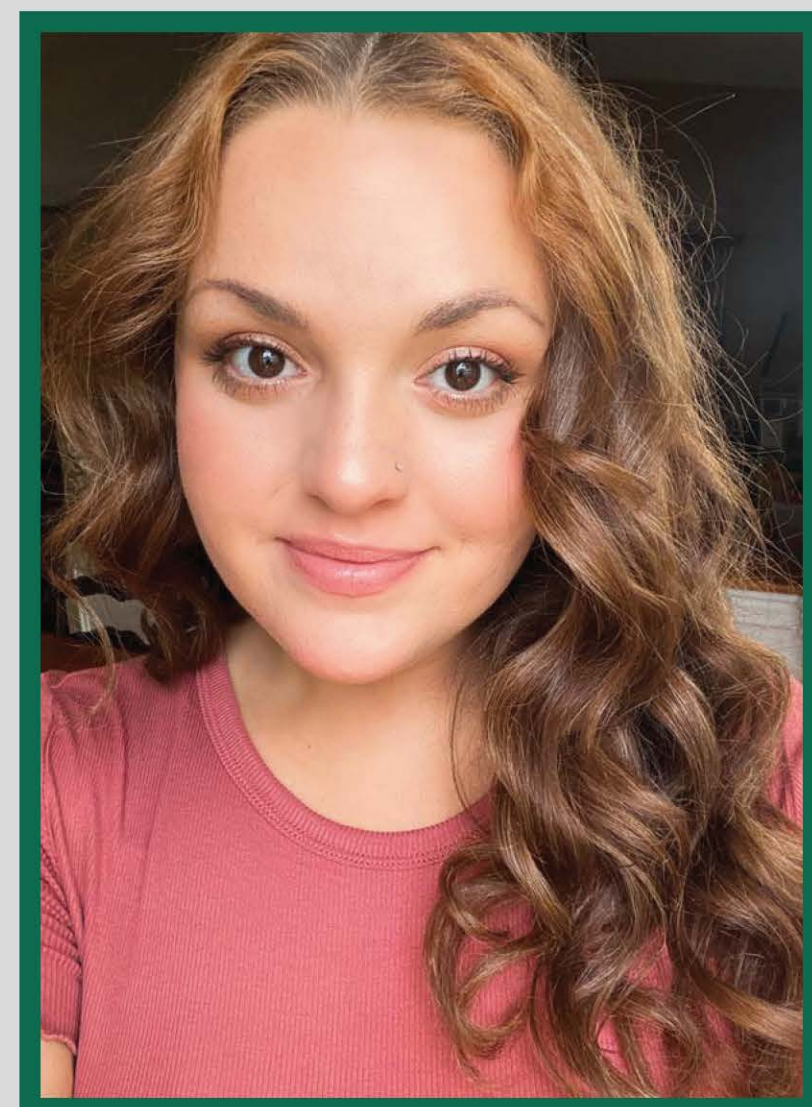
Using my research and experiences, I created a comprehensive toolkit about DEI and its relationship to occupational therapy and health disparities. I also collaborated with fellow OTD capstone students to create two action guides with one focusing on advocacy and one focusing on LGBTQ. I was also involved in OOTA's advocacy day planning, recruitment, and day-of activities.

Conclusion

The current state of the occupational therapy profession unfortunately does not include a lot of diversity. With almost 90% of occupational therapy practitioners being White and female, our profession needs to educate themselves on the culture of their clients in order to develop effective treatments and build rapport. My content highlights the different steps one can take during their cultural humility journey in addition to detailing how to be an advocate for their clients and the occupational therapy profession as a whole.

Bio

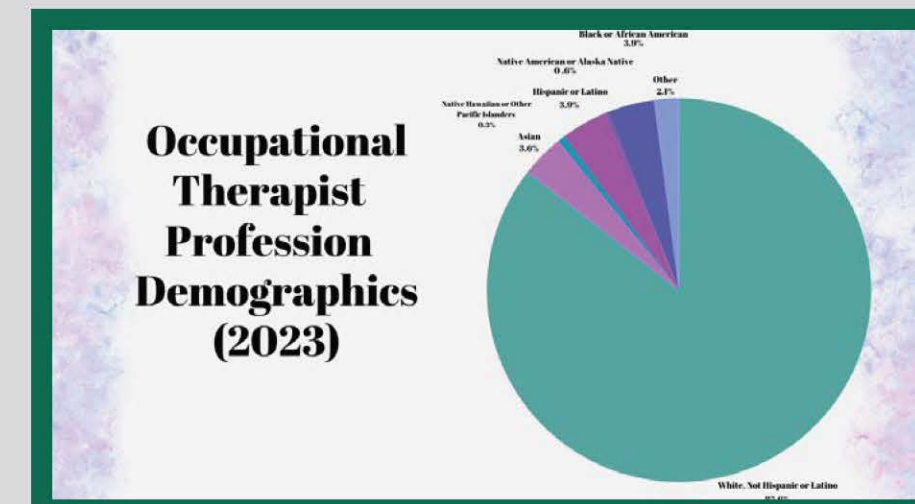
Hello! My name is Kaitlyn Deere and I am a 3rd year OTD student at Cleveland State University. I received my Bachelor of Science in Health Sciences and Psychology from The Ohio State University in 2021 before moving to Cleveland to start my professional career. My professional interests include neuromotor disorders, vision-perception, social-emotional learning, and under-served practice settings in both the pediatric and adult setting. Check out the QR code below to view the materials I created for this experience!



Capstone Experience and Implications

Cultural Inclusivity Toolkit

I created a DEI toolkit for OOTA using Canva. This resource includes important definitions, demographic information, descriptions of the health disparities experienced in racial/ethnic minorities and the LGBTQ+ community, and strategies to eliminate these disparities and start your cultural humility journey.



Examples from toolkit:
Increasing Cultural Inclusivity Within Your Practice: Creating a DEI Toolkit for Occupational Therapy Practitioners

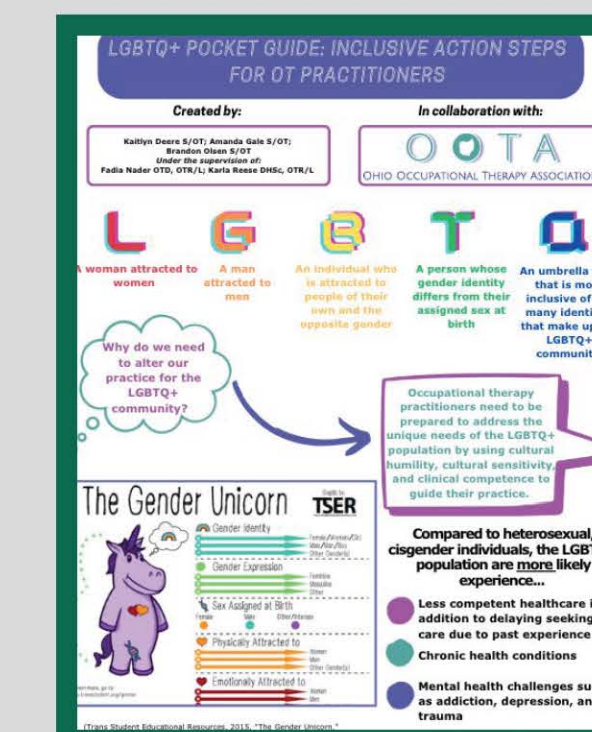


Collaborative Action Guides

I collaborated with fellow OTD capstone students to create 3 action guides centered on DEI-related issues. 2 LGBTQ+ action guides were created in collaboration with Cleveland State University students Brandon Olsen and Amanda Gale. I also created a legislative advocacy action with Huntington University student Erika Eustaquio, an OOTA capstone student.



Examples from action guides. *DEI Advocacy Action Guide: Promoting Allyship in Occupational Therapy* (left) and *LGBTQ+ Reference Guide: Inclusive Action Steps for OT Practitioners* (right)



OOTA Advocacy Day

I worked with OOTA to help plan OOTA advocacy day. This included meeting with a lobbyist several times, Ohio senators and house reps, and creating recruitment materials.



OOTA Advocacy Day 2024 at the Ohio Statehouse
(from left to right)
Erika Eustaquio, Cheryl Boop, Christie Tuttle, Kaitlyn Deere, Becky Finni, Daniel Hurley



Recruitment materials sent to Ohio OT and OTA programs

Capstone Importance and Impact

- Discrimination is considered a “public health crisis” due to the effect structural discrimination and psychological stress has on health outcome
- Research has shown that in order to eliminate health disparities and improve health outcomes, healthcare providers need to be educated and lawmakers need to view how their policies might enable this discrimination to persist
- Occupational Therapists view health and well-being in a holistic way, meaning they look at the entire person when evaluating and treating them. This includes this person's culture, language, and background.
- Many individuals from marginalized communities experience occupational injustice, meaning they cannot participate in meaningful occupations.

Main Takeaways from Capstone Experience

1

There is a place for everyone in advocacy. This can be on the federal level (AOTA hill day), state and local level, and even in your own workplace.

2

The process of learning cultural humility is continuous...never stop learning!

3

Collaboration with people with all different skills and experience can enrich the learning process and make the development process more efficient.

Challenges & Recommendations

Challenges

- The capstone proposal processes was delayed several times due to difficulties securing a site mentor once I matched with my site.
- The workload that came from planning advocacy day was more than expected and I had to adjust my objectives as a result
- The research portion of the capstone experience took longer than expected so I was delayed in producing my deliverables

Recommendations

- My toolkit allows for additional populations to be discussed for future practitioners use. These topics include but are not limited to geographical location, religion, immigrant status, and disabilities.
- Students should be encouraged to participate in advocacy opportunities to develop professionalism and confidence in addition to helping their clients
- Continue to create and utilize DEI resources designed for occupational therapy practitioners

Synthesis

My capstone project addresses the occupational injustice clients from marginalized populations experience as a result of implicit bias, disparities in healthcare spending, and centuries of systemic discrimination. The role of an occupational therapy practitioner is to provide client-centered, evidence-based treatment to their clients to maximize quality of life, independence, and occupational participation. While the cultural humility journey is continuous and education needs to continue throughout one's career, the purpose of my toolkit and action guides is for practitioners to easily access when working with a population they have limited experience with. My experience also included advocacy for both the occupational therapy profession and our client base. I talked to Ohio congress members and other occupational therapists throughout this project to share why occupational therapy is important and the role OT practitioners have in promoting health equity.

Key References

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