Pre-conference workshops | Ateliers précongrès

CarFit Live Training (in-person only- registration required)
Spend just 30 minutes to learn how to help individuals feel safe and comfortable behind the wheel again by registering for the CarFit Live Lab Training session.

Who is this for?
Newly trained CarFit Technicians who have completed the online CarFit training or plan to do before conference and want to broaden their virtual learning with an in-person vehicle lab.

Trained CarFit Technicians, Coordinators or Instructors who want to refresh their skills with an in-person vehicle lab.

Learning objectives: In small groups, review the CarFit checklist while at a vehicle and have all of your CarFit questions answered in person!

Blanket Ceremony
Wednesday: 10:00 AM-12:00 PM Room | Location: C1
Special event | Évènements spéciaux
Debra Beach Ducharme

2024 CAOT Conference delegates are invited to participate in an in-person Blanket Exercise on Wednesday May 1st from 10-12 pm (AST) at the Halifax Convention Centre, 1650 Argyle St, Halifax, NS.

A Blanket Exercise, developed in collaboration with Indigenous Elders, Knowledge Keepers, and educators, is an interactive and experiential teaching tool that explores the historic and contemporary relationship between Indigenous and non-Indigenous peoples in the land we know as Turtle Island. During the exercise, participants step on blankets representing the land and into the roles of First Nations, Inuit, and Métis peoples. Participants will be guided by an Indigenous facilitator that covers pre-contact, treaty-making, colonization, and resistance.
The exercise concludes with a debrief in the form of a talking circle and allows for the opportunity to process feelings, ask questions, share insights, and deepen understanding. Offering the exercise to conference delegates aligns with the recommendations within the OT Statement of Commitment to Indigenous Peoples in Canada and represents one way in which CAOT can continue to work to respond to the Calls to Action as outlined within the Truth and Reconciliation Commission (TRC) of Canada. The exercise can further allow OTs the opportunity to engage and expand their learning and education about colonization and its historical and current impacts on Indigenous Peoples in Canada.

*Please note that space is limited to 50 participants and will be on a first come, first served basis. There will be no pre-registration or registration fees associated with the session.

**Key words | Mots clés :**

**Engaging life promotion and suicide prevention tools: Confidence through conversation**

Wednesday: 1:00 PM-4:00 PM Room | Location: 102

**Pre-conference workshop: Non-specific | Advocacy /Leadership**

*Kimberly Bitz kimberly.bitz@queensu.ca Catherine White Cathy.whiteot@gmail.com Kim Hewitt- McVicker hewittkm@mcmaster.ca*

**Background/Introduction:** Across practice areas, occupational therapists have long been involved with clients who are considering suicide, who have attempted suicide, or who have experienced loss by suicide. The COVID 19 pandemic increased the need for life promotion, suicide intervention and suicide postvention in Canada. Currently, an estimated 4500 Canadians die due to suicide annually, with as many as 135 people per death impacted, 10% of whom experience life-changing grief. While hard to track, thousands more live with chronic suicidal ideation and despair. Practice problem/issue or innovation/success: Occupational therapy provides a unique skill set by helping individuals and communities engage in meaningful occupations that can facilitate a shift toward recovery, life and living, but occupational therapy is not routinely embedded in the suicide prevention response continuum. The CAOT Practice Network: Addressing Suicide in Occupational Therapy Practice has developed tools to support occupational therapy professionals to better enact and showcase our value. Approach/findings/reflection: This workshop will: Present recent research regarding suicide in Canada; Demonstrate resources recently developed by the practice network; Review the recently released CAOT position statement, “Occupational Therapy to Prevent and Support Recovery from Suicide”; Engage participants in a real-time consultation exercise regarding practical applications of the tools and resources. Learning objectives: Participants will: Increase awareness of suicide and suicide prevention initiatives in Canada & Become familiar with suicide prevention tools and resources from the practice network, and how they might be applied in varied practice contexts. Practice implications: Through increased awareness of innovations in addressing suicide in occupational therapy practice, participants will be
encouraged to use the tools and resources and take leadership roles as they return to diverse practice settings.

**Key words | Mots clés**: Mental health, Advocacy

**Decolonizing engagement processes in colonized systems and structures**

Wednesday: 1:00 PM-2:55 PM *Room | Location*: 103

**Pre-conference workshop**: Not applicable | Equity & Justice

*Angie Phenix Kaarina Valavaara* kaarina.valavaara@dal.ca *Stephanie Nixon Gayle Restall*

Rationale/Background: Occupational therapy formal and informal leaders are increasingly seeking to engage with people from oppressed groups to increase the diversity of perspectives in policy and program development. Authentic and respectful engagement responds to the Truth and Reconciliation Commission’s Calls to Action promotes more equitable opportunities for input and leadership by equity-deserving groups; however, without a critical examination of current processes of engagement, oppression can be reproduced. Current systems of engagement and collaboration with equity deserving/marginalized people, including Indigenous Peoples, can result in more oppression due to inflexible processes and systems. Occupational therapy leaders are challenged to take action to design and implement anti-oppressive processes while embedded in colonial systems and structures that have taken-for-granted processes and managerial controls that can conflict with Indigenous ways of knowing and doing. How do leaders decolonize occupational therapy processes in order to meet the vision/goals for equitable engagement? Learning Objectives: (1) Understand how power, privilege, paternalism, and white supremacy are reproduced and maintained in occupational therapy through colonial systems (2) Explore models, frameworks, and tools that occupational therapy leaders can use to decolonize processes embedded within colonial institutions.

**Instructional Methods**: The presentation will include didactic learning, facilitated small group discussions, and large group debriefs. Structure/Participant Engagement: The session will begin with a panel presentation that will summarize key constraints of colonial systems including power, privilege, paternalism, and white supremacy and how these constraints are reproduced and maintained. The panel will also introduce frameworks and tools that can assist leaders in developing authentic and respectful processes. In small groups, participants will be invited to work through an engagement process to identify colonial processes and potential oppressive practices and create a plan to mitigate these harms and develop more inclusive and equitable processes. Practice Implications: Participants will feel empowered with practical strategies to start decolonizing their own processes and systems, with the end goal of equity deserving peoples having safer, more meaningful engagement in occupational therapy programs, processes and outcomes that impact their daily lives.

**Key words | Mots clés**: Equity & Justice, Models

**Building skills to address complex discharge planning**

Wednesday: 1:00 PM-2:55 PM *Room | Location*: 106

**Pre-conference workshop**: Non-specific | Primary care/Primary healthcare
Introduction: Effective discharge planning is vital to decrease the chances of our clients being readmitted to hospital, sustaining a secondary injury, and facilitating ongoing recovery and rehabilitation in the community. Practice problem: The discharge planning process can be difficult, particularly if the client has sustained multi-trauma and catastrophic injuries, and when multiple caregivers are involved in the decision-making process. Approach: In this two hour session, case scenarios and examples will be shared to highlight how to navigate challenges during complex discharge planning. Strategies on how to collaborate with the client, caregivers, and other health care team members involved in the discharge planning process will also be reviewed to highlight techniques to implement to ensure safe transition to the community following in-patient care. Participants will be provided with an opportunity to work in groups on case examples to consolidate their learning from the session, and to facilitate open discussion and further learning experience. Learning Objectives: (1) Recognize the importance of initiating discharge planning early in the process; (2) Recognize the importance of client, caregiver and team collaboration; (3) Identify issues related to making an appropriate decision regards post-discharge care; (4) Recognize the role of realistic community resources in discharge planning; and (5) Recognize the impact financial resources have in discharge planning (e.g. access to community treatment, medications, housing needs). Practice Implications: Discharge planning is a consultative process between the client, caregivers, and team members, which requires several components to ensure the safe transition from hospital to home. This session will highlight the process of discharge planning, from start to finish, to facilitate a smooth and safe transfer of our clients from hospital to home/community.

**Key words | Mots clés**: Private practice, Teaching/education

### Rolling towards best practice with the Wheelchair Skills Program

**Wednesday: 1:00 PM-5 PM Room | Location: 109**

**Pre-conference workshop: Non-specific | Technology**

*Paula Rushton (Dalhousie University, Halifax) prushton@dal.ca Lee Kirby (Dalhousie University) lee.kirby@nshealth.ca Cher Smith (Nova Scotia Health) cher.smith@nshealth.ca Tatiana Dib (Université de Montréal) tatiana.dib@umontreal.ca*

Background: Research evidence has been accumulating that demonstrates the safety and superior effectiveness of a formal approach to the assessment and training of wheelchair skills for wheelchair users and their caregivers. The Wheelchair Skills Program (WSP) (www.wheelchairskillsprogram.ca) includes useful evaluation and training tools and can be used with children, adolescents, adults, and older adults with diverse diagnoses and functional limitations. However, in a survey administered to occupational therapists living in Nova Scotia, only 43.5% report typically providing wheelchair skills training to their clients and only a third consider themselves adequately prepared to train (Kirby et al., 2020). It is thus important to help occupational therapists translate this research evidence into clinical practice by offering them the knowledge to use the evidence-based tools and resources available through the WSP.
Learning Objectives: On completion of this workshop, participants will be able to (1) describe the elements of the WSP; (2) perform indoor (e.g., rolling forward), community (e.g., going up an incline), and some advanced manual wheelchair skills (e.g., going down a curb in a wheelie position); (3) safely spot people performing indoor, community and advanced manual wheelchair skills; (4) assess people performing indoor, community and advanced manual wheelchair skills; (5) train people learning indoor, community and advanced manual wheelchair skills; and (6) describe how to implement the wheelchair skills assessment and training procedures in their own settings. Instructional Methods: The workshop will provide participants with an opportunity to experience a range of wheelchair skills including spotting techniques and assessment methods but will focus on training (both the ‘tricks of the trade’ and motor-skills-learning principles). Structure: This pre-conference workshop will begin with a welcome, orientation to the day, and lecture, followed by hands-on, practical wheelchair skills training moving from indoor to community to advanced wheelchair skills. Practice Implications: Following this workshop, occupational therapists will be better equipped to optimize the safety and maneuverability challenges that face wheelchair users and their caregivers.

**Key words | Mots clés :** Seating

**Your role in making schools more welcoming for neurodivergent students**

Wednesday: 1:00 PM-5 PM  **Room | Location:** 107

**Pre-conference workshop:** Children and youth | Professional issues/Practice

*Marie Grandisson (Université Laval, Québec) marie.grandisson@fmed.ulaval.ca*  
*Emilie Rajotte (Université Laval) emilie.rajotte@fmed.ulaval.ca*  
*Myriam Chrétien-Vincent (Université du Québec à Trois-Rivières) myriam.chretien-vincent@uqtr.ca*  
*Mélanie Couture (Université de Sherbrooke) melanie.m.couture@usherbrooke.ca*  
*Nina Thomas (Université Laval) nina.thomas.1@ulaval.ca*

**Rationale:** Schools are expected to provide learning environments in which a large diversity of students can participate without always needing individualized accommodations. Yet, autistic students and other neurodivergent students encounter barriers to participation in their classrooms, but also during transitions, recess, and afterschool programs. Their well-being is often compromised as schools are not sufficiently adapted to their strengths and needs. Occupational therapists have a key role to play in supporting school teams to create more inclusive school environments and occupations. Learning objectives: Participants will broaden their perspective regarding their role in supporting school teams with the inclusion of neurodivergent students. They will become familiar with how a school needs analysis can be done upfront, how team and individual coaching can be used and, most importantly, how they can support school teams focus on creating inclusive environments and occupations.

**Instructional methods:** The session will combine a variety of methods including interactive presentation, individual reflections, and small group discussions. Findings from the research project Towards Inclusive Schools will be integrated in a dynamic manner, focusing on the tools developed with the findings. **Structure/participant engagement:** The session will start with an interactive presentation using Wooclap (e.g. word clouds, votes) to present the main modalities...
suggested and examples of how occupational therapists have applied them in schools. Participants will be asked to reflect on which modalities they already use in their practice and which they could use more. Small group discussions around case scenarios will then be done. The presenter will then share some take-home messages and answer questions. Practice implications: It is expected that participants will have a new perspective on how they can foster the participation of neurodivergent students, more focused on creating inclusive occupations and environments in partnership with all school stakeholders. They will also become familiar with tools they can use to pursue their reflections on that matter.

**Key words | Mots clés**: Community care, School health

**What’s ‘anti-oppressive practice’? And how do I do it?**

Wednesday: 3:05 PM-5 PM  **Room | Location**: 103

**Pre-conference workshop**: Non-specific | Equity & Justice
Kaarina Valavaara (Dalhousie University, Halifax) kaarina.valavaara@dal.ca Kaitlin Sibbald (Dalhousie University) kaitlin.sibbald@dal.ca Tara Pride (Dalhousie University) tarapride@dal.ca
Stephanie Bizzeth (NS Health) stephanie.bizzeth@dal.ca Brenda Beagan (Dalhousie University) brenda.beagan@dal.ca

Rationale: The 2021 ‘Competencies for Occupational Therapists in Canada’ include new competencies focused on Culture, Equity & Justice. Competency C2 calls on therapists to “Promote anti-oppressive behaviour and culturally safer, inclusive relationships.” In this interactive workshop we ask, How exactly do we do that? Many therapists understand the need to move in this direction, want to do so, and have every intention of doing so, but are less clear on how to get started. Learning objectives: From this session participants will 1. develop a clearer sense of what anti-oppressive practice is, and specific resources to draw on for additional support; 2. generate concrete tools and strategies they can begin to use immediately to move their practice toward anti-oppressive competency; 3. connect with colleagues willing to engage with mutual support in moving toward this competency. Instructional methods: Having provided clear explanations regarding oppression and anti-oppression, experienced therapists and educators will share practical ideas large and small, things that can be done daily and things to work at over time, to move toward more anti-oppressive practice. We will raise ideas for practice changes at interpersonal, institutional and systems levels. Small groups will generate further ideas situated in people’s own practice contexts, collectively challenging barriers and identifying facilitators. Debriefing with the larger group will focus on strategy-sharing and identifying short-term and longer-term goals. Participant engagement: After introducing some ideas for change, and discussing guidelines for safer discussions, participants will break into small groups to brainstorm practical initiatives in their local contexts. Facilitators will encourage groups to stay solution-focused, rather than barrier-focused, ensuring all have time to speak. Participants will also be invited to share email addresses with us so we can facilitate the creation of local networks of therapists striving toward anti-oppressive practice. Practice implications: Participants will be introduced to multiple ways others have begun to initiate anti-oppressive practice, will generate individual plans for short-term and longer-term
strategies, will be provided with several practice resources for guidance, and will have the opportunity to connect with others engaged in this work for mutual support.

**Key words | Mots clés**: Equity & Justice, Occupational justice

**Bariatric care and safe patient handling**  
Wednesday: 3:05 PM-5 PM  
**Room | Location**: 104

**Pre-conference workshop**: Community/Population | Primary care/Primary healthcare  
*Christina Modeski Guldmann mississauga cmd@guldmann.net Anand Pandya Guldmann, Patti Mechan*

Introduction: Occupational therapists are well versed in the need to utilize various pieces of equipment to reduce injuries during lifting and transferring. The bariatric community requires additional insight due to the stresses on caregivers' bodies during other non-lifting care tasks.  

Innovation: Caregivers are not always aware of the various equipment options for this community, leading to manual lifting, holding, or transferring of bariatric patients.  

Approach: Our team at the conference have 50+ years of experience in safe patient handling and are also backed by a team of global clinical specialists in our field. Having listened to the needs of 1000s of our partners in safe patient handling, we have developed care and training guidelines to mitigate risk and caregiver injuries in this community.  

Learning Objectives: The participants will join in a hands-on workshop to address current practices, learn additional techniques, equipment options to offer various ways to utilize equipment to decrease injuries. We welcome all participants to attend armed with questions regarding any roadblocks they encounter in their daily routines.  

Practice Implications: Utilizing various techniques learned during the pre-conference workshop will provide a safer lifting environment and create more Time to Care.

**Key words | Mots clés**: Obesity, Teaching/education

**Le yoga: la clé vers l'équilibre de vie**  
Wednesday: 3:05 PM-5 PM  
**Room | Location**: 108

**Atelier précongrès**: Les adultes | La santé et le bien-être  
*Natasha Dumont-Carey Boucherville natasha.dumontcarey@gmail.com*

Contexte : Le yoga est une pratique de plus en plus populaire et reconnue pour ses bienfaits sur la santé globale. Au-delà des postures physiques, le yoga est un art de vivre en conscience. En ergothérapie, nous accompagnons les individus à mieux vivre dans leur quotidien en fonction de leur capacité physique, cognitive, émotionnelle et spirituelle. Ainsi, l’intégration du yoga offre une nouvelle perspective : une participation consciente aux activités quotidiennes. De plus, le yoga incite à prendre soin de soi pour être mieux disposé à aider les autres. Il s’agit d’un aspect crucial pour les ergothérapeutes qui sont susceptibles au stress et à l’épuisement professionnel (Gupta et al. 2012). Dans ce contexte, le yoga est une modalité corps-esprit tout indiquée pour enrichir tant la vie personnelle que professionnelle.  

Objectifs d’apprentissage : Les participants seront en mesure d’expliquer les liens entre l’ergothérapie et le yoga. Ils seront en mesure d’utiliser des techniques inspirées du yoga dans leur quotidien et avec leur clientèle.
Méthodes d’instruction : Théorie, apprentissage par expérientiel, discussion en sous-groupe.
Activité pour les participants : Cette conférence présentera les principes fondamentaux du yoga et les liens avec l’ergothérapie. Les participants vont expérimenter des techniques de bases (posture, respiration, méditation) afin de ressentir les bienfaits dans leur corps et esprit. Suivi d’un échange afin d’explorer les pistes d’applications concrètes pour leurs clientèles respectives. Nous compléterons par une mise en commun des apprentissages afin de mettre en évidence les clés à intégrer à son quotidien. Finalement, une période de question sera offerte.
Implications cliniques : L’ergothérapeute sera en mesure d’identifier les applications cliniques avec sa clientèle ainsi que de recommander des modalités inspirées du yoga. Les participants partiront avec des techniques de d’ancrage, une routine pour assouplir le corps et des techniques de respiration consciente pour calmer le système nerveux ainsi que de revitaliser l’esprit. L’ergothérapeute aura des outils pour prendre soin de soi, sans culpabilité, afin de mieux prendre soin des autres !

Key words | Mots clés : Santé mentale, Spiritualité

Conference program | Programme du congrès

Opening Ceremonies & Keynote Address | Cérémonies d’ouverture et Conférencière d’honneur
Wednesday: 7:00 PM-8:30 PM Room | Location: C1
Special event | Évènements spéciaux
Phillip Wendt, Hélène Sabourin & Keynote Speaker: Lisa Boivin

Help us kick off this year’s Conference at the opening ceremonies on the evening of Wednesday, May 1st with a welcome from an Indigenous Elder, followed by our Featured Speaker, Lisa Boivin giving her keynote address: Arranging Pretty: Piecing together meaningful clinical/research relationships.

Lisa uses image-based storytelling to respond to the dearth of Indigenous content in rehabilitation science research. While there is literature revealing clinical barriers caused by colonialism, intergenerational trauma, and a lack of cultural safety, it is incomplete because it does not offer strength-based narratives that authentically reflect the identity of Indigenous people. Using collages and paintings that she has created, Lisa will confront some of the colonial problems that arise in rehabilitation science and offer Indigenous teachings to resolve them.

Lisa is a member of the Deninu Kųé First Nation in Denendeh (Northwest Territories). She is an award-winning author and illustrator of We Dream Medicine Dreams and I Will See you Again. Lisa is a University of Toronto Provost’s Post-Doctoral Fellow at KITE (Knowledge, Innovation, Talent, Everywhere) Research Institute at Toronto Rehab. Lisa uses participatory image-based workshops to educate healthcare providers and researchers about the colonial barriers Indigenous patients navigate in the current healthcare system. She strives to humanize clinical medicine as she situates her art in the Indigenous continuum of passing knowledge through images.

Exhibit hall grand opening | Grande ouverture du salon professionnel
Wednesday: 8:30 PM-9:30 PM Room | Location: Exhibit Hall

CAOT Conference 2024: Hybrid | Le Congrès l’ACE 2024: Hybride

May 1-3 mai
Special event | Évènements spéciaux

Check out our exhibitors who will be showcasing their latest innovations, products and services.

CAOT Town Hall | Séance de discussion ouverte de l'ACE
Thursday: 8:00 AM-8:55 AM Room | Location: C1

Special event | Évènements spéciaux
Phillip Wendt, Hélène Sabourin

Join CAOT’s President, Board of Directors, and the national staff for an informal town hall meeting. This get-together will provide members with a brief update about the association’s latest projects and activities, followed by the opportunity to discuss emerging issues and ask your own questions.

Taking a step back to see the mosaic
Thursday: 9:05 AM-9:30 AM Room | Location: 102

Paper presentation: Not applicable | Professional issues/Practice
Katie Lewis (McMaster Children’s Hospital/ McMaster University, Hamilton) lewisk5@mcmaster.ca
Elizabeth Townsend (Dalhousie University) townsea@dal.ca

Introduction- We present occupational therapy (OT) as a mosaic of diverse practices seeking a collective identity. Taking a step back reveals a mosaic of past experiences using diverse approaches. Objectives- We present historical research to address four research questions: What were key driving and constraining forces for the profession between 1960 and 1985, referred to as the ‘Rehabilitation Era’? How powerful was the Medical Model in shaping OT growth and visibility over those years? How did occupational therapists navigate relationships with medicine, management, social organizations, and funders? How did gendered forces in medicine and OT drive or limit growth during this era? Methods- Oral history interviews were conducted with occupational therapists who practiced between 1960 and 1985, and then qualitatively analyzed with reference to archival research and theories of gender and professionalization. Thematic analysis is framed by lived experiences at the beginning and end of an occupational therapy career. Findings- The 1960-1985 period is marked by OT efforts to transform immediate contexts and raise professional standards. Taking a step back, one can see a broad, lesser-known mosaic and collective identity under various titles in diverse social, medical, management, and funding contexts. Conclusion- Collaborative practice is very important moving forward with ongoing questions, notably: Could OTs display a stronger, clearer mosaic and collective identity working within AND outside medical funding? Would the broad mosaic become clearer with advanced masters and doctoral education specific to occupational therapy? How might occupational therapists attract collaborators who see our mosaic?

Key words | Mots clés : Evaluation, Theory

Closing gaps: Bringing pediatric assistive technology to First Nation communities
Thursday: 9:05 AM-9:30 AM Room | Location: 103

Paper presentation: Children and youth | Advocacy /Leadership
Carrie Mandryk (Rehabilitation Centre for Children, Winnipeg) cmandryk@rccinc.ca Ambrose Cox (Rehabilitation Centre for Children) acox@rccinc.ca
Background: Many children with complex needs and disabilities live in rural/remote First Nation communities. Occupational and physical therapists have been traveling to these communities for services for almost a decade. However, children and their families are still required to travel to a city center for specialized services, including for equipment such as mobility devices. Practice problem issue: Traveling for appointments can be stressful and disruptive for children and their families. Many First Nation communities are only accessible by winter road or small plane. This means that travelling back and forth to attend appointments is not always easy, causing families to be away from home for extended periods of time. Approach: Assistive technology clinics have been carried out in ten First Nation communities over the past two years. This involved bringing demonstration equipment including wheelchairs, bikes, and walkers to assess for new equipment as well as bringing tools and supplies to adjust and maintain existing equipment. Environmental conditions are important factors to consider when prescribing equipment, and traveling to these communities allowed our team to learn these factors first-hand. Feedback was very positive from families and community teams. Client’s and their caregivers appreciated being seen in their home communities. Learning objectives: This presentation will provide participants with 1) an example of how to run a specialized clinic in a First Nation rural/remote community 2) a discussion on why relationship building is important for remote/rural travel. Practice implications: To provide clinicians with information on how to conduct a specialized clinic in First Nation rural/remote communities.

Key words | Mots clés : Assistive devices, Community care

Strengthening occupational therapists’ capacity to practice in primary care

Thursday: 9:05 AM-9:30 AM Room | Location: 104

Paper presentation: Not applicable | Primary care/Primary healthcare

Nicole Bobbette (Queen’s University, Kingston) Nicole.bobbette@queensu.ca Catherine Donnelly (Queen’s University) catherine.donnelly@queensu.ca Lori Letts Andrew Freeman Hélène Sabourin (CAOT) Josée Séguin (CAOT) Carri Hand Leanne Leclair Kaarina Valavaara Cara Brown Pam Wener Shannon Jones

Introduction: There is increasing emphasis on primary care team-based models in Canada.1 Occupational therapists collaborate as members of primary care teams.1 To ensure the profession is prepared to work in primary care settings, adequate training is critical. Currently no comprehensive training materials exist to support occupational therapists to practice in primary care teams. Objectives: To develop online modules to enhance the capacity of occupational therapy learners and practitioners to practice in primary care teams across the country. Approach: The first of two modules used a consensus methodology with representatives from physiotherapy, social work, speech and language, audiology, and dietitians to identify foundational knowledge on primary care. A pan-Canadian team, supported by the Canadian Association of Occupational Therapists (CAOT) and a community advisory group, developed the second module that aligns with CAOT’s “Vision for Occupational Therapy: A Path Forward”.2 An evaluation framework was also developed, and modules will be piloted in two Canadian occupational therapy programs. Results: Through a collaborative, interprofessional process we created two evidence-based online modules. The first, an introduction to primary care, addresses the values and principles of collaborative primary care, and models of team-based primary care. The second focuses on how to integrate and work in primary care teams using the occupational therapist’s unique lens including assessments, interventions and a focus on equity and access. Practice implications: Occupational therapy learners and practitioners will have access to evidence-based online education.
modules through the CAOT and entry-level university programs, increasing occupational therapy capacity for working in primary care teams.

**Key words | Mots clés**: Evidence-based practice

**Ethical relationships between humans, occupations, and the earth**

Thursday: 9:05 AM-9:30 AM **Room | Location**: 106

**OS Paper presentation**: Not applicable | Equity & Justice

*Niki Kiepek (Dalhousie University, Halifax) niki.kiepek@dal.ca*

Introduction: When occupational therapists promote occupations, we tend to assume that participation in occupation is inherently good. Adopting person-centred approaches may deter consideration of broader ethical questions associated with socially valued occupations. For instance, occupational therapists support return to work – what if that ‘work’ involves industries that contribute to environmental degradation? Do we care? This presentation opens discussions about ethical relationships between humans, occupations, and the earth. Where conceptualisations of occupational justice tend to centre on individuals and collectives, this presentation shifts focus to include interspecies justice. **Objective**: This presentation explores occupation in relation to the earth, examining the potential to expand occupational justice beyond anthropocentric viewpoints. **Approach**: I drew on the theoretical methodology of transgressive decolonial hermeneutics, with a commitment to reconciliation and decolonization. **Findings**: Indigenous ontologies, such as those of ethical relationality, may open us to new ways of understanding occupational justice. Participating in ecologically unsustainable occupations impacts all people and more-than-humans. Devastating effects of environmental harms disproportionately impacts some more than others, exacerbating inequities. An emerging question in occupational therapy is the extent to which we become complicit in injustices when we render invisible collective responsibilities and fail to attend to the impacts of occupation on the land and interspecies relations. **Conclusions**: A commitment to occupational justice includes honouring interdependence of species, engaging in occupations in ways that are sustainable, refraining from occupations that have destructive or detrimental impact, on the earth and more-than-humans, and considering future generations.

**Key words | Mots clés**: Advocacy, Occupational justice

**Rôles des ergothérapeutes auprès des personnes écoanxieuses : Perceptions d’ergothérapeutes**

Thursday: 9:05 AM-9:30 AM **Room | Location**: 107

**Paper presentation**: Non spécifique | La santé mentale

*Marie-Josée Drolet (Université du Québec à Trois-Rivières, Trois-Rivières) marie-josee.drolet@uqtr.ca*

*Sabrina Demers (Université du Québec à Trois-Rivières) sabrina.demers@uqtr.ca Claudie Hurtubise (Université du Québec à Trois-Rivières) claudie.hurtubise@uqtr.ca Maude Falardeau (Université du Québec à Trois-Rivières) maude.falardeau@uqtr.ca*

Introduction : La crise climatique est une source d’éco-anxiété pour plusieurs individus. Celle-ci correspond à une forme d’anxiété ressentie par une personne devant les bouleversements causés par la crise climatique et l’anticipation de ses conséquences sur les écosystèmes et les êtres vivants. Elle peut être paralysante pour un individu (éco-paralysie) et occasionner des privations occupationnelles. Les ergothérapeutes pourraient avoir un rôle à jouer pour soutenir les personnes éco-anxieuses, mais
aucune étude n’a été menée pour documenter ces rôles. Objectif: L’étude avait pour objectif d’explorer les rôles envisagés ou adoptés par des ergothérapeutes du Québec pour soutenir les personnes éco-anxieuses. Méthodes: Un devis qualitatif inductif d’inspiration phénoménologique a été utilisé. Des entretiens individuels ont été menés avec des ergothérapeutes. Les verbatims des entretiens ont été transcrits et analysés par deux coanalystes. Résultats: Onze ergothérapeutes femmes, âgée de 24-34 ans, de diverses régions du Québec ont participé à l’étude. Elles avaient entre 6 mois et 10 ans d’expérience. Toutes estiment que les ergothérapeutes peuvent soutenir les personnes éco-anxieuses. Pour ce faire, leurs rôles sont appelés à s’opéronnalisé dans divers contextes, soit lors: 1) d’activités de prévention/promotion; 2) d’interventions individuelles/de groupe ; 3) d’activités d’enseignement; 4) d’activités de recherche; et 5) d’engagements communautaires. L’approche occupationnelle, holistique et centrée sur le client utilisée en ergothérapie est perçue comme un atout pour ce faire. Conclusion: Cette étude trace les pourtours d’une pratique ergothérapique innovante en santé mentale, laquelle est appelée à se développer rapidement compte tenu que les individus écoanxieux sont de plus en plus nombreux.

**Key words | Mots clés :** Santé mentale

**Canadian care providers' perspectives on long COVID rehabilitation provisions**

Thursday: 9:05 AM-9:30 AM  Room | Location: 108

**Paper presentation:** Community/Population | Chronic conditions

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Background/Introduction: Long COVID (LC) is an emerging condition that affects up to 35% of COVID-19 patients (Maxwell et al., 2020). People with LC (PWLC) often experience poor mental health and psychosocial outcomes (e.g., loss of social connection and leisure activities), exaggerated by persistent, debilitating physical and cognitive symptoms that significantly impact their ability to participate in activities of daily living (Malik et al., 2021). Health and social care providers (HSCPs) are well positioned across the continuum of LC care provisions (acute, hospital, in/out-patient, and community-based) to provide rehabilitative (rehab) support for PWLC and their caregivers. Yet, very little research has been done to gather the perspectives of HSCPs who have direct experience working with PWLC in a rehab context. Objectives: Thus, the objective of this presentation is to share HSCP perspectives on better integrating LC rehab across the continuum of health and social care services. Approach: Our team conducted semi-structured qualitative interviews with N=34 HSCPs across Canada (November 2022-January 2023). Results: Our findings highlight HSCP concerns (i.e., the novelty of LC, managing the episodic nature, and adapting ‘traditional’ rehab practices) and areas of improvement (i.e., attending to the psychosocial impacts, utilizing inter-professional collaboration, increased LC-specific education and resources, and streamlining care integration pathways) in the context of Canadian LC rehab provisions. Practice implications: The implications of this research will contribute to on-going efforts to develop LC-specific rehab care models, resources, and pathways to aid HSCPs in delivering effective care to PWLC.

**Key words | Mots clés :** Interprofessional, COVID
Co-developing a collaborative platform promoting social participation in older adults

Thursday: 9:05 AM-9:30 AM Room | Location: 109

**Paper presentation:** Older Adult | Health and well-being

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Introduction: Occupational therapists can build partnerships with community organizations to support the implementation of community development initiatives that promote older adults' social participation. Objectives: To describe the participatory process leading to the development of a collaborative online platform that maps various social participation initiatives with older adults in Quebec. Methods: This action-research project, guided by a steering committee composed of community partners and three older adults, included several data collection methods: 1) a series of individual interviews (n=20 community organizations in 2020; n=18 in 2021), 2) seven focus groups with managers and coordinators from senior centers (2021-2022), 3) four codesign workshops (n=21 participants) to determine the objectives and the functionalities of the collaborative platform; and 4) an environmental scan to identify community-based social participation initiatives for older adults in the province of Quebec (2022-2023). Results: Findings from the interviews and the focus groups provided an in-depth understanding of the challenges, the solutions and the needs of community organizations to support older adults’ social participation in collaboration with other partners during and beyond a pandemic. The process of co-development led to an initial version of the platform which includes 1) an inventory of social participation initiatives covering ten themes (e.g., intergenerational initiatives, volunteering); 2) practical tools; 3) a directory of resource persons interested in sharing their expertise; and 4) a collaborative space for exchanges. Conclusions: This platform will promote collaborations with community organizations to find, share, and support the implementation of community-based initiatives that address a continuum of social participation needs.

**Key words | Mots clés :** Community care, Community development

Belonging: Experiences of faculty and occupational therapy students

Thursday: 9:05 AM-9:30 AM Room | Location: Poster 1

**Poster presentation:** Community/Population | Fieldwork/Education

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Introduction: Across academic programs, including occupational therapy (OT), sense of belonging is critical as it impacts students’ well-being (Baumeister & Leary, 1995; Gopalan & Brady, 2019) and their sense of commitment to the program and the profession (Pedler et al., 2022). Yet, there is a gap in the literature exploring sense of belonging in OT programs, especially in a setting where a single cohort is distributed across multiple geographic contexts. Objectives: (1) To explore, through student and faculty perspectives, how belonging is developed in a distributed OT program across three geographic sites, and (2) to understand the impact of personal and environmental factors that affect students’ and faculty’s...
sense of belonging. Methods: Through a constructivist approach and informed by phenomenological methodology, we will conduct semi-structured interviews with 10-12 students and faculty from the OT program. Data from verbatim transcripts will be reflexively thematically analyzed through the lens of the Modified Belonging in Academia Model (mBAM) (Bulk et al., 2023) and the Transactional Perspectives on Occupations (TPO) (Cutchin & Dickie, 2013) to explore the experiences and factors that influence belongingness. Results: Findings may align with the mBAM and TPO, where the relational transactions between the individual, occupations, and the academic environment shape experiences of students’ and faculty’s belongingness. We postulate that factors such as the equitable allocation of resources or interdependent relationships among community members may affect perceptions of belonging. Conclusion: Findings will be used to recommend approaches that may improve faculty and student experiences of belonging in distributed OT programs.

Key words | Mots clés: Community development, Teaching/education

Cognitive Orientation to Occupational Performance with Individuals with First-Episode Psychosis

Thursday: 9:05 AM-9:30 AM Room | Location: Poster 2

Poster presentation: Children and youth | Mental health

Jane Davis (University of Toronto, Toronto) ja.davis@utoronto.ca
Jessie Wilson (Potential Pediatrics)
Priya Subramanian (London Health Sciences Centre)
Helene Polatajko (University of Toronto)
Angela Mandich (Western University)

Background. First-episode psychosis is often diagnosed in late adolescence or early adulthood, with cognitive impairments present up to a decade before its onset (Bora et al., 2017; Bowie et al., 2012). As such, psychosis is perceived as a “disruptor” of youth (WHO, 2013), occurring at a critical period of knowledge and skill development. In addition, the positive and negative symptoms of psychosis and psychological, social, and cognitive challenges adversely impact daily participation and global functioning. Practice Problem. To support individuals with first-episode psychosis to achieve their performance, engagement, and participation goals, Bowie et al. (2012, 2020) and Lysaker et al. (2020) argue that an intervention must include four key features: (a) client-identified valued activities; (b) client-chosen goals; (c) collaborative intervention planning; (d) and metacognitive training or strategy use. Cognitive Orientation to daily Occupational Performance (CO-OP; Polatajko & Mandich, 2004), a therapist-led, client-centred, performance-oriented, metacognitive problem-solving approach, contains these features and may support individuals experiencing psychosis to improve occupational performance, engagement, and participation. Learning Objectives. From this presentation, occupational therapy practitioners will understand key considerations when using CO-OP, both in in-person and virtual contexts, with youth living with first-episode psychosis. Reflections. As first-episode psychosis may lead to significant disruptions in an individual’s occupational repertoire, goal setting must explore past, current, and future hoped-for repertoires. Procedural aspects, such as session frequency and duration, must be considered across the intervention. Practice Implications. CO-OP may be a useful intervention for individuals with first-episode psychosis with modification made to the original intervention protocol.

Key words | Mots clés: Evidence-based practice, Mental health

Experiences of parents with amyotrophic lateral sclerosis: A phenomenological study

Thursday: 9:05 AM-9:30 AM Room | Location: Poster 4
Poster presentation: Adult | Health and well-being
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Introduction: Amyotrophic Lateral Sclerosis (ALS) is a progressive and fatal neurodegenerative disease that has debilitating and catastrophic impact on persons with ALS (pALS). Research shows that ALS is a disease that affects not only the pALS, but the entire family, including minor children (Calvo et al., 2015; Sommers-Spijkerman et al., 2022; Testoni et al., 2023). Parenting of minor children can be a challenging role, especially for pALS who experience many barriers to fulfilling this role (Lim et al., 2021). The impact of this disease on the roles and occupations of parenting in pALS remains largely unexplored. Objective: The objective of this study is to further explore the changes to the parenting role and parenting occupations and their associated meanings in pALS utilizing a phenomenological approach. Methods: This phenomenological study consisted of semi-structured interviews with 4 parents with ALS. Interview data was analyzed utilizing a phenomenological reduction method where common themes were developed, to illuminate the lived experiences of these participants. Findings: Two major themes were identified regarding ALS-related changes 1) decreased parenting role competence and 2) dissatisfaction with parenting occupational performance and engagement. Additionally, physical interactions, hugging, kissing, and touching were noted as a great loss. Conclusion: Parents with a diagnosis of ALS experience changes and challenges to their parenting role and associated parenting occupations. These changes have a profound effect on the person and thereby, their families. Occupational therapy practitioners are poised to play a major role in facilitating role competence and satisfaction in engagement in parenting occupations. Future research should examine occupational therapy interventions to support parents with ALS.

Key words | Mots clés : ALS, Community care

Custom splinting of humeral shaft fractures for optimal fracture alignment
Thursday: 9:05 AM-9:30 AM Room | Location: Poster 5
Poster presentation: Adult | Primary care/Primary healthcare
Heather Tizzard (The Moncton Hospital, Moncton) hjtot@hotmail.com Dylan Waugh (The Moncton Hospital) Dylan.Waugh2@Horizionnb.ca Morgan McHatten (Horizon Health Network) Morgan.McHatten@Horizonnb.ca

Background: Since 1977, functional bracing has been the gold standard for treating humeral shaft fractures (HSF). Occupational therapists use commercially available functional bracing for fracture alignment stability without rigid immobilization of surrounding joints. We developed a novel method of fabricating a custom functional brace for HSFs that provides more precise alignment of the fracture than commercial options. Objectives: 1) Outline the clinical indication for the novel custom splint and 2) demonstrate fabrication of a custom HSF splint and the follow-up protocol. Methods: We completed a literature review and conducted a survey of experts (n=6) to determine current practice. We completed a series of case studies examining the degree of fracture alignment immediately post injury with the alignment post custom splinting by an occupational therapist (n=6). Alignment was assessed radiographically in a standardized manner. Results: A custom functional brace provides optimal fracture alignment. Case studies demonstrating improved humeral alignment radiographically with the use of custom fabricated splints will be presented along with a video demonstration of the fabrication process. Practice implications: Conservative treatment of HSFs using custom splinting results in better fracture alignment and translates to less burden on the health care system. Anecdotally, clients report decreased pain and improved comfort in the early stages of healing.
Key words | Mots clés: Hand therapy, Orthotics

The use of artificial intelligence for healthcare access and equity
Thursday: 9:05 AM-9:30 AM Room | Location: Poster 6
Poster presentation: Adult | Equity & Justice
Rebecca Gewurtz (McMaster University, Oakville) gewurtz@mcmaster.ca Abigail Pigott (McMaster University) pigotta@mcmaster.ca Charlotte Ebsary (McMaster University) charlotte.ebsary@camh.ca

Introduction: It is important to better understand how Artificial Intelligence (AI) and smart technology systems (STS) can be leveraged to address the significant health inequities and barriers to access experienced by disadvantaged populations, and the implications for occupational therapists working to promote occupational engagement. Objectives: The purpose of this paper presentation is to review the scope and nature of the literature on use of AI applications in healthcare, and its potential to advance health equity for disadvantaged groups. Methods: We conducted a scoping review of the peer-reviewed literature to explore existing applications and evidence associated with using different forms of AI for health equity among disadvantaged groups. We developed a search strategy in consultation with a research librarian across four multidisciplinary databases. Findings: The findings highlight that this is an emerging area of inquiry, with promising yet relatively few existing applications. We will share the history of AI technology use in healthcare, the range of healthcare contexts it is currently being used and studied, the potential (and realized) benefits of AI use to promote health equity, and the potential risks. We will consider the existing and potential impacts on occupational performance and engagement, and the potential use of AI technology in occupational therapy services. Conclusion: AI can be used to break down barriers to health and occupational engagement among disadvantaged populations. Drawing on the findings from the literature, we will explore the potential use of AI implementation by Canadian occupational therapists.

Key words | Mots clés: Equity & Justice, Occupational justice

New OTA Competencies
Thursday: 9:40 AM-10:20 AM Room | Location: 102
Conversations that matter: Non-specific | General/Professional issues/Practice
Alison Douglas, Heather Gillespie, Debra Cooper

When the Competencies for Occupational Therapists were published in 2021, there was a need to revisit the Profile of Practice for OTAs (2018). CAOT held focus groups with results showing that a new document was needed to align with the OT Competencies, especially Culture, Equity and Justice. An introduction to the document will be followed by discussion of possible applications.

Focus of discussion: “How do you see this document impacting the OT and OTA collaboration?”

Mutual Sharing, Reflection and Focus
Thursday: 9:40 AM-10:20 AM Room | Location: 103
Conversations that matter: Non-specific | General/Professional issues/Practice
Kim Hewitt-McVicker hewittkm@mcmaster.ca, Anna Braunizer abraunizer@cbihealth.ca (Addressing Suicide in OT Practice)
The Addressing Suicide in OT Practice Network will share recent project work and create space for stories and experiences in practice from those in attendance to be shared. Through listening and feedback invitation the network seeks to build goals for the upcoming year that serve the occupational therapy community.

**Optimizing OT-OTA collaboration: Strengthening partnerships for better outcomes**

Thursday: 10:30 AM-10:55 AM Room | Location: 102

**Paper presentation:** Non-specific | Professional issues/Practice

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*Debra Cooper* (Spinal Cord Injury Program, Toronto Rehabilitation Institute - Lyndhurst Campus) debra.cooper@uhn.ca

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**background:** At the 2023 Canadian Association of Occupational Therapists conference and the 2023 Ontario Society of Occupational Therapists conference, occupational therapists (OTs) demonstrated significant interest in better understanding the role of occupational therapy assistants (OTAs). Specifically, OTs report interest in learning effective strategies for collaborating with OTAs to optimize client experiences, safety, and overall outcomes. 

**learning objectives:** Participants will leave the session with accurate knowledge of the OT and OTA roles in Canada. Participants will actively engage with and access a variety of resources aimed at enhancing their professional decision-making abilities to make informed, best practice decisions that support optimal collaborative practice and optimal occupational therapy outcomes. Upon completion of the session, OTs and OTAs will leave the session better equipped to collaborate in their professional contexts.

**instructional methods:** Through practical exercises and case studies, attendees will practice applying these resources to critically evaluate and make evidence-based decisions, promoting optimal collaborative practice.

**structure/participant engagement:** A brief overview of newly available resources will be presented. Following this, participants will actively engage in hands-on exercises, applying their new knowledge to real-world practice scenarios.

**practice problem:** The shortage of OTs on a national scale has led employers to hire more OTAs. OTs across Canada have identified a need for additional knowledge, skills, and training to gain a better understanding of the OTA role and to maximize their effectiveness within the OT-OTA team.

**practice implications:** Effective OT-OTA collaboration can enhance access to care, increase treatment frequency, boost client satisfaction, and improve the overall outcomes of occupational therapy services.

**Key words | Mots clés :** Evidence-based practice, Interprofessional

**Do online descriptions of occupational therapy services reflect neurodiversity-affirming practice?**

Thursday: 10:30 AM-10:55 AM Room | Location: 106

**Paper Presentation:** Community | Professional issues/Practice

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Rationale: Services for autistic individuals have traditionally focused on one’s deficits rather than their strengths. However, in recent years, there has been an emergence of neurodiversity-affirming practice (NAP) in clinical care. In the current literature, there is a lack of knowledge about the extent to which occupational therapists (OTs) have adopted NAP practices for autistic clients in private practice settings.
Objectives: In this study, we aim to examine: (1) the types of services that OTs claim to be providing in private practice settings in a specific urban geographical region for autistic individuals; and (2) the roots and impacts of language used by OTs when describing their services in these settings. Methods: Data were generated by a systematic scraping of 69 websites that advertise occupational therapy services for autistic individuals. We will conduct a discourse analysis as described by Crowe (2005) to examine the language used by these sites. Results: Our analysis will elucidate the ways in which the language on these sites may (or may not) map onto NAP approaches. Conclusion: By examining the extent to which NAP approaches are reflected in website content for private practice OT settings, we can highlight gaps between explicit intentions stated by OTs and implicit attitudes reflected in their language and practice. These findings can promote critical reflexivity on intention-practice gaps within the OT community, which will support clinicians in moving towards offering more enabling environments for the autistic community.

Key words | Mots clés : Advocacy, Occupational science

An ethics of care framework for moral reasoning in rehabilitation
Thursday: 10:30 AM-10:55 AM Room | Location: 107
Paper presentation: Non-specific | Equity & Justice
Monique Lanoix (St Paul University, Ottawa) megan@uottawa.ca Catrine Demers (University of Alberta) catrine@ualberta.ca Mary Egan (University of Ottawa) megan@uottawa.ca

Introduction: Ethics of care is a feminist philosophical perspective that considers relationships and context. Because of these emphases, it may be particularly useful for moral reasoning in rehabilitation. However, ethics of care was developed by multiple theorists and there is no integrated framework for application in healthcare. Objectives: To develop and illustrate a framework of application of ethics of care in rehabilitation. Approach: First, we reviewed the major works of the most influential writers in ethics of care and coded for essential concepts. Second, we organized the codes into categories and then developed the relationships between the categories. Finally, we contrasted action based on this framework with action based on three other ethical guidelines recommended for use in rehabilitation: the Jewish Rehabilitation Institute algorithm, Hunt and Ells’ roadmap, and Drolet and Hudon’s four-part ethical tool. Findings: The framework contains five dynamically interrelated categories: 1) attention; 2) skills and dispositions; 3) relationship; 4) responsibility; and 5) responsiveness. ‘Skills and dispositions’ is foundational in that all other categories must operate through it. In contrast to the other guidelines, our framework assumes that care providers are responsible for considering patients’ unique needs in the service of a satisfying life. These needs include, but do not stop at, biomedical needs. Second, it recognizes the limits of providers’ ability to respond to needs within contexts of inadequate resources and systems. Third, it appreciates that non-biomedical needs are acceptable bases for decision-making. Practice implications: Our framework adds an important corrective to existing decisional guidelines for rehabilitation.

Key words | Mots clés : Equity & Justice, Occupational justice

Videoconference self-management interventions to actively engage clients: A scoping review
Thursday: 10:30 AM-10:55 AM Room | Location: 108
Paper presentation: Adult | Chronic conditions
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Background: Videoconferencing in chronic disease management has dramatically increased post COVID-19 adding to expectations that occupational therapists will deliver programs virtually. Purpose: To identify features, barriers, and facilitators of synchronous videoconference interventions that actively engage clients to manage their conditions. Methods: Scoping review methodology was employed. MEDLINE, CINAHL, and six other databases were searched. Included studies reported on structured, one-on-one, synchronous videoconferencing interventions that actively engaged adults to manage their chronic conditions at home. Studies reporting assessment or routine care were excluded. Extracted text was analyzed using thematic analysis and two published taxonomies: the Taxonomy of Everyday Self-management Strategies (TEDSS) to code program content and the Behaviour Change Taxonomy (BCTv1) to code behaviour change techniques. Results: The 33 included articles reported on 25 programs. Over 50% of programs included content on medication/symptom management, adopting healthy lifestyles and collaborative problem solving and action planning. Less emphasis was placed on engaging in meaningful activity, finding resources and maintaining productive social relationships. Three BCTs dominated: feedback and monitoring; goals and planning; and shaping knowledge. Distinct differences in content and BCTs were evident based on whether program objectives were to improve physical activity/function or mental health. Home-based videoconferencing interventions were seen as feasible and acceptable to clients. Conclusion: Limited content in over half the TEDSS domains highlights the continued medicalization and siloed nature of existing programs, neglecting evidence that engagement in meaningful activities, social relationships, and management of resources and support improve both physical and mental health. Occupational therapists delivering self-management interventions have capacity to pioneer new directions.

Key words | Mots clés : Evidence-based practice, Technology

Connecting the dots: Community and connection in distributed learning
Thursday: 10:30 AM-10:55 AM Room | Location: Poster 1
Poster presentation: Adult | Fieldwork/Education
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Introduction. Distributed learning separates individuals of the same graduating class into cohorts, where students learn in-person with their cohort and connect virtually with the larger class. In traditional classrooms, liminal spaces afford opportunities for connection through social presence and authenticity (Carvalho et al., 2018). How liminal space is affected by technology, physical proximity, and student or instructor roles, across distributed cohorts is less understood. Objectives. This study explores how Master of Occupational Therapy (MOT) students and instructors within three distributed cohorts experience liminality, community and connection. Methods. Semi-structured interviews will be conducted with students and instructors of distributed cohorts within the same MOT graduate program. Reflexive thematic analysis will be used to interpret data. Results. We anticipate cohort community and connection to fluctuate in response to the quantity and quality of interactions. Liminal spaces, as mediated by technology, may afford opportunities for authentic interactions outside of typical student
or instructor roles by facilitating community and experiences of connection (Beeson et al., 2019). Although technology may facilitate virtual connection across distributed cohorts, it may not foster emotionally authentic connections in the same way as physical spaces (MacLeod et al., 2019).

Conclusion. Community and connection have been associated with increased student well-being, academic performance, and satisfaction in post-secondary education (MacLeod et al., 2019). This study offers insight into how technology, liminal space, and student/instructor roles affect experiences of community and connection within and across distributed cohorts. In addition to strengthening the development of distributed occupational therapy programs, findings may also benefit occupational therapists when designing distributed programs.

Key words | Mots clés : Teaching/education, Technology

Occupation of peer support within an integrated youth services initiative
Thursday: 10:30 AM-10:55 AM Room | Location: Poster 2
Poster presentation: Children and youth | Mental health
Kaylie Schols-Flett (University of British Columbia, Vancouver) kaylief@student.ubc.ca Bridgette Ferrara (University of British Columbia) Madelyn Whyte (Foundry) mwhyte@foundrybc.ca Cassia Warren (Foundry) cwarren@foundrybc.ca Matt Wenger (Foundry) mwenger@foundrybc.ca Skye Barbic (University of British Columbia) skye.barbic@ubc.ca

Rationale: Youth peer support (YPS) refers to a specific type of support provided to youth experiencing mental health and substance use (MHSU) challenges by peers who have lived experience with MHSU concerns and the healthcare system. Despite the known benefits of YPS (Shalaby & Agyapong, 2020), there is a lack of understanding about the impact of YPS as an occupation. Objectives: (1) To understand the impact being a YPS worker has on personal well-being and/or personal recovery, and (2) to use an occupational science lens to understand the meaning and experience of being a YPS worker to provide insight into the barriers of being in this role in an integrated youth services context. Methods: Using convenience sampling and semi-structured interviews over Zoom, we interviewed 17 YPS workers, aged 19-36 years, from September-October 2023. We analysed the data using inductive thematic analysis. Findings: Preliminary findings suggest that the occupation of YPS can foster resiliency, connection, purpose and meaning, skill development, and boundaries. YPS workers reported that their occupation gives them important transferable skills, such as active listening and meaningful connections to support future professional development. Practice Implications: Findings from this study will contribute to educating on the value of YPS workers as an occupation and the importance this role has in finding meaning and purpose for those with living or lived experience. Transferring YPS evidence to policy requires ongoing evidence that prioritizes YPS workers’ voices, thereby providing a deeper understanding of the mechanisms through which YPS programs are effective for both youth and the workers themselves.

Key words | Mots clés : Mental health, Program evaluation

Autism healthcare during transitions in rural communities: A qualitative study
Thursday: 10:30 AM-10:55 AM Room | Location: Poster 3
Poster presentation: Community/Population | Health and well-being
Tara Naimpally (Dalhousie University, Halifax) tr463496@dal.ca, Parisa Ghanouni (Dalhousie University) parisa.ghanouni@dal.ca
Introduction: This abstract outlines an ongoing research project examining healthcare experiences of individuals with Autism Spectrum Disorder (ASD) in rural communities during their transition to adulthood. Research has found various factors impacting outcomes during transitions in relation to healthcare services (Anderson et al., 2018; Ghanouni & Seaker, 2022). This study focuses on accessibility, service quality, and transportation issues. Objectives: The primary objective of this research is to understand the challenges associated with accessing healthcare services in rural areas for individuals with ASD during the transition to adulthood. We aim to develop a deeper understanding by investigating the quality of service, the impact of transportation issues, and the barriers faced by these individuals. Methods: Data was gathered from interviews, surveys, and document analysis to explore the experiences of individuals with ASD during their transition to adulthood. Our research employs qualitative analysis of collected data. Thematic analysis helps develop key theses concerning healthcare access. Findings: We expect to uncover challenges with transportation, access to services and the quality of healthcare provided to individuals with ASD in rural areas. These findings will highlight the importance of addressing healthcare disparities and ensuring access to quality care. Conclusion: Practitioners must be well-informed about the challenges associated with accessing healthcare services for individuals with ASD in rural areas. Understanding the social determinants of health and the obstacles faced by those residing in rural communities is essential. The results of this study will support informed decision-making and creation of strategies to improve access and quality of healthcare services for individuals with ASD during their transition to adulthood.

Key words | Mots clés : Autism, Community care

Geriatric activation team: Occupational therapists in the emergency department

Thursday: 10:30 AM-10:55 AM Room | Location: Poster 4

Poster presentation: Older Adult | Primary care/Primary healthcare

Heather VanderMeer (Northumberland Hills Hospital, Cobourg) hvandermeer@nhh.ca Joanne Jury (Northumberland Hills Hospital) jjury@nhh.ca

Background/Introduction: Healthcare across the Canadian landscape is being challenged by the growing population of people over the age of 65. Working towards decreasing hospital length of stay, alternate level of care (ALC) rates and avoidable hospital admissions, the organization implemented an Occupational therapist (OT) led interprofessional Geriatric Activation Team (GAT) in the Emergency Department (ED). Practice Innovation: Working collaboratively with the Geriatric Emergency Management (GEM) nurse, the GAT team targets individuals over 65 who present to the ED and meet a set of criteria related to geriatric syndromes. Within this team, the OT provides early comprehensive assessments and identifies, and problem solves barriers to create safe discharge plans. Findings: Early intervention in the ED has seen a significant decrease in admission rates for this targeted population as well as an overall decrease in length of stay and ALC days. Additionally, interdisciplinary collaboration has increased internally and externally with community partners and support organizations. Learning Objectives: This session will demonstrate the value of early intervention by OTs in the ED. It will outline the importance of team collaboration and comprehensive assessments that determine safe and appropriate discharge plans for geriatric clients. Practice implication: OTs are essential team members in the ED and play a significant role in preventing avoidable admissions by providing early intervention, comprehensive and holistic assessment, and discharge planning.
Canadian Stroke Best Practices: Are we meeting the mark?
Thursday: 10:30 AM-10:55 AM Room | Location: Poster 5
Poster presentation: Adult | Acute conditions
Sambidha Ghimire (Queen's University, Kingston) Ana Petrovic (Queen's University) Richard Kellowan (Kingston Health Sciences Centre) Richard.Kellowan@Kingstonhsc.ca

Introduction: Canadian Stroke Best Practices (SBPs) are evidence-based guidelines that guide occupational therapist (OT) interventions for stroke recovery. A regional acute stroke centre created an audit tool for OT interventions to examine practice patterns and enhance patient care. Innovation: Two student OTs completed the audit over eight weeks. First, OT interventions for stroke recovery were identified through an integrative analysis of SBPs, regional stroke centre OT assessment forms (5), and literature review of stroke OT roles (n=14). Second, a peer-reviewed, 87-item chart audit tool was developed for clinical utility, confidentiality, and clinical reflection. Third, data analysis evaluated OT interventions for consistency (frequent, mostly, rarely, never) and patient care patterns. Clinical factors limited blinding and bias controls; however, interventions remained consistent to avoid influencing outcomes. Inclusion criteria identified 30 charts that were audited over an eight-day period. Findings: Audit evaluated consistency of interventions across eleven SBP domains: chart review, behaviour, cognition, communication, musculoskeletal, psychosocial, visual perception, functional tasks, patient education, fatigue, and sensory perception. Six patient care patterns emerged. 1) SBPs are specific but not prescriptive. 2) Clinical factors limit SBPs. 3) Patient trajectories influence SBPs. 4) Who assesses function? 5) Are we missing the mark for repatriation patients? 6) Supporting end-of-life care for palliative patients. Each pattern was discussed with a critical reflexivity lens under pandemic practice conditions. Practice Implications: Audit identified OT practice gaps, leading to program changes to enhance access to OT services. Learning Objectives: Attendees will acquire strategies to streamline OT protocols and enlist interdisciplinary collaboration to further support QBPs in acute care.

Key words | Mots clés : Assessments, Interprofessional

The Geography of Inequity: Evaluating Transportation Equity in the GTA
Thursday: 10:30 AM-10:55 AM Room | Location: Poster 6
Poster presentation: Community/Population | Equity & Justice
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Introduction: Occupational therapists affirm the right of all people to safe, equitable, timely, accessible, and affordable community mobility. Recent evidence points to the existing Canadian transportation infrastructure as limiting the occupational participation of equity deserving groups. However, the specific ways in which such infrastructure perpetuates this marginalization remain largely unexplored. Objectives: To evaluate the transportation equity needs of the Greater Toronto Area (GTA). Methods: We used the Transportation Justice Threshold Framework (TJTF), a quantitative tool that enables the evaluation of set parameters affecting transportation equity in a geographical region, to conduct a secondary data analysis of existing public data. Analysis included: the selection of demographic, socioeconomic, and transportation variables and sourcing of public data; development of a TJTF threshold index; and calculation of the composite index score for each region. Findings: GTA local
municipalities with high immigrant populations exhibited the greatest equity needs, compared to other areas of the GTA. Contributing factors underlying the need for equity changes differed by region. Among the evaluated regions, Markham demonstrated the highest need for equity support while King City displayed comparatively lower need. Conclusion: The difference in equity needs and contributing factors underscores the importance of adopting a localized approach to tackling transportation inequities. Occupational therapists have a responsibility to contribute to tailored solutions that consider unique socio-demographic and transportation usage characteristics. Further, while the TJTF represents a valuable initial step, a critical analysis of the tool further revealed problematic assumptions and biases that occupational therapists can learn from.

**Key words | Mots clés**: Equity & Justice, Occupational justice

**Identifying research priorities for occupational therapy for musculoskeletal conditions and arthritis in Canada: A James Lind Alliance priority setting partnership**

Thursday: 10:30 AM-11:30 AM | Room: 103 | Location: 103

CAOT Sponsored Session

_Eilleen Davidson, Annette McKinnon, Mary Forhan, Josée Séguin, Emma Guyonnet and Catherine Backman_

Musculoskeletal (MSK) conditions are one of the main causes of disability worldwide and affect approximately 27.8% of Canadians (Musculoskeletal health, 2022; Kopec et al., 2019). Musculoskeletal conditions can lead to various impairments that affect people’s mobility, well-being, and ability to participate in meaningful daily activities (Roll, 2017). Despite these effects, there are still significant knowledge gaps across the continuum of care, specifically, little research has been conducted on occupational therapy for MSK conditions and arthritis in Canada. As such, there is an increasing need to undertake research that is driven by patient engagement (Canada’s Strategy for Patient-Oriented Research, 2012). One method that engages patients is the James Lind Alliance (JLA). The JLA is a not-for-profit initiative that brings patients, caregivers, and healthcare providers together to identify and prioritize the evidence uncertainties that are most important to these groups to eventually guide the future research agenda (The James Lind Alliance Guidebook, 2021). Using this approach, the Occupational Therapy for MSK Conditions & Arthritis Priority Setting Partnership (PSP) was conducted to identify the occupational therapy research priorities in Canada for people living with MSK conditions and arthritis from the shared perspectives of occupational therapy professionals, people living with MSK conditions and arthritis, their caregivers and other health care providers.

**Reasoning through Uncertainty: Encouraging Creative Innovation in Education and Practice**

Thursday: 10:30 AM-11:30 AM | Room: 104

**Extended discussion**: Non-specific | Fieldwork/Education

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Introduction: Everyday, occupational therapists encounter uncertainty—“the dynamic, subjective perception of not knowing what to think, feel, or do” (Lee et al., 2021, p. 1195). Uncertainty involves both what one does not know and that one does not know (Han et al., 2011). Having awareness of not knowing often leads to mental discomfort. Increasingly, the ability to manage uncertainty has been discussed as a competency in occupational therapy (Galvaan et al., 2021) and health professions education (Mylopoulos et al., 2016). One main source of uncertainty is complexity, which occurs in situations where information is multilayered and difficult to interpret. Due to the idiosyncrasies of people’s needs and desires, occupational therapy practitioners often encounter complex occupational challenges that require novel and innovative solutions. Thus, occupational therapy educators must explicitly discuss uncertainty—and its associated discomfort—with students, as well as teach them how to think through uncertainty in future practice. Objective: This extended discussion will provide an opportunity for reflection of personal experiences of uncertainty and dialogue about strategies to support practitioners, educators, and students to practice, teach, and learn through uncertainty (e.g., Moffett et al., 2021). Session Description: To begin, participants will be asked to record their definitions of uncertainty and reflect on their experiences of it in practice, teaching, and learning. Then, a brief presentation of how uncertainty is positioned in the literature will lead into small group discussions of the difficulties experienced due to uncertainty. Each group will discuss strategies that occupational therapy practitioners, educators, and students can use to position uncertainty as an advantage in their work and sharing key strategies to the full group. Practice Implications: Uncertainty can lead practitioners, educators, and students to hesitate in presenting diverse ideas to and making decisions. Thus, it is essential to teach students to navigate uncertainty by learning how to apply diverse strategies to support discovery of information, curiosity of learning, and creativity in identifying practice possibilities. Conclusion: Due to the common occurrence of uncertainty in occupational therapy practice, educators must explicitly discuss uncertainty and teach students how to abductively reason through complex, uncertain situations using learned strategies.

Key words | Mots clés : Clinical reasoning, Teaching/education

Remodeler sa vie : Science, partages et réflexions
jeudi: 10:30 AM-11:30 AM Room | Location: 109

Séances de longue durée: Non spécifique | La santé et le bien-être

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Introduction. Tout au long de la vie, plusieurs transitions (ex. maladies chroniques, retraite) sont susceptibles d’affecter la santé et le bien-être et de nécessiter des ajustements sur le plan occupationnel. Développé en Californie et récemment adapté au contexte franco-canadien, le programme Remodeler sa vie® (Clark et al., 2021) est une intervention d’ergothérapie préventive.
novatrice et efficace visant le développement de modes de vie sains et porteur de sens. Malgré de récentes études ayant appuyé son efficacité, sa faisabilité et sa pertinence sociale, l’utilisation du programme en clinique est toutefois limitée. Objectifs. Cette présentation vise à dresser un bilan des avancées scientifiques liées à l’implantation du programme Remodeler sa vie en contexte franco-canadien et à discuter, au regard d’examplules authentiques, des leviers et des obstacles à son intégration à la pratique. Description de la séance. Une présentation magistrale couvrira d’abord les grandes lignes du programme et les résultats des travaux de recherche sur sa version franco-canadienne, incluant une recension systématique des effets, une étude de faisabilité, de préimplantation, d’évaluation réaliste ainsi que diverses études pilotes menées respectivement auprès de personnes aînées, de femmes atteintes de fibromyalgie et de jeunes n’étant ni en emploi, ni aux études, ni en formation. Cette présentation sera suivie d’une activité de type conférence de presse où les participants seront invités à formuler, en sous-groupes, un questionnement ou un point de controverse concernant une éventuelle implantation en milieu clinique. Un panel de cinq intervenantes (chercheuse, étudiante, gestionnaire, cliniciennes) ayant une connaissance approfondie et diversifiée du programme répondront aux questions et animeront les échanges en favorisant les débats d’idées. Implications pour la pratique. En s’appropriant les résultats d’études franco-canadiennes sur le programme Remodeler sa vie®, et en discutant, de façon collective et conviviale, des leviers et des obstacles à son implantation, les ergothérapeutes seront mieux outillés pour construire des arguments ayant des assises empiriques solides et préparer une implantation réussie du programme selon leur contexte de pratique. Conclusions. Grâce à un alliage de science, de partages et de réflexions sur le programme Remodeler sa vie®, cette présentation fournira aux ergothérapeutes une option de pratique préventive, stratégique et scientifiquement fondée pour favoriser le bien-être et la santé de leur clientèle.

Key words | Mots clés : Pratique fondée sur les faits scientifiques, Science de l’occupation

Resisting colonialism in occupational therapy: Building respectful, reciprocal relationships

Introduction: Indigenous occupational therapists in Canada persistently recommend that occupational therapy curricula better incorporate content related to ongoing colonial contexts of practice, Indigenous worldviews and perspectives on occupation, and culturally safer practice (Clyne, 2023; Pride et al., 2023; Valavaara & Phenix, 2019). In response to national competencies requiring occupational therapists to promote equity in practice – including addressing ongoing effects of colonization – the Dalhousie School of Occupational Therapy is developing a course on Resisting Colonialism in Occupational Therapy. Objectives: This extended discussion uses one school’s experiences of collaboration to engage occupational therapists, students, and educators in discussions about building respectful, reciprocal relationships with Indigenous Peoples to shape (and transform) the education of entry-level occupational therapists. Session Description: Initially, facilitators will share processes and lessons learned through community collaboration with Indigenous communities and professionals. We will highlight collective learning regarding appropriate and effective partnering between Indigenous Peoples (within and outside academia) and university-level health professional programs. In small groups, attendees will be invited to share experiences and/or goals of collaborating with members of relevant communities to inform course content, pedagogy, and evaluation of learning pertinent to decolonial
approaches to education and practice. Attendees will share successes and challenges. We will reconvene for a facilitated full group discussion that synthesizes ideas discussed in small groups. Practice implications: Alongside other health professionals, occupational therapists are expected to understand impacts of colonization, as expressed in the Truth and Reconciliation Calls to Action. It is vital that curriculum development be rooted in reciprocity and respectful relations with local communities. Attendees will collectively generate ideas on how to authentically engage with Indigenous partners to advance Indigenous ways of knowing in entry level occupational therapy curricula, which aligns with longer-term visions of decolonizing occupational therapy practices. Conclusion: Occupational therapy students and occupational therapists need to be provided opportunities to engage in critical reflexivity to resist colonialism, while learning from Indigenous Peoples in Canada and globally to improve future practice. It is important to create spaces for collective dialogue to share our efforts to practice, learn, and teach in ways that challenge colonializing ways of doing and being.

**Key words | Mots clés**: Equity & Justice, Teaching/education

**Innovations in Team-Based Care**

Thursday: 10:30 AM-11:30 AM  **Room | Location**: 101

**Conversations that matter**: Community/Population | Advocacy/Leadership

*Chenny Xia chenny@gotcare.ca, Carol MacDonald (Innovative Team Based Care Practice Network)*

Join us in the launch of the ‘Innovative Team-Based Care Practice Network’. This pivotal session focuses on best practices and key leverage points in advanced interdisciplinary and integrated team-based care models. These insights will be enriched by real case studies and stories from across the country, such as upskilling programs to support delegated care and technology streamlining initiatives. A must-attend for insights into the future of collaborative healthcare.

**A qualitative study of attrition and retention: Implications for OTs**

Thursday: 11:05 AM-11:30 AM  **Room | Location**: 102

**Paper presentation**: Not applicable | Professional issues/Practice

*Susanne Mak (McGill University, Montreal) susanne.mak@mcgill.ca Aliki Thomas (McGill University) aliki.thomas@mcgill.ca Saleem Razack (University of British Columbia) saleem.razack@cw.bc.ca Kelly Root (Dalhousie University) Kelly.Root@dal.ca Matthew Hunt (McGill University) matthew.hunt1@mcgill.ca*

Introduction: Health human resources are scarce worldwide. In occupational therapy (OT), physical therapy (PT) and speech-language pathology (S-LP), attrition issues amplify this situation and add to the fragility of health systems. Objectives: To investigate the phenomena of attrition and retention with OTs, PTs and S-LPs who stayed in, or left their profession. Only findings pertinent for OTs will be presented.

Methods: This was an interpretive description study informed by cultural-historical activity theory. We used purposeful sampling (maximum variation approach) to recruit OTs, PTs, and S-LPs from Quebec. Individual interviews were conducted in English or French. Inductive and deductive approaches, and constant comparative techniques were used for data analysis. Findings: 51 participants were interviewed (32 OT, 11 PT, 8 S-LP). Six themes were developed: 1) alignment of work characteristics with practitioners’ values; 2) aspects of work that practitioners’ appreciate; 3) factors of daily work that weigh on a practitioner; 4) factors that contribute to practitioners’ capacity to manage work; 5) relationships with different stakeholders that shape daily work; and 6) perceptions of the profession. Alignment with personal values leads to greater meaning in work. Factors within and beyond the work...
environment (e.g., relationships with managers and colleagues, systemic barriers to practice) shaped participants’ practice, such as their professional autonomy. Recurrent negative experiences led some to leave their profession. Conclusions: Findings underscore a critical need to address the multi-level, systemic factors contributing to attrition and retention which are essential to ensuring the availability of OTs for present and future rehabilitation needs.

Key words | Mots clés : Interprofessional, Teaching/education

Conducting relational and respectful research: A community-driven priority setting project
Thursday: 11:05 AM-11:30 AM Room | Location: 106
OS Paper presentation: Community/Population | Equity & Justice
Holly Reid (University of British Columbia, Vancouver) hollyreid@live.ca Suzanne Huot (University of British Columbia) shuot2@mail.ubc.ca

Introduction: Occupation-focused research has often been designed, conducted and mobilized with minimal, if any, input from the communities of interest. This is problematic in the ways that research oftentimes takes place without the respectful relationships, reciprocity and multi-directional learning that is possible when a community-based participatory research (CBPR) approach is used. A key consideration when adopting CBPR is establishing research priorities that seek input from community members at all stages of the process. This paper will present the findings from a 12-month priority setting project in partnership with two Indigenous-led partner organizations that set the stage for a doctoral study exploring the occupational experiences of 2SLGBTQ+ Indigenous peoples. Objectives: 1) Describe the strategies, methodologies and learnings developed from engaging in priority setting activities to co-create a community-driven doctoral study, and 2) Provide recommendations for how to include community members in the research development process through relationship-building.

Approach: Sharing circles and arts-informed activities were undertaken with 2SLGBTQ+ Indigenous peoples. Use of Indigenous theories and methodologies to set priorities honors Indigenous resurgence through centering Indigenous ways of knowing, being and doing at all stages of the research. Findings: Key themes include 1) Establishing and nurturing research capacity and ongoing research relationships; 2) Beginning a co-learning journey of setting research priorities and expectations. Conclusion: This work examines how to develop and undertake research that is self-determined by community. Further, it informs recommendations for how studies can employ approaches that honor Indigenous ways of being, knowing and doing, and builds capacity for community-driven research.

Key words | Mots clés : Equity & Justice, Occupational justice

The promise of equity-based directions in work transitions
Thursday: 11:05 AM-11:30 AM Room | Location: 107
Paper presentation: Adult | Work and return to work
Cisela Thoren (Focused Occupational Rehab, Dartmouth) cisela_thoren@yahoo.ca Lynn Shaw (Western University) leshaw@uwo.ca Karen Joudrey (Dalhousie University) kjoudrey@dal.ca

Introduction: Navigating work transitions is challenging. Individuals experiencing work transitions and occupational therapists supporting them encounter structural, contextual, and system inequities impeding access to equitable participation in occupation that ensure health for all. Practice problem: Individuals (micro level) do not typically question or try to change societal structures or barriers. They move around them using mechanisms to return to work or move on with their lives. OTs in their

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practices (meso level) need to examine inequities in access to occupational participation and consider the role of the OT in addressing this barrier. Structural barriers (macro level) resulting in inequity in access to occupational participation in work disability policies are not questioned or challenged.

Approach: Share processes of applying equity informed critical reflections using a retrospective review of lived experience of work transition narratives and two examples of therapist experiences in work practice. Delegates will be invited to share thoughts for change in work practices. Learning Objectives: To introduce micro-meso-macro level work transition inequities and how using equity-based considerations can identify practical steps for OTs toward equitable work transitions and Decent Work for all. Practice implications: The promise of equity reflections and action using the driver of occupational participation is that OTs can partner with individuals and each other to advocate for change at the macro level societal structures, policies and systems and inspire ways to dismantle bottlenecks of structural inequities toward greater equity in work transitions. We call on OTs to question societal and system barriers using the lens of equitable occupational participation as critical to health.

**Key words | Mots clés :** Advocacy, Occupational justice

**Brain changes with CO-OP in children with autism and DCD**
Thursday: 11:05 AM-11:30 AM  Room | Location: 108

**Paper presentation:** Children and youth | Chronic conditions

*Jill Zwicker (University of British Columbia, Vancouver)* jill.zwicker@ubc.ca  *Melika Kangarani-Farahani (University of British Columbia)* melika.kangaranifarahani@gmail.com

Introduction: Up to 88% of children with autism spectrum disorder (ASD) face motor difficulties that significantly impact their daily lives, likely due to co-occurring developmental coordination disorder (DCD). Despite motor deficits being so common in children with ASD, motor-based interventions are rarely the focus of therapy. Cognitive Orientation to Occupational Performance (CO-OP) is an effective intervention for children with DCD to learn motor skills, but it is unknown if this therapy is effective for children with autism. Objectives: The primary purpose of this study was to investigate changes in white matter microstructure and motor skills in children with ASD+DCD after CO-OP intervention. Methods: This randomized waitlist-controlled trial included 26 children (8–12y) with ASD (without intellectual disability) and co-occurring DCD. Diffusion tensor imaging data were collected before and after 10 weeks of CO-OP intervention. Children in the treatment group began intervention after the first MRI scan and the waitlist group started treatment three months later. Tract-based spatial statistics examined white matter changes after intervention. Results: Data analysis is underway. We expect that children with ASD+DCD will show greater maturation in white matter pathways in various brain regions, and that these changes will be positively correlated with motor function. Conclusion: The anticipated improvements in motor function and white matter pathways in children with ASD+DCD will underscore the value of CO-OP interventions as a therapeutic approach with this clinical population. Results will support advocacy efforts to include CO-OP as an evidence-based occupational therapy intervention for children with autism.

**Key words | Mots clés :** Autism, Developmental coordination disorder

**Understanding professionalism in the context of occupational therapy education**
Thursday: 11:05 AM-11:30 AM  Room | Location: Poster 1

**Poster presentation:** Adult | Professional issues/Practice
Introduction: The development and demonstration of professionalism is critical to being an occupational therapy (OT) student, and to becoming a competent clinician. However, given the complex nature of professionalism, and majority of literature residing in medical education, our understanding of professionalism within OT is varied and without a strong consensus on what the concept entails. This can lead to challenges in teaching and evaluating professionalism in educational settings, and may hinder the effectiveness of client care. Objectives: To explore faculty and student perspectives on professionalism. Methods: A generic qualitative approach (Kahlke, 2014) was used in this study. Twenty-two semi-structured interviews were conducted with faculty (n=4), first (n= 10) and second (n=8) year students. Interviews were transcribed and analyzed using thematic analysis (Braun & Clarke, 2006). Findings: Participants provided important insights into what professionalism in OT looks like, and how education programs can better foster its development. Several themes highlighting different aspects of professionalism emerged including, concrete attributes of professionalism, importance of professionalism, the nature of professionalism and teaching professionalism. Suggested strategies for promoting professionalism among students included dialogue between students and faculty on navigating professional tensions, consistent modelling of professionalism by faculty, and restructuring evaluations of professionalism (i.e., objective structured clinical examinations). A working definition of professionalism was constructed based on the participants’ perspectives and emergent themes. Conclusion: OT faculty and student perspectives on professionalism can be used to inform enhanced practices of teaching and assessing professionalism in OT education, ultimately improving future clinical interactions.

Key words | Mots clés : Fieldwork, Teaching/education

Experiences of accessing rehabilitation by people living with Long COVID
Thursday: 11:05 AM-11:30 AM Room | Location: Poster 2
Poster presentation: Adult | Chronic conditions
Pam Hung (University of Alberta, Edmonton) pahung@ualberta.ca Katelyn Brehon (Rehabilitation Research Centre, University of Alberta) Maxi Miciak (University of Alberta) Cary Brown (University of Alberta) Douglas Gross (University of Alberta)

Introduction: Long COVID (LC) is a condition where symptoms linger for >12 weeks after acute COVID infection, subsequently negatively impacting functional abilities. However, little is known about: (1) the health concerns leading people with LC to seek help to address functional concerns, and (2) their rehabilitation experiences. Objectives: We aimed to better understand the need for, access to, and quality of LC rehabilitation services. Methods: We used Interpretive Description, a practice-oriented qualitative approach, to understand experiences of LC rehabilitation across five settings: a telerehabilitation telephone line; public physician-led LC clinics; a private physiotherapy clinic; and a multi-disciplinary clinic for Workers’ Compensation claimants. We also recruited participants who had little to no rehabilitation via social media. We conducted virtual, semi-structured interviews with 56 participants and performed reflexive thematic analysis. Results: Participants primarily identified as female (60.7%) and were from urban centers (76.8%). Our sample ranged from 20-74 years of age with a mean (SD) age of 49.3 years (13.0). Four themes were identified: 1) the burden of searching for guidance...
to address functional challenges; 2) supportive relationships promote engagement in rehabilitation; 3) conditions for safe participation in rehabilitation, and 4) looking forward: provision of appropriate interventions at the right time. Conclusions: Rehabilitation experiences of individuals with LC were mixed, but clinicians should listen to and validate peoples’ lived experiences of LC and be flexible with how rehabilitation services are delivered (e.g., in-person vs. telerehabilitation). Our findings highlight that rehabilitation should be accessible, multi-disciplinary, and person-centred.

**Key words | Mots clés :** Community care, COVID

**Access to interdisciplinary pediatric concussion services during the COVID-19 pandemic**
Thursday: 11:05 AM-11:30 AM Room | Location: Poster 3
Poster presentation: Child | Technology
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Introduction. Due to the COVID-19 pandemic, most pediatric concussion services transitioned to virtual care (VC). Among these services was an interdisciplinary pediatric concussion specialty clinic in Ontario that sees youth (≤18 years) with persisting symptoms after concussion (>4 weeks). In-person individual and interdisciplinary team-based assessments were utilized prior to the pandemic which were easily transitioned to VC. However, the impact of VC on these services, including access to occupational therapy (OT), within this clinic has not been explored. Objectives. To explore changes in OT and interdisciplinary services accessed pre-, during, and post-pandemic by youth and families within the concussion clinic. Methods. Electronic health records (EHR) for clients seen in the concussion clinic from 2015 to 2023 will be reviewed (n=886). The following variables will be extracted and analyzed: demographic data (setting of injury, age, gender, etc.), number of clinicians accessed, number of virtual and in-person appointments, and number of families accessing a team-based assessment. Results. Thus far, 461 EHR for clients seen pre-pandemic have been extracted and analyzed. An additional 425 EHR for clients seen during and post-pandemic will be extracted and analyzed. During the pandemic, it is expected that there will be a decrease in in-person services accessed and an increase in VC accessed across all professions. Conclusion. This study will explore trends related to access to OT and interdisciplinary services pre-, during, and post-pandemic at a pediatric concussion specialty clinic. These trends are important to OT practice as it will help increase understanding of the role of VC in pediatric concussion care.

**Key words | Mots clés :** Assessments, Interprofessional

**Occupational therapy, harm reduction, and substance use: An environmental scan**
Thursday: 11:05 AM-11:30 AM Room | Location: Poster 4
Poster presentation: Adult | Health and well-being
Kimberly Bitz (Queen’s University, Weyburn) kimberly.bitz@queensu.ca Niki Kiepek (Dalhousie University) niki.kiepek@dal.ca Virginia Stoffel (University of Wisconsin-Wilwaukee) ginny.stoffel@gmail.com Marcia Finlayson (Queen’s University) marcia.finlayson@queensu.ca
Introduction: Canadians are increasingly using alcohol at high levels, and women, particularly, are showing patterns of harmful alcohol use (Andreasson et al., 2021). Harm reduction is an approach to assessment and intervention that effectively reduces consumption and alcohol-related harms (Marlatt & Witkiewitz, 2002). However, a survey of practicing occupational therapists in the United States found that alcohol assessment and interventions occur less than 5% of the time (Hasin et al., 2007). This raises concerns that Canadian occupational therapists may also miss opportunities to address substance use.

Objectives: 1. Describe the current state of education and learning needs for occupational therapy students and practicing occupational therapists related to harm reduction and alcohol use among women. 2. Describe the perspectives and experiences of occupational therapists related to their clinical use of harm-reduction strategies for alcohol use. Methods: We completed an environmental scan that included an online search of occupational therapy practice and educational resources, an online survey of Canadian university occupational therapy programs, and semi-structured interviews with 11 Canadian occupational therapists. Findings: 6 of 14 occupational therapy programs responded, and all include harm reduction in their curricula. However, occupational therapists encounter obstacles to implementing harm reduction practices, including role confusion, resource and professional development limitations, skill gaps, and stigma. Additionally, limited harm reduction resources and professional development opportunities are available online for occupational therapists. Conclusion: Harm reduction strategies are clearly valued responses to substance use. Resource development is required to support occupational therapists to reduce missed opportunities, guide effective intervention, and promote the role of occupational therapists.

Key words | Mots clés : Evidence-based practice, Mental health

Modified constraint induced movement therapy for acute stroke patients
Thursday: 11:05 AM-11:30 AM Room | Location: Poster 5
Poster presentation: Adult | Acute conditions
Mary Osei (Queen’s University, Kingston) Richard Kellowan (Kingston Health Sciences Centre)

Background: The Canadian Stroke Best Practices recommend modified constraint induced movement therapy (mCIMT) for acute stroke patients. However, there are no comprehensive guidelines on how to practically implement mCIMT in acute care. Innovation: To address this gap, an occupational therapist (OT) team created a 60-page clinical resource guide discussing the history, theory, in/exclusion criteria, treatment protocols, implementation guidelines, and practical applications of mCIMT. Evidence-based recommendations on restraint type, treatment tasks, mCIMT kit-building, and patient-family engagement were compiled, focusing on occupational participation. This poster will summarize key concepts for implementing mCIMT with acute stroke patients. Approach: A student OT authored the guide over five weeks. Chapters were derived from evidence-based stroke resources, critical literature review (n=26), and OT clinical websites (n=3). Guide incorporated adult learning principles and shared a case report. Afterwards, a peer-reviewed, ten-item implementation survey was developed to seek perspectives of the multidisciplinary stroke team on implementing a mCIMT program. Practice Implications: 1) Neuroplasticity theory supports mCIMT over traditional or “forced overuse” treatments. 2) The “EXPLICIT mCIMT Protocol” (Nijland, 2013) was introduced and adapted for acute care with patient candidacy factors ranging from intensive care to stroke unit. 3) Eight-step implementation process described OT competencies, consent considerations, patient readiness, treatment principles, and transfer packages appropriate for acute care. 4) Rationale for padded oven mitt (restraint), kit items, bedside tasks, and OT assistant delegation are discussed. 5) Case report illustrated the patient...
experience and OT clinical reflections. 6) Survey results in progress. Learning Objectives: Attendees will gain practical knowledge on implementing mCIMT for acute stroke patients.

**Key words | Mots clés**: Acute care, Stroke

**Vers des milieux de soins inclusifs envers les aînés LGBTQ+**

jeudi : 11:05 AM-11:30 AM **Room | Location**: Poster 6

**Présentations par affiches**: Les adultes plus âgés | l'Équité et la justice

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Introduction: En dépit de l’évolution des lois et des mœurs au sein de la société, bon nombre d’aînés s’identifiant à la communauté LGBTQ+ considèrent que les milieux de soins sont encore stigmatisants et peu inclusifs. C’est pourquoi ils sont réticents à utiliser les services de santé, ce qui peut avoir des effets néfastes sur leur santé. Objectifs: Synthétiser l’état des connaissances sur les caractéristiques des milieux de soins inclusifs pour les aînés LGBTQ+ et les stratégies contribuant à soutenir leur inclusion au sein des milieux de soins. Méthodes: Un examen de la portée a été réalisé à l’aide d’une recherche par mots clés dans cinq bases de données bibliographiques en fonction de critères définis par des experts œuvrant auprès des aînés et dans le domaine de la diversité sexuelle. Résultats: Treize études ont été retenues. Les résultats montrent le rôle important de l’environnement pour favoriser le sentiment d’inclusion et de sécurité des aînés LGBTQ+ en contexte de soins. Les éléments saillants des études sont la présence de personnel faisant preuve d’ouverture et utilisant un langage inclusif, d’opportunités de développement des compétences en matière de diversité sexuelle et de politiques antidiscriminatoires au sein de l’institution. Conclusion: Plusieurs facteurs environnementaux doivent être ciblés pour rendre les milieux de soins inclusifs envers les aînés LGBTQ+ et ainsi optimiser la qualité des soins qui leur sont dispensés. Ces facteurs peuvent également guider les ergothérapeutes soucieux d’atténuer les iniquités de santé vécues par les populations LGBTQ+ par le biais d’interventions systémiques.

**Key words | Mots clés**: Pratique fondée sur les faits scientifiques, Justice occupationnelle

**Mad, mentally ill and neurodivergent professionals: Occupational injustice in practice**

Thursday: 1:00 PM-1:25 PM **Room | Location**: 102

**OS Paper presentation**: Non-specific | Professional issues/Practice

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Introduction: In addition to fields of practice, the professions are arenas of intellect, of the mind. They lay claim to particular domains of knowledge and expertise, while privileging specific ways of thinking
and doing. This limits space within the professions for the strengths of those who identify as mad, mentally ill and/or neurodivergent (MMIND). Differences of the mind (the MMIND) may appear particularly threatening to the professions. Objectives: This paper explores the experiences of professionals from occupational therapy, nursing, medicine, social work and academia who self-identify as MMIND, analyzing their experiences through the lens of occupational injustice. Methods: Eleven professionals from across Canada participated in in-depth qualitative interviews (in-person or telephone), which were transcribed and analyzed using reflexive thematic analysis. Findings: MMIND professionals were compelled to engage in extensive invisible labour to navigate the politics of disclosure. Disclosure risked undermining professional identity, as MMIND identity was constructed as incompatible with professional capability. The constant threat to credibility is examined as a form of epistemic injustice, specifically testimonial injustice. Conclusions: The disciplining of professionals toward conformity with narrow and rigid conceptualizations of capability constitutes occupational injustice for those who identify as MMIND, imposing on them unwanted occupational contortions, while negatively shaping the meaning of everyday work occupations through risk of marginalization and loss of professional credibility.

Key words | Mots clés : Occupational justice, Occupational science

Pursuing inclusive childcare: The invisible work mothers do
Thursday: 1:00 PM-1:25 PM Room | Location: 106
OS Paper presentation: Children and youth | Equity & Justice
Colleen Diggins (IWK Health and Dalhousie University, Halifax) cdiggins@dal.ca Shanon Phelan (Dalhousie University) shanon.phelan@dal.ca

Introduction: Mothers of children experiencing disability do invisible work to access inclusive early learning and childcare. This extensive work is not paid or valued, but crucial for children to attend inclusive early learning and childcare settings and to keep family life running. Objective: This research aims to illuminate the invisible work mothers of pre-school aged children experiencing disability do in pursuit of inclusive early learning and childcare. Methods: Using an occupational perspective (Njelesani et al., 2012), drawing on theoretical constructs of invisible work and the ‘good mother’, this interpretive secondary analysis explored the question: What kinds of invisible work do mothers of children who experience disability do in pursuit of inclusive early learning and childcare? Semi-structured interviews of 16 mothers pursuing inclusive early learning and childcare for their children experiencing disability were analyzed using Braun and Clarke’s (2022) method of thematic analysis. Findings: Data analysis resulted in the development of five themes: 1/ the Navigator, 2/ the Quilter, 3/ the Fighter, 4/ the Juggler, and 5/ the Keeper. Two key influences that shaped the mothers’ invisible work, and the occupational roles demanded of them, were the ‘good mother’ ideology and systemic ableism. Conclusion: The invisible work of mothers is a response to systemic inequities and ableism in early learning and childcare settings for children experiencing disability and their families. Implications for occupational scientists and healthcare and early childhood education professionals will be discussed as well as policy-based recommendations to inform emerging inclusion frameworks for universal childcare.

Key words | Mots clés : Equity & Justice, Occupational science

Becoming-land: Re-thinking nature based occupational therapy
Thursday: 1:00 PM-1:25 PM Room | Location: 107
Paper presentation: Non-specific | Equity & Justice
Introduction: In the Global North, occupational therapy models and theories have been embedded in anthropocentric views that perceive the person and their occupations as distinct from their environment. Responding to the ecological crisis, these views are reflected in efforts to “save the planet” or to promote access to nature as a ‘therapeutic’ means for individual growth and restoration. Objectives: The aim of this paper is to critically appraise dominant models and theories underlying the development of nature-based initiatives in occupational therapy. Resisting anthropocentric views, we propose an alternative process of ‘becoming-land’ as it applies to our discipline. Approach: Drawing on Deleuze and Guattari’s theory of becoming and Coulthard’s theory of recognition, we articulate a process of (un)becoming in the context of land occupation (becoming-land) and use these theoretical lenses to examine ‘nature-based’ (occupational) therapies. Results: By co-opting and bio-medicalizing Indigenous worldviews, ‘nature prescriptions’ and nature-based ‘therapies’ risk appropriating and privatizing land access, thereby doing more harm than good. Becoming-land disrupts binary divisions of person and environment by recognizing that humans ‘become-land’ throughout their existence and that this existence as a whole is threatened by the ecological crisis. Rather than prescribing nature to meet humans’ needs, ‘becoming-land’ means occupying land in ways that are respectful, reciprocal and that promote collective healing. Conclusion: Current efforts to ‘de-colonize’ occupational therapy must simultaneously challenge humans’ relationship to the land. Re-orienting power toward Indigenous Peoples beyond mere ‘land acknowledgements’, occupational therapists are invited to challenge their models and theories to ultimately support ‘land back’.

Key words | Mots clés : Equity & Justice, Theory

Developing and refining an occupational therapy rehabilitation reconditioning program guideline.

Thursday: 1:00 PM-1:25 PM Room | Location: 108

OS Paper presentation: Adult | Acute conditions

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Introduction: Hospitalisation increases patient susceptibility to hospital associated deconditioning. The number of patients deconditioned increased dramatically during the global pandemic, however occupational therapy input to reconditioning programs is unclear. Deconditioning is linked to decreased occupational performance, the ability to engage in meaningful occupations and increased occupational disruption. Research examining occupational therapy program guideline development and routine care for hospital associated deconditioning is limited. Objective: The primary objective of this study was to develop and explore the feasibility of implementing an occupational therapy reconditioning program guideline for hospital associated deconditioning. Methods: A qualitative feasibility study was conducted at two tertiary health service hospitals using a two-step sequential method. Firstly, using the AGREE reporting checklist, an occupational therapy reconditioning program guideline was developed through clinical input and a systematic literature review. Secondly, qualitative data on feasibility factors concerning implementation were collected from occupational therapist participants during two focus groups. Data were analysed using a hybrid approach of inductive and deductive thematic analysis. Results: Ten participants collectively participated in two focus groups at tertiary health service centres in
This met our prior retention criteria for success. Focus group discussion was transcribed verbatim to facilitate thematic data analysis, coding, and interpretation. Themes identified were assets, patient related factors, workplace culture, communication, environmental factors, barriers, and ideas for implementation. Conclusion: While the guideline was perceived as feasible, minor refinement is recommended to follow the patient journey from acute care, rehabilitation, and community discharge. A script to explain the occupational therapy role in reconditioning programs was also suggested.

**Key words | Mots clés :** Acute care, Evidence-based practice

**Everyday moments of leisure: Occupations "in between"**
Thursday: 1:00 PM-1:25 PM Room | Location: C5- Video portion on Poster 6

**OS Paper presentation:** Community/Population | Health and well-being
Karen Gallant (Dalhousie University, Halifax) karen.gallant@dal.ca Heidi Lauckner (Dalhousie University) heidi.lauckner@dal.ca Stephanie Mason (Brock University) smason3@brocku.ca Brittany Bhatnagar (Dalhousie University) b.bhatnagar@dal.ca Ashlyn Stevens (Dalhousie University) ashlyn.stevens@dal.ca Rien Alexander robyn.moran@uwaterloo.ca Nicole Leroy nicole.leroy@usask.ca Susan Hutchinson Dalhousie University susan.hutchinson@dal.ca

Introduction: Fleeting experiences of leisure in the context of routine activities, such as pausing to watch a sunset out the kitchen window, are common in the context of everyday lives. This presentation draws attention to such experiences, introducing the concept of everyday moments of leisure (EML), defined as subjectively-defined and noticed enjoyable, personally-resonant momentary experiences that occur within ordinary places and activities. Rooted in phenomenological research, this presentation considers the roles such moments play in peoples’ lives. Session objectives: (a) To introduce participants to the concept of EML, including defining characteristics; (2) To encourage participants to consider EML and the meaning such moments hold, in the context of their own lives; and (3) To provide space for discussion about how EML and momentary occupations have the potential to impact well-being. Session description: This presentation draws on a phenomenological study involving 20 participants who were invited to engage in up to three interviews focusing on their perceptions and experiences of EML. Findings of this study were shared through an art exhibit at a contemporary arts festival. The exhibit was comprised of five full-scale everyday scenes, including a curtained window from the inside of a home, and a kitchen island where a tea pot is warming. Each model was adorned with hand-written quotes from research participants about the roles that EML play in their lives. Some of the models will be displayed at this conference session, and attendees’ personal experiences of the exhibit will be used as a foundation for introducing the concept of EML and exploring the relevance of this concept to occupational science. Practice implications: Findings of this research suggest that people find value, benefit, meaning, and enjoyment in EML, suggesting potentially overlooked opportunities for understanding linkages between brief everyday moments and wellness. Conclusion: Although fleeting and seemingly insignificant, we suggest that noticing short-duration leisure experiences may offer an important avenue for experiencing leisure in the context of everyday lives.

**Key words | Mots clés :** Mental health, Occupational science

**Intraprofessional collaboration preparation in Ontario: An environmental scan**
Thursday: 1:00 PM-1:25 PM Room | Location: Poster 1

**Poster presentation:** Non-specific | Fieldwork/Education

CAOT Conference 2024: Hybrid | Le Congrès l’ACE 2024: Hybride May 1-3 mai
introduction: Due to a shortage of occupational therapists (OTs) in Canada, occupational therapist assistants (OTAs) are increasingly relied upon to deliver occupational therapy. Effective OT-OTA intraprofessional collaboration (IntraPC) is crucial to provide safe and efficient services. objectives: To identify the current state of OT-OTA IntraPC preparation in Ontario using an environmental scan. to support OT-OTA IntraPC preparation in Canada. methods: Using an explanatory sequential mixed methods approach, a survey was conducted with Ontario educators from OT and OTA programs, followed by focus groups with OT and OTA educators and recent OT and OTA graduates to explore current needs and recommendations to support OT-OTA IntraPC preparation. Survey data were analyzed using SPSS, and focus group data were analyzed thematically. findings: The environmental scan revealed the importance of OT and OTA collaboration to deliver optimal and safe occupational therapy services in Canada. The educator survey (n=45) identified a need to increase OT-OTA IntraPC preparation with easy-to-use online resources. In addition to online resources, focus group participants (n=29) recommended advocacy and real-world interactions over time. conclusion: Optimal preparation for OT-OTA IntraPC supports occupational therapy delivery and requires deliberate effort, advocacy, support, ready-made resources, and a scaffolded process, which includes real-world clinical contact.

**Key words | Mots clés**: Interprofessional, Teaching/education

**A new patient-reported outcome measure to tailor self-management support**

**Thursday: 1:00 PM-1:25 PM Room | Location: Poster 2**

**Poster presentation**: Adult | Chronic conditions

**Tanya Packer** (Dalhousie University, Halifax) tanya.packer@dal.ca **George Kephart** (Dalhousie University) george.kephart@dal.ca **Asa Audulv** (Umea University, Sweden) asa.audulv@umu.se **Ingrid Olsson** (Umea University, Sweden) ingrid.olsson@umu.se **Yu-Ting Chen** (National Cheng Kung University, Taiwan) ytc@gs.ncku.edu.tw

Introduction: Managing everyday life with a neurological condition includes a wide range of self-management strategies that interact and change over time. Though common strategies are known, time since diagnosis, disease trajectory and aging create an ongoing and evolving need to tailor self-management interventions. Using the seven domains of self-management articulated in the Taxonomy of Everyday Self-management Strategies (TEDSS), a new patient reported outcome has been developed to pinpoint client strengths and difficulties. Objectives: To describe the development of the PRISM-CC and its application to occupational therapy practice. Methods: Based on the TEDSS framework and following the phased COSMIN Study Design for Patient-Reported Outcomes, 231 potential items were generated, then assessed for relevance and understanding using cognitive interviews (n=40 people with chronic conditions). Data on the 100 retained items (n=1,214 people) was subjected to confirmatory factor analysis (CFA) and item response theory (IRT) models to inform final item selection, scaling, and assessment of construct validity of the PRISM-CC. Results: The final PRISM-CC consists of thirty-six items (4–8 items per domain). Domain scores indicate client difficulty by domain on a scale from “unable to do” to “done very easily”. The data provided excellent fit to our hypothesized correlated factors CFA model and corresponding multidimensional IRT graded response model. Testing of a-priori hypotheses provided evidence of construct validity. Practice implications: As client-centred practitioners, occupational therapists can now tailor their self-management support based on client self-reported
difficulties. Focused on daily strategies needed to live well, PRISM-CC is highly compatible with occupational therapy practice.

**Key words | Mots clés**: Assessments, Evidence-based practice

**Power-up mobility: Social participation and well-being of children**
Thursday: 1:00 PM-1:25 PM  **Room | Location**: Poster 3
**Poster presentation**: Children and youth | Technology
_Dena Stitz (Rehabilitation Centre for Children, Winnipeg) dstitz@rcinc.ca_  _Jacquie Ripat Elizabeth Hammond Shea Hunt Minoo Dabiri Gabriella Masi Natalie Friesen_

Introduction: Power Mobility Devices (PMDs) provide children with physical disabilities the opportunity to enhance their mobility and explore their environment. While the mobility impact of PMDs is known, less is understood about the value of PMD on social participation. Objectives: To understand the social participation experiences of children who are first-time users of PMDs and are transitioning from dependent to independent wheelchair use. Methods: We used a mixed-method longitudinal case-study design, recruiting five children, their families, and their teachers. Interviews with children and families were conducted before receiving their PMDs and at 3 and 6 months post-PMD receipt. Teacher interviews were held 3-6 months post-PMD receipt. Two outcome measures, the Wheelchair Outcome Measure for Young People and the Children’s Psychosocial Impact of Assistive Devices, were administered. Qualitative data underwent thematic content analysis, and quantitative data was subjected to non-parametric statistical analysis. Results: Analysis of one complete dataset highlighted three time points: “reflecting on the past,” noting anticipated social and personal benefits and technical concerns; “living the present,” where social and environmental aspects intersected with a realistic understanding of PMD features; and “dreaming about the future,” where social and personal benefits were embraced. Outcome measures showed increasing child satisfaction, competency, adaptability and self-esteem over time. Data collection and analysis for four children continues. Conclusion: Social participation was facilitated by adequate training and mastery of the PMD over time. PMDs appear to play a pivotal role in fostering positive social participation for the participants throughout their journey.

**Key words | Mots clés**: Assistive devices, Seating

**How do young people facilitate their participation in meaningful occupations?**
Thursday: 1:00 PM-1:25 PM  **Room | Location**: Poster 4
**Poster presentation**: Adult | Health and well-being
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Introduction: Knowledge on strategies used by young people to promote their participation in meaningful occupations is scarce. Objectives: This study aimed to identify and explore similarities and differences in participation strategies reported by young people with and without physical disabilities. Methods: In this qualitative descriptive study, 106 participants aged 12-30 (ᵦ=22.7) with (n=52) and without (n=54) physical disabilities matched by age and sex completed the Youth, young-adult Participation and Environment Measure (Y-PEM). Participants reported up to three strategies they used
to support their participation in four environments: at home, in the school/educational setting, the community, and the workplace. Inductive content analysis was performed. Results: Overall, 1235 strategies were analyzed, and eleven categories were identified. Seven categories focused on the environment (e.g., cultivating an optimal physical environment, making use of available resources). Both groups implemented time-management strategies, built on intrinsic factors (e.g., making choices, staying motivated), and utilized social supports to facilitate their participation across all settings. In the educational setting, benefiting from an accommodative institutional environment (e.g., requesting accommodations, seeking resources) was a strategy category unique to young people with disabilities. This group also reported more strategies related to advocacy, analyzing a situation, and benefiting from an accommodating physical and social environment. Conclusion: While some similar strategy categories were observed, young people with disabilities implemented a wider variety of actions to facilitate their occupational participation. Findings can assist both youth and occupational therapists as they co-develop an intervention plan to enhance participation and inclusion across different contexts.

**Key words | Mots clés :** Evidence-based practice, Occupational science

**Long covid factors associated with decrease in employment status**

Thursday: 1:00 PM-1:25 PM Room | Location: Poster 5

**Poster presentation: Adult | Work and return to work**

*Marie-An Hoang (McGill University, Montreal) marie-an.hoang@mail.mcgill.ca Farah Jaber (Université de Sherbrooke) farah.jaber@usherbrooke.ca Debbie Feldman (Université de Montréal) debbie.feldman@umontreal.ca Sara Saunders (McGill University) sara.saunders@mcgill.ca Barbara Mazer (McGill University) barbara.mazer@mcgill.ca*

Introduction: Long covid symptoms are known to have an impact on function, however, their effect on employment and the associated demographic and clinical factors are not well understood. Objectives: (1) To compare changes in employment between those with long covid and those who recovered from their covid-19 infection; and (2) To identify demographic factors, clinical factors, and type of occupations associated with decreased employment status in those with long covid. Methods: We conducted an electronic survey (≥12 weeks post infection) with adult residents in Laval, Quebec, who tested positive for covid-19 between March 2020 and January 2022, regarding long covid symptoms and its functional impact. This analysis focuses on employment status: pre-covid, prior to infection, and current, and was recorded as full-time, part-time, not working due to illness, or not working for other reasons. Change in employment status was categorized as no decrease or decreased. Results: Among 2764 respondents, 15.6% with long covid (versus 5.4% who recovered) experienced a decrease in employment (p<0.001). Clinical factors associated with a decrease in employment include having been hospitalized for covid-19, having >1 comorbid condition, >12 months since infection, moderate to severe decline in physical and psychological symptoms, and decline in global health. Sociodemographic factors and occupational skill level were not associated with a change in employment. Conclusions: Persons with long covid are more likely to experience a decrease in employment. Research is needed to determine whether rehabilitation for people with long covid could improve employment levels.

**Key words | Mots clés :** COVID, return-to-work

**Future Strategies from the World Federation of Occupational Therapists (WFOT)**

Thursday: 1:00 PM-2:00 PM Room | Location: 103
 WFOT Sponsored Session: Not applicable | Advocacy /Leadership
Paulette Guitard

The World Federation of Occupational Therapists promotes occupational therapy as an art and science internationally. It works with national and regional occupational associations as well as other international partners to effect change and advocate for occupational therapy. This presentation will provide an overview of WFOT's current key projects, latest global human resources data and highlights from the latest WFOT Council Meeting in February 2024. There will also be opportunity for discussion related to occupational therapy education, practice and research globally.

Canadian simulation guideline development in OT academic and fieldwork education
Thursday: 1:00 PM-2:00 PM Room | Location: 104
Extended discussion: Not applicable | Fieldwork/Education
Diane MacKenzie (Dalhousie University, Halifax) diane.mackenzie@dal.ca Marie-Eve Bolduc (McGill University) marie-eve.bolduc@mcgill.ca Kaitlin Sibbald (Dalhousie University) kaitlin.sibbald@dal.ca Mary Roduta Roberts (University of Alberta) mroberts@ualberta.ca Rose Martini (University of Ottawa) rose.martini@uottawa.ca Nancy Forget (McGill University) nancy.forget@mcgill.ca Jacinthe Savard (University of Ottawa) jsavard@uottawa.ca Barbara Shankland (McGill University) barbara.shankland@mail.mcgill.ca Chantal Morin (Université de Sherbrooke) chantal.morin@usherbrooke.ca Lisa McCorquodale (Western University) lmccorq@uwo.ca Anne Hunt anne.hunt@utoronto.ca Jonathan Harris jonathan.harris@dal.ca Shone Joos s.joos@utoronto.ca and Helene Tremblay helene.h.tremblay@usherbrooke.ca

Introduction: Simulated patient encounters are employed to develop and assess occupational therapy students’ clinical skills. Simulation allows students to apply their assessment, communication, professional reasoning, collaboration, and practical skills. Because of these features, simulations are increasingly being used to help prepare students for the complexities of practice. Many occupational therapy (OT) programs across Canada use simulation. Healthcare best practices simulation guidelines are available (e.g., INACSL), but do not address specific OT competencies. Specifically for OT programs, guidelines have been developed in other countries (e.g., Occupational Therapy Council of Australia, 2020), but no guidelines exist for Canadian OT programs and their particular contexts. In May 2023, a national ACOTUP adhoc group was formed to develop Canadian simulation guidelines for OT education. This research project aims to synthesize and adapt current evidence for the use of simulation to the Canadian OT context. Objectives: Participants in this session will i) learn about the state of the evidence for the use of simulation that will inform and guide the development of simulation guidelines for Canadian occupational therapy; ii) brainstorm about the contextual factors that are specific to OT in Canada; iii) discuss the potential of simulation for developing competencies in OT (COTC, 2021); iv) generate ideas about the type of information that should be included in the future guidelines. Session Description: This extended session will use a collaborative learning approach where presenters will first provide an overview of the latest evidence on simulation together with the key scoping review findings. Small group facilitated discussions will focus on generating collective knowledge about simulation in the Canadian context to inform simulation guideline development. Practice Implications: Participants will understand the different ways simulations are currently used in health care professions, including occupational therapy education, in different parts of the world. In addition, participants will co-construct their understanding of the challenges and opportunities for potential simulation use in education, fieldwork, and post-licensure practice in Canada. Conclusions: This session will serve to share
evidence as well as co-create knowledge to inform the development of the Canadian OT simulation guidelines for competency development in academic and fieldwork education.

**Key words | Mots clés**: Evidence-based practice, Teaching/education

**Climate Change & Sustainable Occupations**
Thursday: 1:00 PM-2:00 PM  Room | Location: 101

**Conversations that matter**: Not applicable

*Ben Mortenson, Janet Craik, Jeff Boniface, Nicola Schaan (Professional Practice)*

Discussion on the topic of climate change, planetary health and sustainable occupations

**Meeting the Mental Health Needs of Canadians- OT in 2034**
Thursday: 1:00 PM-3:40 PM  Room | Location: 109

**Professional Issue Forum**: |

*Skye Barbic The University of British Columbia, Stephanie Bizzeth (Office of Addictions and Mental Health) Stephanie.Bizzeth@dal.ca, Michelle Ferguson Chair of CAOT Mental Health & Substance Use Practice Network mferguson.ot@gmail.com, Fizza Jafry (McGill University) Fizza.jafry@mcgill.ca, Kim Hewitt-McVicker Master University hewittkm@mcmaster.ca, Niki Kiepek Dalhousie University, Carrie Anne Marshall Director of the Social Justice in Mental Health Research Lab, Western University carrie.marshall@uwo.ca*

Mental health is a component of all aspects of lived experience and of holistic occupational therapy. This year, we have brought together a five-person panel of Canadian occupational therapists committed to the promotion of mental health practice and research in diverse practice areas to discuss where the profession needs to be ten years from now and explore potential tools to help us get there. This year’s PIF builds on a well-established foundation of the occupational therapist’s role in supporting individual mental health to envisioning systems level transformations. Panelists and attendees will take time to explore our history, examine the mental health curricula and professional development opportunities, discuss the importance of fully engaging the occupational therapy scope within the current healthcare system and leadership roles, and explore responsibilities of individual occupational therapists and provincial and national organizations to work towards a unified identity.

**Teaching self-regulation through a sensory enhanced and trauma sensitive approach**
Thursday: 1:35 PM-2:00 PM  Room | Location: 102

**Paper presentation**: Children and youth  |  Health and well-being

*Alex Thompson (Power for All Charity, Abbotsford) powerforallats@gmail.com*

Introduction: Shanker stated that “the ability to self-regulate—to strategically modulate one’s emotional reactions or states to be more effective at coping and engaging with the environment is a critical aspect of human development” (Shanker & Barker, 2016). While many individuals can develop self-regulatory skills on their own, either by trial and error or by observing others (Bandura, 1999), many others have significant difficulties in developing these skills. Innovation: By examining principles of universal design, Polyvagal theory, the Neurosequential network, and sensory-enhanced movement, practitioners can facilitate clients’ learning of self-regulation skills (CAST, 2022; Porges, n.d.; Perry & Winfrey, 2021; Stroller, 2019). Approach: This successful approach to teaching self-regulation seeks to provide sufficient alternatives to support learners’ meaningful occupational participation in all kinds of contexts. A range
of learning activities and discussions will be used to support participants in learning and experiencing evidence-based techniques to teach self-regulation. Learning objectives: 1. Understand and apply relevant principles of Universal Design for Learning, Polyvagal theory, the Neurosequential network, Interoception, and sensory-enhanced movement to the development of self-regulation skills. 2. Utilize a variety of evidence-based techniques for teaching self-regulation to children and adolescents.

Conclusion: This experiential workshop will expand occupational therapy professionals’ knowledge of theories and techniques related to school health, well-being, and sensory integration that can have a positive impact on teaching self-regulation to children and adolescents.

Key words | Mots clés : School health, Sensory integration

The challenge of collective occupations in a context of exclusion
Thursday: 1:35 PM-2:00 PM Room | Location: 106
OS Paper presentation: Not applicable | Equity & Justice
Suzanne Huot (University of British Columbia, Vancouver) suzanne.huot@ubc.ca Anne-Cécile Delaisse (University of British Columbia) Delaisse.ac@hotmail.fr

Introduction: Increasing federal policy emphasis on Francophone immigration over the past two decades has led to rapidly diversifying Francophone minority communities (FMCs) across the country where discourses of ‘successful integration’ are prioritized. Newcomers are expected to engage in occupations contributing to economic productivity and social participation in FMCs. Objectives: To critically explore how increasing demographic diversity within FMCs is influencing community cohesion. We specifically examined processes of inclusion and exclusion within Francophone spaces to understand the dynamics shaping community members’ engagement in collective occupations. Methods: Critical ethnography in a metropolitan area adopting 4 methods: Critical discourse analysis of 88 documents produced by national governmental and non-governmental stakeholders pertaining to Francophone immigration and FMCs. Key informant interviews with representatives from two national stakeholders and 11 provincial/community organizations. In-depth interviews and occupational mapping with 24 community members (12 born in Canada, 12 born abroad). Findings: Analysis identified three key dimensions shaping collective occupations and community cohesion: a) forms of socio-spatial separation within the community; b) discursive and symbolic exclusion practices; and c) reliance on formal institutions and spaces for official language minority community recognition. Analysis was informed by our theoretical framework drawing on transactionalism and intersectionality to understand how occupations are situated within systems of power and oppression. We will outline the challenges identified in supporting collective occupations in a context of exclusion and point toward strategies that can mitigate these.

Conclusions: Dynamic communities must be responsive to the needs of their members and ensure opportunities for meaningful occupational engagement are equitably developed and supported.

Key words | Mots clés : Community development, Occupational science

Intersectionality and occupational therapy: a scoping review
Thursday: 1:35 PM-2:00 PM Room | Location: 107
Paper presentation: Non-specific | Equity & Justice
Stefanie Wiens (University of Manitoba, Winnipeg) wienss@myumanitoba.ca Gayle Restall (University of Manitoba) gayle.restall@umanitoba.ca
Introduction:Intersectionality describes the various social locations a person occupies as inextricably intersected, and constantly interacting with each other and the systems and power structures that provide the context in which a person lives. Reflecting on Gerlach’s (2015) call for occupational therapists to ‘sharpen our critical edge’ through greater intersectional analysis, this scoping review explores how intersectionality is considered in occupational therapy and occupational science literature.

Objectives: To map and examine the range and nature of research and theoretical writing on occupational therapy and intersectionality.

Methods: Following Arksey & O’Malley’s framework (2005), four databases —CINAHL, Scopus, Ovid Medline and APA PsycInfo— were searched for the terms occupational therap* OR occupational science AND intersectional* OR black feminism OR black feminist theory, with an augmentative search of the grey literature. Sixteen articles met the inclusion criteria.

Data was mapped and synthesized. Findings: Literature focusing on occupational therapy and intersectionality is in a period of exponential growth with 13 of the 16 articles published since 2021. There has been a recent shift from theoretical discussion of intersectionality in this literature, to inclusion of original research. Observation of intersectionality as a phenomenon is a more common use of intersectionality in research articles compared to its use as a paradigm or analytical approach.

Practice Implications: Moving beyond observing intersectionality in research studies to embedding it as an analytical approach is an important step for occupational therapists, scientists, and educators to better understand the impact of intersecting identities on receiving and delivering occupational therapy and on people’s participation in valued occupations.

Key words | Mots clés: Occupational justice, Theory

Harnessing the power of groups for your occupational therapy practice
Thursday: 1:35 PM-2:00 PM  Room | Location: 108

Paper presentation: Adult | Acute conditions

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Background: It has been shown that group therapy can help decrease wait times, optimize limited human resources, as well as facilitate support and learning from peers. Practice issue: A neurological outpatient service was struggling to meet the diverse occupational therapy (OT) needs of a large client base due to significant staff shortages. This led to rethinking how the site’s OT services were delivered.

Approach: The occupational therapy team identified the common themes seen in referrals. Investigative work was done to access existing groups from a variety of sources. New groups were also developed in order to meet common occupational participation issues. Trials of the groups were run and feedback was gathered from group participants. Learning objectives: Attendees will: 1) be exposed to a variety of occupational therapy groups addressing either physical or cognitive challenges 2) hear about how groups have allowed for expanded exposure to therapy activities and increased intensity of therapy in an outpatient OT rehabilitation setting 3) have an opportunity to reflect on ideas for groups that attendees may be able to implement in their own practices. Practice implications: Investing time at the outset to develop OT groups will save clinicians time in the end, help clients achieve their goals, and be a lot of fun to run. So get ‘All Hands on Deck’ to run that ‘Brain Bootcamp’ and reap the rewards!

Key words | Mots clés: Brain injury, Multiple sclerosis

Are we preparing students for culturally safe practices? Faculty perspectives
Thursday: 1:35 PM-2:00 PM  Room | Location: Poster 1

CAOT Conference 2024: Hybrid | Le Congrès l’ACE 2024: Hybride  May 1-3 mai
Introduction: Research with Canadian occupational therapists (OTs) who work with Indigenous Peoples have revealed that they do not feel prepared to complete assessments with them in culturally safe ways. The need for additional education on Indigenous cultural safety curriculum is an essential component of OT’s ability to work safely with Indigenous Peoples (Bauer et al, 2022). Objectives: This study’s objective is to explore the current OT curriculum across Canada, focusing on Indigenous cultural safety education and assessment administration to better understand what is being taught.

Methods: We invited faculty members who are involved in Indigenous cultural safety and assessments curriculum from Canadian OT programs to participate in an online survey and group interviews. We will use thematic data analysis to code the interviews and open ended survey questions. This will allow us to scan for patterns of themes across the data (Braun & Clarke, 2006). Data collection is currently underway. Findings: We anticipate that the survey and group interviews will reveal varying levels of inclusion of content related to culturally safer assessment practices with Indigenous Peoples. We expect to elucidate common barriers and best practices that faculty experience.

Conclusion: For Canadian OTs to work safely and effectively with Indigenous Peoples, changes to the current educational system must be addressed. (Bauer et al., 2022). Findings will help provide a foundation for how to better work in partnership with Indigenous Peoples while also creating a culturally safe environment, through examining issues within Canadian OT programs.

Key words | Mots clés : Equity & Justice, Teaching/education

Opportunities, resources and supports influencing adaptation to traumatic brain injury

Objectives: To understand how opportunities, resources, and support in one’s environment influence resiliency in the context of TBI. Introduction: Individuals with traumatic brain injury (TBI) experience significant occupational changes with both challenging (e.g., role loss) and positive experiences (e.g., more time with family). Resiliency (adaptive processes involved in 'bouncing back' from adversity) can explain how individuals respond to occupational challenges/loss and is linked to positive outcomes following TBI, including life satisfaction, and well-being. Most resiliency research has considered personal factors (e.g., self-efficacy, adaptability) however less is known about how one’s environment influences resiliency.

Methods: Using hand mapping methodology, 8 Ontarian adults who were over 3 years post-TBI completed an in-depth interview and hand map (visual representation of key experiences and resources that cultivated resiliency). This exploration involves the concurrent analysis of visual data in the form of maps and interview transcripts through a reflexive thematic analysis approach: Both visual and narrative data will undergo multiple rounds of review, coding by several team members, and additional analysis through group discussions and concept mapping to uncover underlying themes.

Results: Themes will explore how aspects of one’s context either added to the ‘risk’ or experienced adversity following TBI and/or enabled individuals to adapt to challenges arising in their life following...
their injury. Conclusions: Determining the environmental factors that enable resiliency in TBI will address a key knowledge gap, further illuminating the contextualized nature of resiliency. This knowledge will open-up possibilities for occupational therapists to influence resiliency through services that target or modify environments.

**Key words | Mots clés:** Brain injury, Models

**Technology's role in children with physical disabilities’ play: Scoping review**

Thursday: 1:35 PM-2:00 PM  
**Room | Location:** Poster 3

**Poster presentation:** Children and youth | Technology  
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Introduction: Play is a fundamental component of child development and an inherent human right. Yet, children with physical disabilities (CWPD) often encounter limitations in their play. This scoping review aims to explore the role of Assistive Technology (AT) in enabling play for CWPD. Methods: We conducted a scoping review following the guidelines of Arksey and O'Malley. Our literature search encompassed the period January 2000 to March 2022, involving the MEDLINE, Central, CINAHL, ERIC, Scopus, and EMBASE databases. Three reviewers screened titles, abstracts, and full-text articles using an online systematic review platform. Data extraction and categorization were performed in Microsoft Excel, focusing on AT types, play categories, and levels of supporting evidence. Findings: After eliminating duplicate studies, 5,250 papers entered the title and abstract screening. Fifty-eight studies were selected for full-text review, with 31 included in the final analysis. These studies identified seven types of AT used to support play for CWPD, including power mobility, virtual reality, robotics, upper limb adaptations, switch-adapted games, augmentative and alternative communication devices, and mobility aids. These studies explored cognitive (n = 23) or social (n = 7) aspects of play, with one study addressing both. The selected studies were predominantly case studies, descriptive or experimental. Conclusion: This review underscores the limited empirical evidence supporting the use of AT to facilitate play for CWPD. Given the profound significance of play in a child's life and the ongoing advancements in AT, further research and development are essential to address this knowledge gap.

**Key words | Mots clés:** Occupational justice, Technology

**Investigating pressure injury risk in individuals with darker skin tone**

Thursday: 1:35 PM-2:00 PM  
**Room | Location:** Poster 4

**Poster presentation:** Older Adult | Advocacy /Leadership  
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Introduction: Approximately 15.8% of individuals living in long-term care (LTC) homes in Western Canada have pressure injuries (PIs) (Woo & LeBlanc, 2018). Despite research in the United States showing there is a higher prevalence of stage 2-4 PIs in older adults with darker skin tones (Cox & Thomas Hawkins, 2023), there is little research studying these disparities in individuals living in Canadian LTC. Objectives: To investigate if individuals with darker skin tones living in Western Canadian LTC homes are at higher risk of developing stage 2-4 PIs. Methods: Given an estimate of 15.8% of LTC
individuals have PIs, a sample size of 45 is expected from the LTC homes recruited. Reeder et al. (2014) identify the Munsell Color Chart as a reliable and valid tool that we will use to visually assess skin tone, divided into three categories: light, medium, and dark. Pressure injury status will be collected from the Resident Assessment Instrument – Minimum Data Set. Data will be used to calculate the prevalence of stages 1 and 2-4 PIs in light, medium, and dark skin tone categories. Results: We hypothesize that there will be a higher prevalence of stage 2-4 PIs in individuals with medium and dark skin tones within the LTC population in Western Canada. Conclusions: If a higher prevalence is identified, this could lead to further research investigating the implementation of practice tools and education strategies to reduce this disparity and offer equitable, person-centred care to all people living in LTC.

Key words | Mots clés : Equity & Justice, Long term care

Grille évaluative de la durabilité d’un repas: adaptation québécoise

jeudi: 1:35 PM-2:00 PM Room | Location: Poster 5
Présentations par affiches: Non spécifique | L’environnement
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Key words | Mots clés : Équité et justice, Justice occupationnelle

Older adults’ sexual and gender diversity: Training future occupational therapists

Thursday: 1:35 PM-2:00 PM Room | Location: Poster 6
Poster presentation: Older Adult | Equity & Justice
Samuel Turcotte (Université Laval, Québec) samuel.turcotte@fmed.ulaval.ca Julien Rougerie (Fondation Émergence) Denis Cormier-Piché (Fondation Émergence) Nathalie Veillette (Université de Montréal) Johanne Filiatrault (Université de Montréal)

Introduction: LGBTQ+ older adults can be reluctant to use healthcare services, because they may perceive them as heterocis-normative or stigmatizing. Scientific literature suggests that a lack of training
about older adults’ sexual and gender diversity may contribute to the perpetuation of hetero- 
normativity within healthcare services. However, occupational therapy students report gaps in their 
training regarding sexual and gender diversity. Objectives: To explore the impact of a new training for 
occafessional therapy students about older adults’ sexual and gender diversity on: 1) knowledge about 
LGBTQ+ older adults’ realities and 2) self-efficacy related to two domains of occupational therapy core 
competencies. Methods: Sixty occupational therapy students participated in a single-group pre-post 
study. They attended a 2.5-hour training session on older adults’ sexual and gender diversity delivered 
by an expert from a non-profit community organization. Participants completed online questionnaires 
before and after the training. Data analysis included narrative synthesis, descriptive statistics, and paired 
t-tests. Results: The training resulted in a significant increase in participants' knowledge about the 
realities of LGBTQ+ older adults (p < 0.001) and self-efficacy related to two domains of occupational 
therapy competencies (communication and collaboration; p < 0.001 and culture, equity and justice; p < 
0.001). Most participants (97%) recommended that this training be integrated into all occupational 
therapy curriculums. High levels of satisfaction were expressed regarding the content, format, duration, 
and quality of the course delivery. Conclusion: Educating future occupational therapists about older 
adults’ sexual and gender diversity can contribute to the provision of more inclusive healthcare services 
for LGBTQ+ communities.

**Key words | Mots clés :** Equity & Justice, Teaching/education

**Adoption and implementation strategies of a telehealth falls prevention program**

Thursday: 2:10 PM-2:35 PM **Room | Location:** 102

**Paper presentation:** Older Adult | Health and well-being

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Introduction: A fall may impact a person’s physical, emotional, and psychological well-being. Fall 
prevention programs are being implemented to reduce these negative outcomes. A 10-week 
multifactorial (education, exercises, and discussions) telehealth fall prevention program was designed to 
increase access to such programs in French for francophone minority communities in Canada. 
Objectives: This capacity building project aimed to support community partners to deliver this telehealth 
program and document strategies used to adopt and implement the program. Methods: A sequential 
exploratory mixed methodology was used to document adoption and implementation strategies and 
describe lived experiences of program facilitators and organization representatives. Data were analysed 
using content analysis and the Consortium Framework Implementation Research (Damschroder et al., 
2009) more specifically guided the description of the lived experiences. Results: Twelve organization 
representatives or program facilitators from eight francophone organizations operating in four different 
provinces participated in the study. Adoption was influence by external context (eg., COVID-19 
outbreak), internal context (eg., organisation’s priorities), and capacity building (eg., support offered). 
Barriers and facilitators to implementation included the program facilitators’ level of preparation and 
time management, interpersonal relations and telepresence, exercise facilitation and safety, and 
technological problem-solving skills. With guidance from the program trainer, all program facilitators 
improved on these aspects from week 1 to 6. Conclusion: Using tailored reach, adoption and 
implementation strategies such as prioritizing provinces with higher proportions of needs and training 
local community program facilitators may lead to successful implementation of this new telehealth fall
Prevention program. Results from this study could potentially inform other telehealth program implementation.

**Key words | Mots clés**: Falls, Program evaluation

**Soutenir l’écoresponsabilité en ergothérapie: Réflexion philosophique sur certains postulats professionnels**

**jeudi: 2:10 PM-2:35 PM Room | Location: 106**

**OS Présentation orale (exposé)**: Non spécifique | Les questions générales/professionnelles – l’exercice de la profession

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Introduction: Plusieurs auteurs conviennent l’ergothérapeute à inclure l’écoresponsabilité à sa pratique. Ce faisant, ils l’invitent à: 1) diminuer l’empreinte écologique de sa pratique, voire du système de santé; 2) accompagner des personnes/organisations dans leur désir de diminuer leur empreinte écologique; et 3) soutenir des personnes/communautés dans leur adaptation aux changements climatiques. Bien que ces propositions soient pertinentes et que leur finalité soit justifiée considérant que la crise climatique constitue la plus grande menace contemporaine à la santé, il demeure difficile pour plusieurs ergothérapeutes d’adopter une pratique professionnelle écoresponsable. Objectif: Cette communication a pour objectif de mettre en lumière certains postulats au fondement de la profession qui constituent des obstacles potentiels à l’écoresponsabilité en ergothérapie. Méthodes: Une analyse philosophique du modèle personne-environnement-occupation a été réalisée. Les trois concepts centraux du modèle ont été analysés par l’entremise de la valeur qu’est l’écoresponsabilité et ses exigences pragmatiques. Résultats: L’écoresponsabilité requiert de l’ergothérapeute qu’il transige d’une approche individuelle centrée sur le client à une approche populationnelle, intergénérationnelle et interespèce centrée sur le vivant et les écosystèmes. Elle l’enjoint à abandonner une vision instrumentale et anthropocentrée de l’environnement pour adopter une vision intrinsèque et écocentrée de l’environnement. Elle l’amène aussi à avoir une vision plus nuancée (moins positive) de l’occupation. Conclusion: Bien que l’ergothérapeute ait le devoir éthique de contribuer à la lutte contre les changements climatiques, certains postulats au fondement de la profession se présentent comme de possibles obstacles à cette lutte. Mais l’écoresponsabilité a le potentiel de faire évoluer positivement la profession.

**Key words | Mots clés**: Théorie

**Takwascikewin: Putting it into practice with marginalized and Indigenous communities**

**Thursday: 2:10 PM-2:35 PM Room | Location: 107**

**Paper presentation**: Community/Population | Equity & Justice

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Introduction: The new Canadian Model of Occupational Participation challenges clinicians to reexamine the concepts of takwascikewin, collaboration and relationship focused therapy. Bias, systemic practices along with a Western, medical model of care can exclude people, including Indigenous individuals and marginalized communities. Practice Issue: Families in rural and remote communities face disproportionate barriers in accessing services that integrate both Western and Indigenous practices in
an inclusive environment. From past experiences and historical events, members of marginalized communities are reluctant to engage with healthcare personnel. Approach: The authors will facilitate learning through 1) Reviewing barriers to care for Indigenous and minority communities, communities from a historical perspective and current day, 2) Introducing a case study, an innovative, multidisciplinary team approach for a rural community, 3) Discussing strategies clinicians can utilize for a more inclusive environment 4) Identifying areas of everyday practice which can contribute to collaborative and positive relationships. The case study will highlight an ecological model used to minimize barriers to care with families, as well as increasing clinician and community capacity. Learning Objectives: This session will introduce barriers of care experienced by Indigenous and marginalized communities. Attendees will learn simple strategies to use within their practice to increase inclusivity. Practice Implications: Discussion of barriers and strategies for inclusion can promote critical reflexivity and thus support practitioners’ competence for more effective interventions within the new Canadian Model of Occupational Participation. Practitioners can be better prepared to challenge current beliefs to construct systems, policies, and attitudes which will allow collaboration and positive relationships for all individuals.

Key words | Mots clés : Community care, Equity & Justice

Deployment of expertise in context of disruption: A phenomenological study
Thursday: 2:10 PM-2:35 PM Room | Location: 108
Paper presentation: Not applicable | Professional issues/Practice
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Aliki Thomas (McGill et CRIR) aliki.thomas@mcgill.ca

Introduction: Practice context is known to influence the deployment of competencies. The COVID-19 pandemic created a major disruption in many practice contexts. Objectives: The objective was to understand the lived experience of physical rehabilitation clinicians, including occupational therapists (OTs), particularly regarding the deployment of professional expertise and other competencies during a time of disruption. Methods: We used a longitudinal phenomenological design. Eligible clinicians were occupational therapists, physiotherapists, physiotherapy technologists, speech-language pathologists and audiologists, working in the same physical rehabilitation workplace for at least two years prior to March 2020 (the pandemic). Clinicians who were reassigned to roles outside the field of rehabilitation were excluded. We conducted individual online interviews using a guide developed by the team with expertise and knowledge of the phenomenon. An interpretative phenomenological analysis was carried out. Results were discussed until consensus amongst the research team was achieved. Results: In total, 32 clinicians participated including twelve (37.5%) occupational therapists. A wide variety of emotions (e.g. anger, sadness, guilt, fear, pride) reflected clinicians lived experience during the disruption. Professional expertise was perceived as being enhanced by the disruption as clinicians were taken out of their comfort zone; this encouraged reflective practice and a recognition of the need to be more explicit about their decision-making process. Collaboration with colleagues was perceived as key for effective coping and deployment of adaptative expertise. Conclusions: A disruption in the practice context may have positive effects on professional expertise through the mobilization of reflective practice.

Key words | Mots clés : Clinical reasoning, Evidence-based practice
The influence of peer support on occupational therapists’ learning process
Thursday: 2:10 PM-2:35 PM Room | Location: Poster 1

Poster presentation: Not applicable | Fieldwork/Education
Emmanuelle Moreau (Université de Montréal, Montréal) emmanuelle.moreau@umontreal.ca Annie Rochette (Université de Montréal) annie.rochette@umontreal.ca Emmanuelle Poirier (Université de Montréal) emmanuelle.poirier.3@umontreal.ca Tania Deslauriers (Université de Montréal) tania.deslauriers@umontreal.ca Marie-Eve Caty (Universités du Québec à Trois-Rivières) marie-eve.caty@uqtr.ca Brigitte Vachon (Université de Montréal) brigitte.vachon@umontreal.ca

Introduction: To improve their practice, occupational therapists (OTs) often describe soliciting peer support (PS) as a source of feedback and information. This strategy has been described and evaluated before but no literature review synthesizing its different forms, the ways it is used and its outcomes has yet been published. Objectives: Document the scope of PS and their characteristics; describe the contexts in which PS is used; understand the impact of PS on OTs and their practice. Methods: A scoping review was carried out. Medline, Embase, CINAHL and grey literature databases were searched with no publication year limit. Studies were included if they were in English or French, if OTs formed at least 50% of the sample and if results described professional practice implications when using PS. Screening for eligibility was performed by two research team members. Data were charted systematically using an extraction grid developed specifically to meet the scoping review's objectives. Results: A total of 69 studies met inclusion criteria after screening 3506 abstracts. The year of publication ranged from 1985 to 2023. Articles were published in UK, Australia, USA, Canada, New Zealand, Brazil and South Africa. Various forms of PS were identified, from informal support to administrative supervision. In 58% of articles, the results concerned implications for OTs’ clinical practice, while 42% described the implication of PS in the context of program implementation or research-action processes. Conclusions: The preliminary results from this scoping review suggest that a wide variety of PS was used in clinical and research contexts having different implications for practice.

Key words | Mots clés : Clinical reasoning, Teaching/education

Evaluation of a flexible service aimed at building families’ capacities
Thursday: 2:10 PM-2:35 PM Room | Location: Poster 2

Poster presentation: Children and youth | Health and well-being
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Introduction: Interventions aimed at building parents’ capacity, such as coaching sessions and home programs, can generate positive outcomes for both children and their parents. Insufficient guidance is available regarding how to use them without adding pressure on parents. An occupational therapy service to build families’ capacities without overburdening them was developed and evaluated in a participatory action research project. It included a maximum of eight sessions. For each family, parents and therapists determined the modalities using a menu of services including virtual coaching, education, and interventions in natural settings with the child and their parents or educators. Objectives: Share the
outcomes and lessons learned in the evaluation of the service with seven families. Methods: Mixed methods were mobilized. The Canadian Occupational Performance Measure (Law et al., 2005) was used, as well as individual interviews with families and a group interview with occupational therapists. Results: While clinically significant outcomes on the child’s participation were found for all children, parents mostly highlighted the positive outcomes of the services for themselves. These included a better understanding of what helps their child and a greater confidence in their ability to help them in their daily routine. Findings suggest that the service was particularly effective in yielding concrete changes in families’ lives without overburdening them. The flexibility offered and the non-judgemental relationship with the therapist emerged as critical. Practice implications: It is hoped that attendees will have a new perspective on family-centered services and will then look at the tools developed using project findings.

Key words | Mots clés : Autism, Program evaluation

Psychosocial outcomes of therapeutic horseback riding for youth with disabilities
Thursday: 2:10 PM-2:35 PM Room | Location: Poster 3
Poster presentation: Children and youth | Mental health
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Introduction: Therapeutic horseback riding (THR) is a dynamic intervention aimed to increase the functionality and rehabilitative progression of participants using the rhythmic motions of a therapy horse. In Canada, THR is used as a community-based therapeutic intervention, commonly with pediatric populations. Existing literature on THR is largely focused on physical outcomes; however, the lived experiences and perceptions of psychosocial outcomes for youth riders and members that support them are notably underrepresented. Recent literature has deemed THR promising for managing mental health symptoms for youth riders and suggests positive impacts for confidence, coping, and quality of life (Saggers & Strachan, 2016). Objectives: To explore and understand the range and type of psychosocial outcomes of THR for youth riders with disabilities. Methods: The Joanna Briggs Institute scoping review methodology will be applied. A preliminary search has been completed with four electronic databases to identify studies encompassing youth rider’s perceptions of THR as it broadly relates to the psychosocial domain, including but not limited to well-being, mood, confidence, emotional regulation, resilience, and quality of life. Results: We anticipate the literature to reveal generally positive psychosocial outcomes for youth related to enhanced aspects of overall well-being, mental health, and quality of life. Our content analysis will also note possible unintended experiences and their contributing factors related to these outcomes. Conclusion: This scoping review may inform Occupational Therapy (OT) interventions, future programs, and resource utilization strategies, through exploring a growing field and bringing awareness to the psychosocial outcomes of THR for youth with disabilities.

Key words | Mots clés : Evidence-based practice, Mental health

Enhancing elderly balance and independence with task-oriented multisensory training (Pilot)
Thursday: 2:10 PM-2:35 PM Room | Location: Poster 5
Poster presentation: Older Adult | Health and well-being
Introduction: Maintaining balance and independence in daily activities is crucial for the well-being and quality of life of elderly (Seidler et al., 2010). However, age-related changes often lead to a decline in these abilities, coupled with the fear of falling. Task-oriented multisensory training has emerged as a potential intervention to address these challenges by targeting sensory problems and enhancing functional mobility (Park et al., 2017). Objectives: This study aimed to investigate the effect of task-oriented multisensory training on balance, functional mobility, and independence in the daily activities of the elderly. Methods: In this clinical trial, 30 elderly individuals were randomly divided into control and intervention groups. The intervention group underwent task-oriented exercises with multisensory training, whereas the control group underwent common rehabilitation interventions. Participants were assessed before and after receiving the interventions using Balance, Functional Mobility, and Barthel tests. Results: The mean age of the participants in the control and intervention groups was 78.1 and 72.3 years, respectively. Statistical analysis of the results showed that balance, functional mobility, and independence in daily life activities in both groups after the intervention were significantly different from those before exercise (P < 0.05). Regarding the fear of falling test, there was no significant change in either group before or after exercise (P > 0.05). Conclusion: Study results show task-oriented multisensory training improves balance, mobility, and independence in elderly individuals. The use of these treatment methods can help researchers and therapists plan preventive and therapeutic programs for the rehabilitation of the elderly.

Key words | Mots clés : Falls, Older drivers

Implementing and evaluating an inclusive aquatic program: A pilot project
Thursday: 2:10 PM-2:35 PM Room | Location: Poster 6
Poster presentation: Children and youth | Health and well-being
Alanna Toth (University of British Columbia, Vancouver) alannat5@student.ubc.ca Daryl Lum (University of British Colombia) daryllum@student.ubc.ca Miini Teng (Aquafit for All/University of British Columbia) miini.teng@ubc.ca Ana Arciniega (Aquafit for All) ana.arciniega@aquafitforall.org Tal Jarus (University of British Columbia) tal.jarus@ubc.ca

Introduction: Children with neurodiverse conditions, such as autism spectrum disorder and Down syndrome, often face exclusion from aquatic programs, as the prevailing model in the aquatic industry has been segregation. Inclusive education has been shown to benefit children’s quality of life, health, and social determinants of health, yet barriers to implementing inclusive aquatic programming persist and are yet unknown. Objectives: Building on findings from our previous participatory action research project, an innovative inclusive aquatics program has been created. The objective of this research is to evaluate the impact of this aquatics program that was designed, with this research potentially being used to create future inclusive programs and address the gap in program availability. Methods: Using program evaluation as the primary methodology, this mixed-method research involves surveys and focus groups with parents of neurodiverse children and aquatic staff who participated in this inclusive aquatics program. Thematic analysis and descriptive statistics will be used to analyze the data, providing a comprehensive understanding of the identified barriers and facilitators to participation in this
program. Results: Anticipated findings will provide insights into the challenges and support mechanisms that impact the implementation of inclusive aquatic programs. Understanding the benefits of such programs along with why such programs are limited, despite research supporting their significance, is the core objective. Conclusion: By identifying and understanding the barriers and facilitators to inclusive aquatics programming, this research has the potential to drive systemic change within the aquatic industry, making inclusive programs more accessible for neurodiverse children.

Key words | Mots clés: Equity & Justice, Program evaluation

Complaints as catalysts: Igniting positive change in regulation
Thursday: 2:10 PM-3:10 PM Room | Location: 103
ACOTRO Sponsored Session: Non-specific | Professional issues/Practice
Natalie MacKenzie, Kevin Wong, & Sherry Just

When an individual has a concern about the practice or conduct of an occupational therapist, they can submit a complaint to the province’s occupational therapist regulator. Complaints can be an intimidating process for the public and registrants, however, it can serve as powerful catalysts for positive change within regulation and across the profession of occupational therapy. Each province is required to have a process to receive and investigate complaints and determine appropriate outcomes. The Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO) is comprised of all occupational therapy regulators in Canada and has compiled and compared the occupational therapy complaints data across the country and mapped the data to The Competencies for Occupational Therapists in Canada, 2021. The trends of the investigation and discipline data can be used as valuable indicators of systemic issues and opportunities for improvement within the regulatory system as well as the whole profession. By embracing complaints as catalysts, regulatory bodies can transform challenges into opportunities, fostering a regulatory environment that is responsive, adaptive, and aligned with the mandate of public safety.

3-2-1, let’s roll! A pediatric manual wheelchair skills training group
Thursday: 2:10 PM-3:10 PM Room | Location: 104
Extended discussion: Children and youth | Technology
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Background: The internationally recognized Wheelchair Skills Training Program (WSTP) offers training in 30 manual wheelchair skills (Dalhousie University, 2023). Though pediatric occupational therapists (OT) recognize the importance of manual wheelchair skills training, there are barriers to applying evidence in practice, one of them being a lack of tools and resources adapted to their clients (Daoust et al., 2021). Pediatric specific WeeWheel tools including 3 storybooks (stories of characters who encounter physical obstacles with their wheelchair), 13 posters (visual description of the 13 manual wheelchair skills covered in the stories), and 3 training workbooks (goal setting and follow-up) (Ouellet et al., 2022) were created to facilitate wheelchair skills training in pediatrics. Innovation: In collaboration with researchers, OTs in a pediatric rehabilitation centre designed a new group intervention based on the WeeWheel tools and the WSTP. This group intervention is novel as it combines the WSTP and newly developed pediatric-specific complimentary resources (storybooks, posters, training workbooks). Approach: “3-2-1,
let’s roll!” integrates the WeeWheel storybook themes into its sessions (i.e., in the forest, in the castle, going to an outdoor show), uses the posters as visual feedback during its activities (e.g., explicit drawing on hand placement during propulsion), and refers to the training workbook to develop and follow-up on each child’s individual goals. Learning objectives: In the clinical extended discussion session, participants will: 1) Become familiarized with the development and the administration of the “3-2-1, let’s roll!” intervention group (20 minute presentation); 2) Explore the WeeWheel tools accessible via QR code and sample distributed paper copies (small group discussion); 3) Discuss the potential use of the WeeWheel and developing similar groups to “3-2-1, let’s roll!” in other pediatric settings (large group discussion).

Practice Implications: The session will provide OTs with knowledge about the evidence-based, pediatric-specific WeeWheel tools and their implementation in the “3-2-1, let’s roll!” group. The session may inform OT practice and benefit pediatric manual wheelchair users in receiving adequate training in wheelchair skills to optimize their wheelchair mobility. An extended discussion with OTs will allow for them to explore implementing evidence into practice within different clinical settings. Participants will leave with access to the evidence-based WeeWheel pediatric-specific tools.

Key words | Mots clés : Evidence-based practice, Seating

**Diversifying concepts in occupational therapy: Social insertion, inclusion, and participation**

Thursday: 2:10 PM-3:10 PM Room | Location: C1

Extended discussion: Not applicable | Equity & Justice

Ana Malfitano (Federal University of São Carlos, Brazil) anamalfitano@ufscar.br Debbie Laliberte-Rudman (Western University) drudman@uwo.ca Gail Teachman (Western University) gteachma@uwo.ca Patricia Borba (Federal University of São Paulo, Brazil) patricia.borba@unifesp.br Roseli Lopes (Federal University of São Carlos, Brazil) relopes@ufscar.br

Introduction: Within many contexts, occupational therapy (OT) and occupational science (OS) have centered goals of equity, diversity, and inclusion, committing to meaningful dialogue with Southern epistemologies and scholars and a reconfiguration of dominant modes of thinking and doing embedded in Western epistemologies (Magalhães, Farias, Rivas-Quarneti, Alvarez, & Malfitano, 2019, Teachman, 2023). Such commitments require dialogue that engages diverse and situated approaches to OT and interrogates key concepts central to the social equity and occupational justice aims of OT practices. More specifically, outcomes pertaining to social elements are centred in Social Occupational Therapy, as practiced in Brazil, as well as in evolving occupation-based social transformation approaches and in critical occupational science (Laliberte Rudman et al, 2019; Malfitano & Lopes, 2021). Session Objectives: This extended discussion aims to facilitate dialogue centred on how conceptions of social insertion, inclusion and participation have evolved within Social Occupational Therapy, as practiced in Brazil (Malfitano & Lopes, 2021), as well as in evolving occupation-based social transformation approaches in critical OS (Laliberte Rudman, 2021). Through such dialogue, participants will gain enriched understandings of these concepts that extend beyond Western ways of knowing and doing in OT and OS. Session description: Within this session, which will be facilitated by researchers from Brazil and Canada, three concepts, specifically, social insertion, social inclusion, and social participation, will be presented as they are addressed in Social Occupational Therapy literature, in occupation-based social transformation approaches, and in critical OS. In small groups, participants will have opportunities to reflect and share their views on the relevance of these concepts to their scholarly and professional practices. Space will be opened for meaningful dialogues to identify strengths and drawbacks of these concepts as foundations for praxis addressing social inequities within participants’ specific sociopolitical contexts. Practice Implications: Theoretical reflection and critical dialogue open to diverse worldviews
are crucial to develop and enact diverse forms of thinking and practice responsive to social needs and contextual elements. Conclusion: This session opens space for much-needed dialogue that can expand the ways the key concepts in OT and OS are understood and has direct implications for practices aimed to address social inequities.

**Key words | Mots clés**: Teaching/education, Theory

**Rethinking Cognitive Rehabilitation: Adaptively connecting with our strengths as occupational therapists**

Thursday: 2:10 PM-3:10 PM  
**Room | Location**: 101

**Conversations that matter**: Non-specific | Health and well-being

Anna Braunizer abraunizer@cbihealth.ca, Katica Rados krados@cbihealth.ca (Occupations in Practice)

Functional Cognition - an introduction, review and reflective discussion about current practices by Occupational Therapists. This will also be a collaborative brainstorm session for occupation-based approaches to cognitive rehab and assessing for versatility in cognitive rehabilitation approaches when working with people on what matters to them.

**Bien-être occupationnel en soins palliatifs: Une finalité ergothérapique !**

jeudi: 2:45 PM-3:10 PM  
**Room | Location**: 102

**Présentation orale (exposé)**: Les adultes plus âgés | La santé et le bien-être

Geneviève Dorval (Maison Michel-Sarrazin, Quebec) gdorval@michel-sarrazin.ca Valerie Gauthier (CLSC Thérèse de Blainville) valerie.gauthier.ergo@gmail.com

Introduction: Au Canada, peu d’ergothérapeutes œuvrent en soins palliatifs et de fin de vie (SPFV), toutefois, dans les dernières années, le leadership dans ce champ de pratique est en pleine expansion au sein d’équipes interdisciplinaires. Problème de pratique: Peu soutenu par des évidences scientifiques, le défi quotidien des ergothérapeutes en SPFV demeure la valorisation des rôles et compétences, afin de s’éloigner des approches d’interventions conventionnelles pour mieux répondre aux défis occupationnels de cette clientèle. Approche: L’expertise clinique développée dans le continuum des lieux d’exercice en SPFV ainsi que l’exploration de la littérature ont mené à faire reconnaître les assises d’une approche novatrice en communauté de pratique, en formation continue universitaire, auprès des futurs ergothérapeutes ainsi qu’en congrès. En petits groupes, les participants discuterez d’un cas clinique avec cette nouvelle approche. En grand groupe, ils partageront et façonneront une boîte d’outils et de ressources applicables à la pratique clinique en SPFV. Objectifs d’apprentissage: Associer les divers aspects de la pratique de l’ergothérapie avec les définitions des SPFV; s’approprier les rôles et les compétences clés de l’ergothérapeute au sein d’une équipe interdisciplinaire en SPFV; apprécier l’importance du bien-être occupationnel nécessaire à tout cheminement humain en SPFV, par l’évaluation et les interventions en ergothérapie. Implications pour la pratique: Les participants seront habilités à évaluer et à utiliser des interventions novatrices pour faire face aux défis occupationnels de la clientèle en SPFV, tout en s’inscrivant dans les objectifs gouvernementaux du plan d’action prioritaire et dans l’approche palliative intégrée des SPFV au Canada.

**Key words | Mots clés**: Cancer, Soins palliatifs

**‘I will eat the whole world’: Migration informing food-related occupations**

Thursday: 2:45 PM-3:10 PM  
**Room | Location**: 106

**OS Paper presentation**: Community/Population | Environment
Introduction: In the context of migration and globalization, migrants' food-related activities (FROs), such as cooking, eating, ingredient sourcing, meal sharing, and traditional celebrations, are influenced by multiple culinary domains. FROs reflect intersections of identity, physical and social environments, culture, and traditions and can be instrumental in strengthening cultural identity, sense of belonging, and community. Objectives: to explore how migration across countries shapes FROs for Vietnamese migrants and how chosen FROs reflect past and current mobilities. Methods: A secondary analysis was conducted with qualitative data from 15 recent Vietnamese migrants in Metro Vancouver and seven returnees to Vietnam from Canada. Data collection consisted of initial semi-structured in-depth personal interviews followed by either a second semi-structured interview, a “go-along” interview, or an “occupational mapping” session. Verbatim transcripts and maps were analyzed thematically to explore how mobility informed FROs. Findings: Themes highlight specific dimensions influencing FROs: a) social and cultural norms; b) pragmatic and logistical aspects of the physical environment; and c) significance of FROs. Analysis was informed by a transnational approach and the mobilities paradigm to understand how the cross-border movement of migrants, media, and culinary influences shape migrants' perceptions and experiences of FROs. Conclusions: Understanding FROs in the context of migration highlights the cultural complexities and social and pragmatic parameters of engagement. Occupational therapists will benefit from a nuanced understanding of FROs when working with migrants to establish connection, belonging, and a sense of community.

Key words | Mots clés : Community development, Occupational science

Raising children's voices in occupational therapy: An important responsibility
Thursday: 2:45 PM-3:10 PM Room | Location: 107

Paper presentation: Children and youth | Equity & Justice
Sandrine Gagné-Trudel (Université du Québec à Trois-Rivières, Trois-Rivières) Sandrine.Gagne-Trudel@uqtr.ca Sandrine Renaud (Université du Québec à Trois-Rivières) Sandrine.Renaud@uqtr.ca Noémi Cantin (Université du Québec à Trois-Rivières) Noemi.Cantin@uqtr.ca Pierre-Yves Therriault (Université du Québec à Trois-Rivières) Pierre-Yves.Therriault@uqtr.ca

Background: Engaging children in the decision-making process provides significant benefits to the occupational therapy process and outcomes. Indeed, it can foster a sense of self-worth and empowerment in children, and facilitate the achievement of therapeutic goals. Practice problem: Children are not consistently involved in the occupational therapy decision-making process. The credibility given to their voice is often diminished by adults, leading to testimonial injustices. While recognizing the importance of raising children’s voice, occupational therapists identify a need for further training to effectively engage children. Reflections: To address this challenge, we propose to draw inspiration from the Participation model developed by Lundy (2007). This model can serve as a valuable tool to engage children in the occupational therapy decision-making process. It comprises four components: Space, Voice, Audience, and Influence. Occupational therapists can use Lundy's model to provide children with genuine opportunities for expression (Space), support and encourage their voices (Voice), actively listen to their unique perspectives (Audience), and give due consideration to their views throughout the decision-making process (Influence). Learning objectives: Attendees will 1) Examine...
methods they currently use to involve children in the decision-making process; 2) Explore practical strategies to implement the components of Lundy’s model in their practice; 3) Reflect on organisational and societal actions to support its application. Practice implications: Applying Lundy’s model represents an innovative approach to raise children’s voices into occupational therapy services. Attendees will have the opportunity to assume a leadership role in actively engaging children as an integral part of their practice.

Key words | Mots clés : Advocacy, Equity & Justice

Occupational therapy role development: Strategies for success
Thursday: 2:45 PM-3:10 PM Room | Location: 108
Paper presentation: Non-specific | Advocacy /Leadership
Erin Lawson (The Hospital for Sick Children, Toronto) erin.lawson@sickkids.ca Maggie Harkness (The Hospital for Sick Children) maggie.harkness@sickkids.ca

Background: Occupational therapy (OT) is exciting in its breadth and diversity of roles. Even more exciting are the current role possibilities – hospital team-based care, practitioner roles, novel practice areas and nonclinical leadership. With these possibilities comes the responsibility for individual clinicians and leaders to show value and ensure sustainability of their role. Yet, academic curriculum, professional guidance or literature focused on knowledge and skills in role development is minimal. Recently, our rehabilitation department has developed several OT roles and subsequently invested resources into improving role development. Success: This workshop will begin by highlighting current literature on role development, planning, and evaluation. It will then outline recent successful role development experiences including 1) a role expansion in a Paediatric Intensive Care Unit; 2) new roles in the eating disorder day hospital and somatization program; and 3) the development of OT and physiotherapy (PT) practitioner roles to address ambulatory surgical backlog, while also discussing key learnings on the use of a role development framework, planning and evaluation tools. Approach: This work has led to the establishment of activity suggestions for role development (e.g., strategies around communication, stakeholder engagement, team education, and promotion), many of which can be applied to a variety of contexts. There will also be an opportunity for colleagues to share their experiences in role development. Learning Objectives: By the end of the presentation, attendees will be able: 1. To describe key components of successful role development in occupational therapy; 2. To identify role development strategies applicable to their own role expansion or role development opportunities.

Key words | Mots clés : Evaluation, Interprofessional

Social participation when aging with an early-onset neurological disability
Thursday: 2:45 PM-3:10 PM Room | Location: Poster 1
Poster presentation: Older Adult | Primary care/Primary healthcare
Mia Lapointe (Université Laval, Québec) Pascale Simard (Université Laval) Angéline Labbé (Université Laval) Samuel Turcotte (Université Laval)

Introduction: Due to improved healthcare and rehabilitation services, and better social conditions, people living with multiple sclerosis (MS) or spinal cord injury (SCI) now live longer. Yet, there is limited scientific evidence regarding the social participation of these aging populations, despite its significance for health. To support the development of more inclusive approaches to older adults’ health promotion, it is crucial to better understand the experiences of social participation of people aging with a
neurological disability. Objectives: 1) To explore how social participation is experienced by people aging with MS or SCI; and 2) to document barriers and facilitators to their social participation. Methods: This qualitative descriptive study is part of a larger participatory research project led by citizens, researchers, and community workers providing services to the target populations. A sample of 24 participants aged 55 and older living with MS or SCI will participate in a semi-structured interview. Qualitative data will be analysed using a mixed approach. Deductive analyses will be based on the Do-Live-Well model, which is rooted in occupational science and health promotion. Findings: The study will inform on the diversity of social participation experiences among these populations and on the social forces, environmental and individual characteristics influencing their social participation. Conclusion: This project will lay the groundwork for the codevelopment of health promotion interventions that support the social participation of individuals aging with MS or SCI. Findings can guide occupational therapists committed to dismantling systematic barriers to social participation in populations facing social and health inequities.

Key words | Mots clés : Equity & Justice, Multiple sclerosis

Can accredited facility support dogs increase engagement in occupational therapy?
Thursday: 2:45 PM-3:10 PM Room | Location: Poster 2
Poster presentation: Non-specific | Health and well-being
Caitlyn DeBruyne Claire Peachey (University of British Columbia) Lianna Walker (University of British Columbia) Elisha Williams (University of British Columbia) Jill Zwicker (University of British Columbia) jill.zwicker@ubc.ca

Introduction: Canine-assisted therapy has become increasingly common, as support dogs can improve an individual's emotional response, motivation for therapeutic sessions, and overall engagement with a health professional or therapist. While previous studies have highlighted the role of support dogs in a variety of settings (community, hospital, long-term care) and with varied clinical populations (children with autism spectrum disorder, adults with mental health concerns, older adults with dementia), few studies have explored the role of support dogs and engagement in occupational therapy sessions.
Objective: To explore the experiences and engagement of individuals receiving occupational therapy services in the presence of an accredited facility support dog. Methods: We will conduct semi-structured interviews over Zoom with private practice clients in northern British Columbia who have accessed occupational therapy services in the presence an accredited facility support dog. Reflecting the broad clientele characteristic of rural and remote practice, we will include participants of all ages (or their proxy) and any diagnosis. Engagement will be reflected in the participants’ responses related to attendance, participation, motivation, communication, emotional regulation, and body language. Using interpretive description, data will be analysed using a clinical lens to gain a better understanding of client engagement in occupational therapy sessions in the presence of a facility support dog. Results: We anticipate that a facility support dog will evoke a positive experience and increase engagement in occupational therapy sessions with clients of all ages. Conclusions: Findings may help build rationale for increased use of accredited facility support dogs in occupational therapy practice.

Key words | Mots clés : Clinical reasoning, Private practice

CoBS-JDA: Assessing cognitive, behavioural and sensory demands of job functions
Thursday: 2:45 PM-3:10 PM Room | Location: Poster 4
Poster presentation: Adult | Work and return to work
Introduction. The CoBS-JDA is a unique assessment tool that has been developed by a group of Canadian Occupational Therapists as we recognized a need to better assist therapists and employers in matching individuals with variations in neurocognitive functional abilities to appropriate job tasks. Objectives. This tool uses the Canadian Model of Cognitive and Behavioural Skills as a framework for looking at the demands of work. The team developed an innovative method for quantifying the demands of jobs for improved ease and accuracy when comparing an individual’s skills to the job demands. The background, theoretical framework, development, procedures and clinical utility of this tool will be presented.

Methods. The CoBS-JDA has undergone preliminary field testing research to gain feedback from assessors, JDA users, and other stakeholders, with the first phase completed in December 2023. The next phase will have participating health professionals completing a number of CoBS-JDA’s within their clinical practice. Participants will then provide further feedback on the: clinically usability of the CoBS-JDA, its feasibility to be incorporated into clinical practice, and provide consensus on its value in being commercialized. Results. It is hypothesized that the subject matter experts will: provide consensus on the need for the CoBS-JDA assessment tool, find the analysis and rating system clinically useful, agree that the proposed assessment process is feasible, and provide feedback on the assessment content that will be relevant to the next reiteration of the CoBS-JDA. Practice Implications. The CoBS-JDA is a tool that will support vocational rehabilitation for clients who have cognitive behavioural and/or sensory issues.

Key words | Mots clés : Assessments, Private practice

Initiating neighbourhood-level occupational therapy: Supporting older adults’ social participation

Introduction: Older adults often lack opportunities for neighbourhood-based social participation, contributing to exclusion and social isolation. Occupational therapy practice with communities of older adults can support their social participation through neighbourhood change. Limited occupational therapy research has explored the processes of initiating such work. Objectives: To explore several methods of engaging communities of older adults to collaboratively determine interests, resources, needs, and priorities related to neighbourhood-based social participation. Methods: We drew on participatory action research and community development principles to develop three community-based partnerships with older adults, aimed at building community and enhancing neighbourhood life. Together we set goals (to explore social participation), planned how to collect information, and implemented plans through survey, town hall, and planning meetings. Throughout these activities, we took notes and reflected on the processes, inter-personal interactions, and outcomes. Results: Methods
implemented successfully built partnerships, gathered social participation data, and stimulated further action to create neighbourhood-based social occupations. Methods varied in amount of effort required and degree of reach to diverse older adults. For example, the survey and town hall required significant planning and implementation, with the latter reaching ethnically diverse groups of older adults. When interpersonal issues arose, diverse strategies supported their management and resolution. Conclusions: Engaging communities of older adults and collaboratively planning to support neighbourhood social participation is feasible and effective. Such work requires developing partnerships to access resources and managing interpersonal relations. Ultimately, neighbourhood-level occupational therapy holds strong potential to transform communities and enhance the social participation of older adults.

Key words | Mots clés : Community development

The elephant in our home: Racism experiences by homecare occupational therapists
Thursday: 2:45 PM-3:10 PM Room | Location: Poster 6
Poster presentation: Not applicable | Equity & Justice
Prithinkrkaa Balasubramaniam (University of Toronto, Toronto)
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Rationale: Canadian health professionals from marginalized communities, including occupational therapists (OTs), have voiced experiences of isolation, marginalization, and exclusion within their work settings due to their race. Working in homecare can further heighten their vulnerability to racist encounters, given client’s home visits are usually conducted alone, in unpredictable situations, without the support of colleagues, supervisors, or security personnel. Despite the growing proportion of racially diverse Canadian OTs, literature on their experiences of racism in the workplace, especially homecare, remains limited. Objective: This study will examine the experienced of racism encountered by racialized homecare OTs to explore the perceived safety of occupational therapists, their coping strategies, as well as the impacts of these incidents on therapist-client relationships and perceived quality of care provided. Methods: Interpretive Phenomenological Analysis (IPA) is guiding this study. Five to 10 racialized homecare OTs will be recruited from across Canada. Data will be collected via virtual audio-recorded semi-structured interviews. Themes generated from each participants’ data and the resultant superordinate themes will be described through research team consensus. Anticipated Findings: Participant narratives will elucidate the nature, frequency, and severity of racist encounters experienced by homecare OTs from clients, colleagues, and other work-related relations. The longitudinal impact and their coping strategies will also be elucidated. Practice implications: This study will provide valuable insights that can inform institutional policies and practices that promote more inclusive and equitable homecare work environments, validating the often-suppressed experiences of racialized occupational therapists, and raise awareness of the impact of racism on care providers.

Key words | Mots clés : Community care, Equity & Justice

Mobilizing critical occupational therapy praxis to promote structural justice, equity, and rights in everyday practices
Thursday: 3:50 PM-5 PM Room | Location: C1
Special event | Événements spéciaux
Gayle Restall gayle.restall@umanitoba.ca
This presentation will explore three critical questions relevant to occupational therapists today and into the future. First, why should occupational therapists integrate structural justice, equity and rights into their everyday practices? Second, what is occupational therapy’s potential as a structural justice, equity and rights-oriented profession? Third, how can occupational therapy mobilize critical praxis to promote structural justice, equity and rights in everyday practices?

Gayle Restall is recognized for her powerful influence and allyship for social justice work in occupational therapy in Canada. She has shown exemplary volunteer leadership and has held leadership roles with several professional and community groups. Gayle is recognized for her extensive contributions to occupational therapy clinicians, researchers, educators, students, and the larger community. Through teaching, research, mentorship, and advocacy she has made, and continues to make, an outstanding contribution to the body of knowledge of occupational therapy. Gayle is currently Professor Emerita in the Department of Occupational Therapy, College of Rehabilitation Sciences, Rady Faculty of Health Sciences at the University of Manitoba.

**CAOT & COTF Awards Breakfast | Petit déjeuner de remise des prix de l'ACE et de la FCE**
Friday: 8:00 AM-8:55 AM Room | Location: C1
**Special event | Évènements spéciaux**
*Phillip Wendt, Hélène Sabourin, Sylvia Davidson*

CAOT & COTF will honour fellow occupational therapists that have made outstanding contributions to advancing the profession by presenting our 2024 award winners.

**Professionalism and the disciplinary control of therapists at the margins**
Friday: 9:05 AM-9:30 AM Room | Location: 102
**Paper presentation: Non-specific | Professional issues/Practice**
*Brenda Beagan (Dalhousie University, Halifax) brenda.beagan@dal.ca Stephanie Bizzeth (NS Health Authority) stephanie.bizzeth@dal.ca Meredith Brison-Brown (Dalhousie University) mr982605@dal.ca Tara Pride (Dalhousie University) tarapride@dal.ca Kaitlin Sibbald (Dalhousie University) kaitlin.sibbald@dal.ca Kaarina Valavaara (Dalhousie University) kaarina.valavaara@dal.ca*

Introduction: Professionalism is notoriously ill-defined in occupational therapy. Rooted in skilled practice and ethical virtues (e.g., respect, honesty, responsibility, integrity), in the interest of teaching and evaluation it gets reduced to measurable behaviours. Too often these concern matters of comportment and decorum more than ethics. A core text defines professionalism as conforming “to the standards and norms of a given profession” (Deluliiis, 2017, p. 1), specifically mentioning clothing, hairstyles, tattoos, piercings, body language, and eye contact. Specific (classed, culture-bound, and ableist) behaviours and forms of embodiedness become encoded as professional, leaving others subject to discipline through the concept of ‘unprofessional.’ Objectives: To explore the experiences of occupational therapists who self-identify as racialized, ethnic minority, disabled, 2SLGBTQ+, and/or from working-class/impoverished family origins, examining how ‘professionalism’ may serve to discipline and further marginalize them.

Methods: In-person or telephone interviews were conducted with 20 therapists across Canada. Deidentified transcripts were analyzed using reflexive thematic analysis. Findings: Professionalism was routinely employed to encourage conformity, reinforcing hetero-cis-patriarchy, white supremacy and colonialism, able-body-mindedness, and upper-middle class normative expectations. At the same time, participants’ non-conforming bodies, minds and behaviours became forms of quiet resistance to
discipline, points of disruption. Conclusions: Defining professionalism in ways that privilege therapists from particular social groups narrows the potential of occupational therapy to encompass diverse valuable ways of doing, being, becoming and belonging. Casting non-conformity (or resistance) as ‘unprofessional’ does a disservice to a wide range of therapists, as well as to the diverse people occupational therapy serves.

**Key words | Mots clés:** Equity & Justice, Occupational justice

**Role-emerging placements revitalizing the primary care experience: Comparison and Discussion**

Friday: 9:05 AM-9:30 AM  **Room | Location:** 103  
**Paper presentation:** Community/Population | Primary care/Primary healthcare  
*Carmel O'Keefe (Dalhousie University, Halifax)* c.okeefe@dal.ca  
*Patricia Moores (Memorial University)* plmoores@mun.ca  
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*Lynn Shaw (Western University)* lynn.e.shaw80@gmail.com  
*Jonathan Harris (Dalhousie University)* jonathan.harris@dal.ca  
*Danielle Domm danielle.domm@dal.ca*

Introduction: Primary care clinics provide services to increasingly complex patients who are best served using an interprofessional approach. Occupational therapists (OTs) are ideally positioned to support interprofessional primary care practices, however interprofessional teams are often unfamiliar with the important roles that OTs can play. Role-emerging OT student placements provide an opportunity to demonstrate these roles when organizations that do not normally employ OTs offer a placement that is supported by a preceptor who is also not employed by the organization. The resultant enhanced understanding of the OT role within an interprofessional team in a primary care clinic may serve to create new positions for OTs in this setting, ultimately improving the services provided to the diverse populations that access these clinics.  
**Session Objectives:** This session has two objectives: (1) to synthesize the findings from several data sources to describe two case studies that employed role-emerging OT student placements in community-based, family medicine clinics; and (2) to facilitate an interactive discussion among the presenters and attendees to share experiences with and learn from one another about OT role-emerging student placements in primary care and other settings.  
**Session Description:** This session will be a 25-minute paper presentation that will describe two case studies, in two Canadian provinces, that employed role-emerging placements within primary care settings. We will compare and contrast the processes, facilitators, barriers, and lessons learned. For the remainder of the session, we will engage attendees in an interactive discussion facilitated to provide opportunities to share and better understand role-emerging placements, within the context of primary care and beyond, from the perspectives of students, preceptors, fieldwork coordinators, faculty members, interdisciplinary team members, and school administrators.  
**Practice Implications:** This session will enhance knowledge of the use and impact of role-emerging placements within different settings. It may result in shared resources across occupational therapy programs.  
**Conclusion:** This session may inform if, how, and why role-emerging placements may be used within different occupational therapy contexts in the future.

**Key words | Mots clés:** Community care, Fieldwork

**Preparing for leadership in all practice contexts and career stages**

Friday: 9:05 AM-9:30 AM  **Room | Location:** 104  
**Paper presentation:** Not applicable | Advocacy /Leadership
Introduction: Occupational therapists (OTs) work in complex contexts where it is necessary to collaborate with others and influence processes, that is, lead collaboratively. Preparing student OTs for practice requires attention to leadership development. Although examples of leadership development initiatives for student OTs exist in the literature, very few are part of fieldwork courses. Objective: This presentation will introduce ways to advance student leadership development in fieldwork courses.

Methods: The research consisted of a four-phased process, involving a concept analysis of student leadership, a qualitative descriptive study to explore perspectives concerning student leadership development, the creation of a student leadership development framework and three tool sets, and an attempt to evaluate these products. Results: This research has brought attention to how intentional student leadership development in the clinical environment is missing and academic settings often use siloed approaches. Based on this research, we have created methods to develop student leadership in the clinical setting. These methods are designed to 1) provide an understanding of the state of student leadership culture in the practice environment, 2) promote clarity regarding language of student leadership, and 3) offer illustrative narratives and active learning plans for students to implement in their clinical learning. Additionally, the framework and tool set offer a way to enhance education and practice integration and provide a clear, structured, and organized approach to student leadership development. Conclusion: This research has contributed to our understanding of student leadership, and it offers clinical educators methods that may be used by student OTs to develop leadership in clinical settings.

Key words | Mots clés: Fieldwork, Interprofessional

Mental health and participation of children with DCD: Parental perspectives
Friday: 9:05 AM-9:30 AM Room | Location: 106

Paper presentation: Children and youth | Health and well-being

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Introduction: Impacting one in 20 children, Developmental Coordination Disorder (DCD) is a neurodevelopmental disorder that significantly impacts physical, social, and emotional health. Secondary to motor difficulties and continual challenges participating in typical daily activities, children with DCD experience high rates of internalizing symptoms (e.g., depression, anxiety), low participation, self-concept, and self-efficacy. Concerningly, there are no national standards of care guiding occupational therapists to prevent this negative developmental trajectory. Changing the narrative requires parental feedback to ensure family-centered strategic initiatives. Objectives: To understand Canadian parents’ perspectives on their child’s physical activity, participation, and social-emotional function and the needed supports to promote positive well-being. Methods: This study involves secondary analysis of a cross-sectional online survey that was distributed from November 2021 to June 2022 to parents of children with suspected or confirmed DCD. Participants were recruited using convenience, purposive, and snowball sampling. Results: A total of 488 questionnaires with representation from across Canada will be analyzed using descriptive and inferential statistics for close-ended questions and content analysis for open-ended questions. Chi-square analyses will examine
relationships between variables. Parent responses will help inform: (1) the degree of participation of children with DCD in physical activity; (2) concerns about their child’s mental health; (3) the relationship between physical activity and mental health; and (4) parent-identified needs to support their child’s participation and emotional well-being. Conclusion: Study findings will have implications for informing future strategic policies and best practice occupational therapy principles, to support participation and mental health for Canadian children with DCD.

**Key words | Mots clés**: Developmental coordination disorder, Mental health

**Using technology to support older adults: ethical challenges and solutions**
Friday: 9:05 AM-9:30 AM  
**Room | Location**: 108

**Paper presentation**: Older Adult | Technology  
*Marie-Michele Lord (Université du Québec à Trois-Rivières, Trois-Rivières) marie-michele.lord@uqtr.ca*  
*Marie-Josée Drolet (Université du Québec à Trois-Rivières) Marie-Josee.Drolet@uqtr.ca Valérie Poulin (Université du Québec à Trois-Rivières)*

Introduction. The technological shift in the health and social services sector has accelerated in recent years. Among other things, healthcare innovations designed to meet the needs of older adults are on the rise. In fact, occupational therapists are increasingly recommending the use of technologies, for example, to help older adults to remain in the living environment of their choice. The ethical issues surrounding the use of technology in healthcare are increasingly well-documented. Objectives. In this presentation, ethical issues associated with the deployment of technologies to support older adults, and ways of countering them will be discussed. Methods. A review of the literature on the issues involved in deploying healthcare technologies with older adults was carried out. Results were put into perspective with discussions conducted with various actors of the health and social services continuum (e.g. healthcare workers, managers, caregivers (n= 35)) carried out as part of the deployment of a living lab in aging. Results. Epistemic injustice is one of the growing issues associated with the use of technologies in healthcare, especially with more vulnerable populations. Indicators can be used to detect ethical issues, and occupational therapists can play a key role in identifying and countering them. Conclusion. This presentation will enable occupational therapists who use or wish to use technologies with older adults to remain vigilant in the face of ethical issues. In particular, we'll be looking at ways of including older adults in the process of deploying technologies that concerns them.

**Key words | Mots clés**: Equity & Justice, Technology

**Résoudre les enjeux éthiques de la pratique en milieu scolaire**

vendredi: 9:05 AM-9:30 AM  
**Room | Location**: 107

**Présentation orale (exposé)**: Les enfants et les jeunes | l’Équité et la justice  
*Sandrine Renaud (Université du Québec à Trois-Rivières, Trois-Rivières) sandrine.renaud@uqtr.ca*  
*Léa Bisaillon (Université du Québec à Trois-Rivières) Nancy Baril (Université du Québec à Trois-Rivières)*  
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Introduction: Les ergothérapeutes pratiquant en milieu scolaire vivent des enjeux éthiques spécifiques à ce contexte de pratique. Ceux-ci mettent en péril des valeurs importantes, telles que l’accessibilité aux services, la collaboration interprofessionnelle, la pratique probante et l’inclusion scolaire des élèves vivant une expérience de handicap. Étant donné que ces enjeux peuvent avoir des conséquences négatives sur les élèves, les familles, les ergothérapeutes et les écoles s’ils ne sont pas résolus, il importe

Key words | Mots clés : Raisonnement clinique, Santé en milieu scolaire

Efficiencies in wheelchair assessment and prescription within long term care
Friday: 9:05 AM-9:30 AM Room | Location: 109
Paper presentation: Older Adult | Chronic conditions
Jennifer Bachynsky (ExtraMural Program, Saint John) ivanbachynsky@me.com

Background: The Wheelchair Rapid Assessment and Prescription (WRAP) program, is an innovative service delivery model for clients residing in nursing homes who require a wheelchair to meet their mobility needs. This model was created by an occupational therapist out of a desire to improve access to clients in nursing home where there were extensive wait times. Innovation: A team driven, collaborative process was developed to first identify barriers to care delivery and then to explore related actions that were required to improve the wheelchair assessment and prescription process. The following areas were identified: 1) skill usage (What could only the occupational therapist do and what jobs could be done with help of other team members?) 2) time and equipment management (How do we get equipment to clients more efficiently?) and 3) documentation (Could the burden of documentation be shared or lightened to allow more time for direct service?) Findings: By enhancing the role of the rehab assistant within the nursing home, using an administrative assistant, having equipment readily available and streamlined documentation processes, 6 times as many clients were seen prior to the use of this model. Learning objective: To have an understanding of the process used to initiate system change to wheelchair/seating process in the long term care setting and to identify/consider an area in their own practice where a process/principles similar to this might apply to be able to initiate a positive change in their practice. Practice Implication: This presentation will review the change process, barriers, solutions and outcomes that were realized during the project.

Key words | Mots clés : Long term care, Seating

Occupational therapists’ psychotherapy competency: A secondary analysis
Friday: 9:05 AM-9:30 AM Room | Location: Poster 1
Poster presentation: Not applicable | Professional issues/Practice
Andrea Mandzuk (University of Manitoba, Winnipeg) mandzuka@myumanitoba.ca Pamela Wener (University of Manitoba) Pamela.Wener@umanitoba.ca
Introduction: Occupational therapy practice, like other health professions is guided by a competency document. The occupational therapy competency document outlines what one should be competent in, but it is the responsibility of the individual therapist, instructors, and supervisors to determine one’s competency in specific practice areas. Marshall et al. (2022) highlighted the ongoing debate about psychotherapy within occupational therapy. An aspect of this debate centres on occupational therapists’ competency to provide psychotherapy. Objectives: To explore the scope of existing literature on psychotherapy competency written by occupational therapists and/or pertaining to occupational therapy research or practice. Methods: A secondary analysis of the 207 articles included in the scoping review by Marshall et al. (2022) was conducted. The articles underwent a full-text review, for concepts related to occupational therapy psychotherapy competency. Findings: The narrative synthesis was comprised of 104 articles and three themes: 1) What is competency? refers to knowledge, skills, attitudes and related personality traits of psychotherapy competency; 2) How is competency attained and maintained? refers to entry-to-practice education, training, learning from others, experience, and professional identity; 3) The great debate, which describes the varying perspectives about psychotherapy and occupational therapy scope of practice. The literature in this review did not outline a pathway for occupational therapists to attain psychotherapy competency, which impacts professional identity. Conclusion: Future research needs to explore pathways for occupational therapists to establish psychotherapy competency. The ongoing debate and its impact on professional identity highlights the need to support occupational therapists who are providing psychotherapy.

Key words | Mots clés : Mental health

Autonomy, competence, and relatedness: Determining their relative importance for motivation

Friday: 9:05 AM-9:30 AM Room | Location: Poster 2

Poster presentation: Community/Population | Health and well-being

Candace Chau (University of British Columbia, Vancouver) candace8@student.ubc.ca Maggie Chan chan1298@student.ubc.ca Brodie Sakakibara (University of British Columbia Okanagan) brodie.sakakibara@ubc.ca Jacob Bosancich (Meridian Rehabilitation Consulting Inc.) jbosancich@gmail.com

Introduction: There are an estimated 5.7 million stroke survivors annually (Benjamin et al., 2017; Feigin et al., 2022) who are at risk of decreased social participation (Cai et al., 2019), a strong determinant of quality-of-life post-stroke (Goh et al., 2019). While motivation is one of the most influential factors in determining treatment effects (Cheong et al., 2020), independence level (Rapoliene et al., 2018), and social participation, there is limited literature exploring predictive factors of motivation for stroke survivors. We will examine factors of motivation for social participation using the Self Determination Theory (SDT) as a guiding framework (Deci & Ryan, 2000). Objectives: To quantify the association between SDT predictors (i.e., autonomy, competence, and relatedness) and motivation for social participation among community-dwelling stroke survivors. Methods: In this cross-sectional study, we will recruit community-dwelling individuals (n=30) who are at least 6-months post-stroke. Motivation will be assessed using a subscale of the Intrinsic Motivation Inventory. Autonomy, competence, and relatedness will be assessed using subscales of the Impact on Participation and Autonomy Questionnaire, Stroke Impact Scale, and Multidimensional Scale of Perceived Social Support. Descriptive statistics will characterize the sample. Multiple regression analyses will quantify the association between independent and dependent variables, while controlling for covariates. Results: The results of this study
can inform clinicians and researchers in improving practice recommendations to increase quality of life post-stroke. Practice Implications: Occupational therapists have a critical role in providing motivation through activities for stroke survivors. Findings will help determine which predictive factors of motivation should be incorporated into post-stroke interventions.

**Key words | Mots clés:** Stroke, Theory

**Opening new horizons by engaging children in occupational therapy research**

Friday: 9:05 AM-9:30 AM  **Room | Location:** Poster 3  
**Poster presentation:** Children and youth | Equity & Justice  
_Sandrine Gagné-Trudel (Université du Québec à Trois-Rivières, Trois-Rivières) sandrine.gagne-trudel@uqtr.ca Geneviève Rochon (Université du Québec à Trois-Rivières) genevieve.rochon@uqtr.ca Noémi Cantin (Université du Québec à Trois-Rivières) noemi.cantin@uqtr.ca Pierre-Yves Therriault (Université du Québec à Trois-Rivières) pierre-yves.therriault@uqtr.ca_

Rationale: Phenomenological research holds an important role in occupational therapy, offering a unique insight into the lived experiences of clients as they navigate services and their everyday lives. While there is a growing emphasis on engaging a diversity of client in research, the engagement of children with disability remains a challenging frontier. Our literature review revealed a gap in the description of methods facilitating phenomenological research processes with children. Objectives: The primary aim of this study is to present a methodological framework for engaging children with disability in phenomenological research. Methods: A methodological review was carried out. This review encompassed searches in bibliographic databases, such as Academic Search Complete, PsycINFO, CINALH, Google Scholar and ProQuest Dissertations and Theses. The search employed keywords related to "children with disability" and "phenomenology". Subsequently, two authors systematically selected the studies and evaluated their quality using the Framework of de Witt & Ploeg (2006). Data analysis was conducted using a qualitative content analysis method. Findings: The methodological framework places a strong emphasis on building trust, creating a comfortable and playful environment, and employing child-centred approaches to enable children’s genuine engagement in the research process. It also underscores the need for careful management of power dynamics and for adapted communication with children. Conclusion: By incorporating children’s perspectives, this methodological framework expands the horizons of occupational therapy research. It represents a significant step towards promoting an inclusive and equitable construction of knowledge pertaining to children in the field of occupational therapy.

**Key words | Mots clés:** Equity & Justice, Models

**My diversity matters: Diversifying health professions through a youth program**

Friday: 9:05 AM-9:30 AM  **Room | Location:** Poster 4  
**Poster presentation:** Non-specific | Equity & Justice  
_Hanna Pahl (University of British Columbia, ) hpahl@student.ubc.ca Kirby Way (University of British Columbia) kirbyway@student.ubc.ca Nassim Adhami (University of British Columbia) nassim.adhami@ubc.ca Laura Bulk (University of British Columbia) laura.bulk@ubc.ca Ben Mortenson (University of British Columbia) ben.mortenson@ubc.ca Jeff Boniface (University of British Columbia) jeff.boniface@ubc.ca Julia Schmidt (University of British Columbia) Julia.Schmidt@ubc.ca Michael Lee (University of British Columbia) michael.lee@ubc.ca Tal Jarus (University of British Columbia) tal.jarus@ubc.ca_
Introduction: Equity-denied groups (EDG) are underrepresented in healthcare professions, including occupational therapy, despite considerable evidence that diverse healthcare teams improve healthcare experiences and outcomes (LaVeist & Pierre, 2014). EDGs face unique barriers to entering health professions including lack of mentorship, limited exposure to professions, and financial burden (Colaianni et al., 2022). To address these barriers, a summer program for EDG youth interested in health professions was designed and implemented. Objectives: To evaluate participants’ change in familiarity with health professions, knowledge of admissions processes, and understanding of the value of diversity in health professions. The study also aimed to understand if those who belong to specific or to multiple EDGs benefited from the program in different ways. Methods: Twenty-eight youth in EDGs attended a one-week summer program aimed at reducing barriers to applying for and entering the seven associated health professions and improving understanding of the importance of diversity. Pre-post data were collected using mixed methods: focus groups, surveys, and an arts-based reflection activity. Results: Preliminary analysis has identified 3 themes: broadening horizons (career options and knowledge of application processes), making connections (professional and peer), and understanding the value of diversity. Quantitative analyses are underway. Conclusion: Our initial findings provide support for this program in confronting barriers to EDG youth entering health professions. Direct action to address these barriers is imperative for supporting the growth of occupational therapy as a profession. This program represents an actionable strategy to increase equity and diversity in health professions, including occupational therapy.

Key words | Mots clés: Equity & Justice, Program evaluation

Recovery College: an occupational therapy perspective
Friday: 9:05 AM-9:30 AM Room | Location: Poster 5
Poster presentation: Non-specific | Mental health
Ellie Lambert (Providence Care, Kingston, ON) lamberte@providencecare.ca Jenna Sands (Providence Care) sandsj@providencecare.ca

Introduction: Recovery Colleges are supportive adult learning centers, empowering people in their mental health and wellness journey through education and peer support. Offering a wide variety of free courses that focus on understanding and developing skills, Recovery Colleges are innovative spaces in which occupational therapists can work to support individual and community wellness needs. Practice problem: The pandemic negatively impacted the mental health of many and increased strain on our mental health system. In response, an occupational therapy-led community survey was launched to assess mental health and wellness supports. The feedback determined a need for increased mental health education and skill-building opportunities, leading to the development of a Recovery College. Approach: Co-development with people with lived experience of mental health and/or addiction challenges was integral to early development. Resources from other Recovery Colleges, occupational therapy frameworks, and ongoing community collaboration informs ongoing development. Learning objectives: The poster presentation will explore the development and coordination of a Recovery College from an occupational therapy perspective through examining relevant evidence-based research, data gathered from evaluation tools, and lived experiences. Attendees will learn about the Recovery College model (ImROC, 2023), the role of occupational therapists in this setting, and the positive impacts on individual and community levels. Practice implications: Strongly aligned with the occupational therapy lens, the Recovery College model encourages occupational participation, promotes wellness, and supports skill development. The provision of mental health education and opportunities for peer
connection in a low-barrier space can also support equity, diversity, and inclusion, and encourage students to reclaim their roles as learners.

**Key words | Mots clés :** Community development, Mental health

**Developing a senior-driven program in a naturally occurring retirement community**

Friday: 9:05 AM-9:30 AM Room | Location: Poster 6

**Poster presentation:** Older Adult | Health and well-being

Laura Boyle (University of Western Ontario, London) lboyle8@uwo.ca
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Debbie Laliberte Rudman (University of Western Ontario) drudman@uwo.ca
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Janine Wass (University of Western Ontario) jwass3@uwo.ca

Introduction: Naturally occurring retirement community (NORC) programs hold strong potential to support older adults’ well-being through collective occupations. Limited research has reported on such programs, particularly in small cities. Objectives: To discuss the initial stages of developing a senior-driven NORC-based program in a small Canadian city, addressing implementation challenges and opportunities. Methods: A multi-stage collaborative process was used to develop and implement a program aimed at promoting social occupations as part of an expansion of this NORC-based program in several locations. Key learnings were generated through collective reflexivity on observational and note-taking data collected during this process. Results: Key challenges, including navigating the presence of a pre-existing tenant social committee and managing interpersonal conflict between tenants, were often related to the history of social and power relations tied to different social locations. Community assets facilitating development included a supportive landlord, tenants with a keen interest in co-developing programming, partnership with a local community health centre, and availability of in-kind communal space appropriate for programming. We also engaged tenants who were reluctant to join previous social activities in the building, including men, young-older adults, and those with health concerns, likely due to the facilitator’s status as a neutral external party. Interactive brainstorming activities promoted a sense of inclusion and autonomy. Conclusions: By navigating challenges and using community assets, we were able to develop a NORC-based program in a small Canadian city. Occupational therapists are well positioned to leverage collective occupations in ways that bring community members together to address needs and enhance opportunities.

**Key words | Mots clés :** Community development

**Developing OTA Positions in the Workplace: How to Start the Conversation**

Friday: 9:05 AM-10:00 AM Room | Location: 101

**Conversations that matter:** Non-specific | Advocacy/Leadership, Professional practice/issues

Debra Cooper debra.otaptanetwork@gmail.com (OTA & PTA Practice Network)

As the need for occupational therapy services continue to increase, more workload is being placed on occupational therapists, often without the adequate clinical support. Occupational therapist assistants are a valuable resource, who are beneficial with direct patient care and overall therapist workflow. Please come and discuss how to start the conversation with employers, how an OTA can address your clinical needs, and any questions you may have with integrating an assistant into your practice.
Taking sight into account – exploring case scenarios of OT practice with people with sight loss
Friday: 9:35 AM-10:20:00 AM Room | Location: 103
Conversations that matter: Non-specific
Laura Bulk, Dorothy Kessler dk75@queensu.ca (OTVLBN)

We will present cases from different areas of practice, invite clinicians to share their own stories and discuss accessibility of practice and how OTs can take vision and vision loss into account in their approach.

Leveraging artificial intelligence in occupational therapy education
Friday: 10:30 AM-10:55 AM Room | Location: 106
Paper presentation: Adult | Fieldwork/Education
Anne Hunt (University of Toronto, Toronto) anne.hunt@utoronto.ca Rebecca Timbeck (Western University) rtimbec@uwo.ca Leslie Johnson (University of Manitoba) leslie.johnson@umanitoba.ca Nicole Bobbette (Queen's University) Nicole.Bobbette@queensu.ca Shone Joos (University of Toronto) s.joos@utoronto.ca Diane Mackenzie (Dalhousie University) diane.mackenzie@dal.ca

Introduction. Higher education is undergoing a transformative evolution, with the integration of generative artificial intelligence (AI) becoming increasingly prevalent. The use of generative AI in occupational therapy education programs holds great potential to enhance learning experiences through real-time feedback, self-directed learning, tailored teaching methods, enhancing communication, generating continuous updates about practice trends and more. Objectives. In this paper presentation we will: 1) define and describe AI in relation to higher education programs; 2) identify how AI is currently being applied in occupational therapy programs in Canada; 3) discuss the future potential and challenges for AI in occupational therapy education programs. Practice Implications. AI can be integrated in occupational therapy curricula in multiple ways to enhance learning. While challenges related to ethics, privacy, and equity must be addressed, the potential benefits in terms of personalized learning, data-driven insights, and adaptive curricula make AI a compelling addition to the education toolkit for occupational therapy educators. Conclusions. The integration of AI in occupational therapy education holds promise for enhancing the quality and accessibility of curricula.

Key words | Mots clés: Teaching/education, Technology

OT4Parenting: First cross-sectional OT practice and parenting study in Canada
Friday: 10:30 AM-10:55 AM Room | Location: 107
Paper presentation: Adult | Professional issues/Practice
Evelina Pituch (University of Toronto Scarborough, Toronto) evelina.pituch@utoronto.ca Anne Honey (The University of Sydney) anne.honey@sydney.edu.au Margaret McGrath (The University of Sydney) margaret.mcgrath@sydney.edu.au OT4Parenting Study Team

Introduction: Parenting is a valued and challenging adult role for many. Recent clinical guidelines and research highlight occupational therapists’ key contributions to supporting parents, including parents facing health issues or disparities. However, our current knowledge about the consideration of parenting occupations in occupational therapy clinical practice is limited in Canada. To our knowledge, this is the first cross-sectional study focusing on Canadian occupational therapists' involvement in parenting. Objectives: This study aims to identify the attitudes and practices of occupational therapists and any
barriers to addressing parenting with adult clients. Methods: An online anonymous bilingual survey was conducted as part of a wider international study on parenting occupations and occupational therapy. Participants were recruited via social media, professional association newsletters, mailing lists, and word-of-mouth. Ethical approval was obtained from the University of Sydney Human Research Ethics Committee. Results: 126 occupational therapists (89% female) from 6 provinces with diverse clinical practice experiences participated in the study. Although most occupational therapists considered parenting to be within their scope of practice, the strong majority did not have any specific training in parenting, did not use formal assessment tools, and perceived insufficient skills to confidently address parenting occupations. Conclusions: Prevailing gaps in clinical practice and research may prevent occupational therapists from actively engaging in parenting assessment and interventions, leaving clients with potentially unresolved daily family challenges. It is crucial that parenting moves from an emerging and non-traditional area to one fully embedded in national occupational therapy curriculum and practice.

Key words | Mots clés : Evidence-based practice, Occupational justice

Using LiDAR technology to assess home safety in older people
Friday: 10:30 AM-10:55 AM Room | Location: 108
Paper presentation: Older Adult | Technology
Susan Brandis (Bond University, Gold Coast) sbrandis@bond.edu.au Judith George (Bond University) judith.george@student.bond.edu.au Rosemarie Rusch (Bond University) rrusch@bond.edu.au

Introduction: Occupational therapists perform home safety assessments to support the transition of the patient from hospital to home, prevent falls, readmission, or placement. A physical visit to the client’s home will identify hazards and make recommendations for modifications. Limitations include time, travel, workforce shortages, and remoteness. Light detecting and ranging (LiDAR) is a 3 dimensional scanning tool which creates a digital image of the environment for subsequent analysis. Currently used in mining, construction, and surveying, it is yet to be applied within a healthcare setting. Objectives This research investigates the feasibility of using LiDAR technology as an alternative method for conducting home falls risk assessments for older adults. Method: A technician scanned ten sample homes while an occupational therapist assessed the home for falls safety risks and general access. A second blinded therapist then conducted the same environmental assessment of the stored home images. Case studies of simulated patients being considered for discharge from hospital to the specific home environment added the person context. The feasibility of the process was analysed, the independent assessments and recommendations by the two independent therapists compared. Findings: Preliminary findings identified challenges with file size and storage. A high level of reliability in measuring access, heights of items and recommendations for home equipment was observed. Time taken to conduct a home assessment was much reduced and images able to be stored for future reference. Conclusion: Assessing LiDAR images to assess home safety risks is feasible, however detailed protocols are required so all essential information is scanned.

Key words | Mots clés : Falls, Home modification

Occupational therapist-led mindfulness for older adults with early cognitive deficit
Friday: 10:30 AM-10:55 AM Room | Location: 109
Paper presentation: Older Adult | Primary care/Primary healthcare
Rationale: Community-dwelling older adults living with early cognitive decline experience less efficiency in performing everyday life activities, resulting in decreased satisfaction and other adverse psychological outcomes. Primary care providers, such as occupational therapists, are often the first point of contact when older adults and their families become concerned about memory problems. Mindfulness training has been linked to cognitive and psychological improvements and, most recently, has been identified as a potential intervention supporting performance of everyday life activities. Objectives: To evaluate whether mindfulness training can improve perceived performance and satisfaction with everyday life activity and secondary psychological outcomes. Methods: This study is a pilot RCT in an interprofessional primary care team. There were 27 participants aged 60 years of age and older living with early cognitive deficits. Participants were randomized into an 8-Week mindfulness training program (n = 14) group, or a Wait-List Control (n = 13) compared at baseline, post-intervention and 4-weeks follow-up. MANOVAS with post-hoc independent t-tests were used to compare between groups at different time points. Results: There was a significant improvement in anxiety for the intervention group compared to the WLC group at post-intervention; Time-2 (p = 0.04) with large effect size (d = 0.80). Conclusion: Mindfulness training significantly improved anxiety scores for clients with early cognitive deficits post-intervention. Further work is required to test the sustainability of reduced anxiety over time, but this study demonstrated that MBSR is a promising primary care intervention for those living with early cognitive deficits.

Key words | Mots clés : Evidence-based practice, Mental health

Exploring the intersection of forced displacement and gender in the Canadian context
Friday: 10:30 AM-10:55 AM Room | Location: Poster 1
OS Poster presentation: Community/Population | Mental health

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Introduction: Forced displacement is described as the forcible relocation of people and communities because of hostilities, natural catastrophes, or other acts of violence/threats to humans (International Organization for Migration, 2019). The lives of people impacted by this turmoil are frequently severely disrupted due to the loss of homes, jobs, and social networks. Intersecting gender and forced displacement can influence the experience of people (Jolof et al., 2022; Lokot, 2019). Gaining an understanding of these gendered experiences is essential for occupational therapists to create treatments and policies that effectively target the unique vulnerabilities and needs of various gender groups. Objectives: This study aimed to explore the intersection of gender and forced displacement in the Canadian context. Methods: A narrative literature review was carried out, focussing specifically on forced displacement and gender equity, using the following databases: CINAHL with Full Text, Academic Search Premier, APA PsycINFO, OVID Medline and Social Work Abstracts. Results: Of 512 retrieved evidence, 105 articles were included in this study. The following themes emerged: (1.) risk of gender-based violence, (2.) access to resources, (3.) economic opportunities, (4.) education, (5.) family and caregiving roles, (6.) healthcare and reproductive needs, (7.) legal rights and protection, (8.) psychosocial well-being, (9.) community engagement, and (10.) cultural norms. Implication for practice:
Gender profoundly shapes the experiences of forcibly displaced people. Recognizing and addressing these gender-specific challenges is vital for providing practical, equitable, and sensitive care and support to displaced individuals and ensuring their well-being and resilience during and after displacement.

**Key words | Mots clés :** Community care, Mental health

**Researcher’s experiences of interviews with individuals with traumatic brain injury**

Friday: 10:30 AM-10:55 AM  Room | Location: Poster 2

**Poster presentation:** Adult | Professional issues/Practice

Rinni Mamman (University of British Columbia, Vancouver) rinni@student.ubc.ca Julia Schmidt (University of British Columbia) julia.schmidt@ubc.ca

Introduction: Semi-structured interviews for research studies with individuals with a moderate to severe traumatic brain injury (TBI) can be uncomfortable for both the participant and the researcher. Individuals with TBI may find it challenging to express their perspectives with people whom they do not have a prior relationship with. Additionally, researchers may lack experience working with people with TBI and have limited strategies when facilitating conversations. Objectives: To explore the experiences of an interviewer when conducting research-based interviews with individuals with TBI and to describe approaches to facilitate improved interviews. Methods: In a prior study, 16 participants with moderate to severe TBI were interviewed by a novice researcher about their experiences after TBI. For this study, data collection consisted of reflexive notes from the researcher’s journaling post-interview. Thematic analysis was used to identify key themes in journal entries, generated about researcher experiences of interviewing people with TBI. Results: Three themes were identified: (1) ‘unintended minimization’ focuses on inadvertent instances when participants are not validated, (2) ‘words matter’ examines the need for researchers to carefully consider phrasing of questions to create connections, and (3) ‘academic armor’ explores how mannerisms or use of technical language can cause barriers in establishing rapport. Conclusions: This study provides fundamental insights for conducting research-based interviews with individuals with TBI, with potential generalizability to other disability populations. This knowledge can serve as a teaching tool and provides direction for clinical practices to tailor their interview approaches to this population’s needs.

**Key words | Mots clés :** Brain injury

**Concussion resources for young children and parents: A systematic search**

Friday: 10:30 AM-10:55 AM  Room | Location: Poster 3

**Poster presentation:** Children and youth | Health and well-being

Mackenzie Kauth (University of Toronto, Toronto) mackenzie.kauth@mail.utoronto.ca Sarah Butt (University of Toronto) sarahemily.butt@mail.utoronto.ca Kylie Mallory (Holland Bloorview) kmallory@hollandbloorview.ca Nick Reed (University of Toronto) nick.reed@utoronto.ca Anne Hunt (University of Toronto) anne.hunt@utoronto.ca

Introduction: Concussions are very common in Canada among children aged 3 to 12 years (Langer et al., 2020). Parents play a vital role in their child’s post-concussion care, highlighting the need for resources tailored to both parents and children. Although many online pediatric concussion resources exist, their suitability for younger children and their parents remains unclear. Objective: This study aims to identify and assess the quality and suitability of online pediatric concussion resources for children aged 3 to 12 years and their parents. Methods: An adapted version of a five-phase systematic search strategy.
described by Mallory et al. (2020) will be used to identify resources. Resource content quality will be evaluated using the Living Guidelines for Pediatric Concussion Care (Reed et al., 2023). Resource suitability will be evaluated using reading level assessment and the Suitability Assessment of Materials (SAM) (Smith, 2008). Results: Expected outcomes include identification of existing online concussion resources that are of high quality and are suitable for younger children and their parents to support the concussion recovery process. A gap in available resources is anticipated, specifically those focused on occupational performance recovery. A knowledge translation tool summarizing study results will be developed and shared with community partners, clinicians and on social media in order to assist parents and children in optimal concussion management. Conclusion: Occupational therapists can use and distribute this research and the related knowledge translation tool to clients and their parents when supporting concussion recovery in children aged 3 to 12 years.

Key words | Mots clés : Brain injury, Community development

Neurodiversity-affirming implications of social skills interventions implemented by social robots

Friday: 10:30 AM-10:55 AM Room | Location: Poster 4

Poster presentation: Non-specific | Technology

Bill Wong billw1628@gmail.com Caroline Mills Claudia Casillas Thy Anh Hoang Matthew Lopez Leslie Villegas-Patterson Caroline Mills

Introduction: Research indicated that social robotics effectively assist individuals with autism spectrum disorder. However, these practices may not align with the principles of neurodiversity-affirming approaches, which emphasize acceptance of neurological differences. Most existing frameworks are rooted in Applied Behavior Analysis (ABA) methodologies, which a significant portion of the autistic community opposes due to ABA’s tendency to normalize and enforce conformity to societal norms. Objectives: This research will educate attendees about the importance of neurodiversity-affirming practices in occupational therapy and how social skills interventions provided by social robotics impacts the autistic community. Methods: The research is a scoping review of literature regarding social skills interventions implemented by social robotics for autistic individuals and their neurodiversity-affirming implications. Search terms for this research were as follows: “autism,” “ASD,” “autism spectrum disorder,” “robotics,” “social robotics,” “social skills,” “neurodiversity confirming,” “ABA,” “applied behavior analysis,” and “strength-based”. Search terms were run through the databases ProQuest Nursing and Allied Health Source, PsycINFO, Pubmed, CINAHL Complete, Medline Complete, Academic Search Complete, and ERIC. Results: From an initial pool of 20 research articles, 12 were selected for a comprehensive review. The findings revealed that many interventions were rooted in ABA approaches, but some exhibited alignment with neurodiversity-affirming approaches, such as personalized instruction and recognition of individual preferences. Practice Implications: This research will contribute to informing the occupational therapy community regarding neurodiversity-affirming practices by exploring potential benefits and challenges associated with these interventions. It will contribute to a more comprehensive understanding of effective and inclusive social skills interventions for autistic individuals.

Key words | Mots clés : Autism, Technology

Dépistage des conducteurs à risque : importance de la collaboration médecin-ergothérapeute

vendredi: 10:30 AM-10:55 AM Room | Location: Poster 5
Présentations par affiches: Les adultes plus âgés | Les soins primaires/les soins de santé primaires
Sandrine Briere (Université de Montréal, Montréal) Lucas Melgares (Université de Montréal) Justine Labourot (Université de Montréal) justine.labourot@umontreal.ca Tania Deslauriers (Université de Montréal) Brigitte Vachon (Université de Montréal) brigitte.vachon@umontreal.ca Justine Labourot Université de Montréal justine.labourot@umontreal.ca

Introduction: Le vieillissement normal peut entraîner une diminution des capacités à la conduite sécuritaire d’un véhicule mais le retrait du permis peut, d’autre part, occasionner une perte de mobilité diminuant la participation sociale et la qualité de vie. Au Canada, les médecins de familles ont un rôle de premier plan dans le dépistage des conducteurs à risque, mais plusieurs études rapportent qu’ils considèrent avoir un faible niveau de confiance pour effectuer cette évaluation. Les ergothérapeutes possèdent les compétences pour réaliser ce dépistage mais, au Québec, sont peu présents dans les équipes de 1re ligne pour répondre à ce besoin. Objectifs : Documenter le niveau de compétence perçu des médecins de famille au Québec pour dépister les conducteurs à risque et leurs attitudes à collaborer avec des ergothérapeutes pour offrir ces services. Methodes : Un devis quantitatif descriptif transversal a été utilisé. Un questionnaire en ligne a été envoyé par courriel via différentes plateformes pour joindre les médecins. Les résultats ont été analysés à l’aide de statistiques descriptives. Résultats : Les 46 participants soutiennent à 76,1% que les médecins de famille ne sont pas les plus qualifiés pour dépister les conducteurs à risque. 97,8% des répondants considèrent pertinent de collaborer avec des ergothérapeutes en 1re ligne pour le dépistage et affirment qu’ils se sentiraient à l’aise de déléguer cette tâche aux ergothérapeutes. Retombées pour la pratique : Nos résultats soutiennent la pertinence d’intégrer les ergothérapeutes en 1re ligne afin d’accompagner les médecins dans le dépistage des conducteurs à risque.

Key words | Mots clés : Soins à base communautaire, Conducteurs âgés

Children’s occupation-based measures: A critical rapid review
Friday: 10:30 AM-10:55 AM Room | Location: Poster 6
Poster presentation: Children and youth | Equity & Justice
Charmaine Leung (University of Toronto, Toronto) charmainecw.leung@mail.utoronto.ca Meeraah Parthasarathy (University of Toronto) m.parthasarathy@mail.utoronto.ca Susan Mahipaul Jane Davis (University of Toronto) ja.davis@utoronto.ca

Introduction: The past 25 years have seen the number of children’s occupation-based measures increase substantially. Occupation-based measures are tools that evaluate occupational outcomes supporting occupation-centred practice. To date, no comprehensive review of these measures has been undertaken, and they have not been critically examined using an anti-ableist perspective. Objectives: This study will describe what is known from the literature about children’s occupation-based measures and whether they employ an anti-ableist perspective. Methods: A critical, rapid review is in progress to synthesize the key concepts, psychometric properties, and outcomes of children’s occupation-based measures. Manuals and peer-reviewed and grey literature will be selected if they describe an occupation-based measure for children between the ages of 2 and 12 years and are published in English. Relevant information will be extracted and synthesized. Four anti-ableist principles—interdependence; performance diversity; occupational engagement; and perspectives of children (Facca et al., 2020; Goulden et al., 2023)—will be used to critically review each measure. Findings: Preliminary analysis indicates the most common outcomes are participation, competence, and functional performance. Most self-report measures focus on children over 5 years, and anti-ableist principles of interdependence,
performance diversity, and occupational engagement are seldom addressed. Conclusion: This study will provide a systematic synthesis of key aspects of children’s occupation-based measures. The critical review will identify the need for developing anti-ableist tools to facilitate inclusive practices that focus on the unique and diverse occupations of children. The findings will provide occupational therapists with a tool for identifying occupation-based measures that support an anti-ableist perspective.

**Key words | Mots clés**: Assessments, Equity & Justice

(Re)making third places through occupation: Contributing to social transformation
Friday: 10:30 AM-11:30 AM  
Room | Location: 102

**OS Extended discussion**: Community/Population | Equity & Justice

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Introduction: Third places - physical or virtual places beyond home and work - have been identified by disciplines from public health to urban design as key to addressing rising social isolation and declining social cohesion (Dolley & Bosman, 2019; Finlay et al., 2019). Although occupational science literature evidences some engagement with this concept, existing scholarship has not focused on how third places are made and remade through occupational participation. Given that third places can also reproduce broader social exclusions tied to social markers such as gender identity and race, it is further imperative to attend to how such places can be designed and enacted to support social belonging and occupational needs for social groups impacted by inequities. Objectives: This session’s aims are to 1) enhance understanding of how third places can be sites for enacting social transformation through occupation, and 2) identify priorities for further occupation-focused research on third places. Session description: A 15-minute igniter presentation will use findings from a scoping review addressing third places in the lives of precarious workers to introduce the concept of third places and the centrality of occupation for (re)making such places to meet diverse social and occupational needs. Using a modified World Café method, participants will then rotate through two small groups over 30 minutes to discuss the following questions: a) What existing research, practice, and community examples of third places can illuminate how occupation contributes to placemaking? and b) What knowledge is needed to inform occupation-based approaches to (re)make ‘third places’ in ways that support inclusion of groups impacted by inequities? Within the final 10 minutes of the session, key discussion points and take-away messages will be shared. Practice implications: Third places hold potential as sites through which occupation can be mobilized for social transformation, particularly if they are designed in ways that meet multi-faced occupational and social needs of diverse groups. Conclusion: Applying understandings about the role of occupation in placemaking can position occupational therapists and occupational scientists to help (re)make third places in ways that reduce social inequities.

**Key words | Mots clés**: Equity & Justice, Occupational science

It’s About Time! Introducing a new draft national competency-based fieldwork evaluation tool for community feedback
Friday: 10:30 AM-11:30 AM  
Room | Location: 103

**ACOTUP Sponsored Session**: Non-specific | Fieldwork/Education

*Susanne Murphy, Caroline Storr, Annie Rochette, Manon Boucher, Mary Roduta Roberts*
Following strong partnership development and adoption of the New Competencies for Occupational Therapists (2021) across Canada. ACOTUP recognized a call for a new national fieldwork evaluation tool. This call was a culmination of preceptors’, students’, and fieldwork faculty’s recognition that a tool must be timely to administer, incorporate the latest technological interfaces and reflect objective performance measurement of authentic learning situations which typically characterize fieldwork. A working group was struck with representation from the Canadian Occupational Therapy University programs and strong involvement by the ACOTUP sub-committee on University Fieldwork Education in Spring 2022. A new draft evaluation tool will be presented outlining the rationale for the development of a tool in both French and English from inception with the objective of co-creating a tool that can be used by occupational therapists supervising occupational therapy students in developed and emerging practice areas and environments across Canada. Important interactive community engagement and feedback will be solicited through roundtable discussions at this phase of tool development. The tool will then be pilot-tested nationally for validity and reliability following revisions based on this session’s important community feedback.

**LandBack: Dismantling power with Indigenous Peoples in Canadian occupational therapy**

Friday: 10:30 AM-11:30 AM  
**Room | Location:** 104

**Extended discussion:** Community/Population | Equity & Justice

Katelyn Favel favel@ualberta.ca Nichol Marsch nichol.marsch@gmail.com Tara Pride tarapride@dal.ca Deanna Starr deanna@miskihnak.ca Kaarina Valavaara Kaarina.Valavaara@dal.ca Angie Phenix angelaphenix@gmail.com

Introduction. Canada is built on colonization and every social, economic, political, and moral system has been designed with colonial policy and practices. Occupational Therapy (OT) is no exception. With the release of the new Competencies for Occupational Therapists in Canada in 2021 and the OT Truth and Reconciliation Commission (TRC) Commitment Statement (Valavaara & Phenix, 2023) there is an international spotlight on Canada. However, it is unclear how Competency C is implemented into OT education, clinical practice and research. LandBack is a social movement started in 2018 to get Indigenous lands back into Indigenous hands. As the profession of OT was created on unceded Indigenous territories, LandBack highlights the need to transfer power and resources to Indigenous OTs, students, clients and communities as noted by Competency C1.2 “work to reduce the effects of the unequal distribution of power and resources on the delivery of occupational therapy services”.

Objectives. To explore how to transfer power and resources to Indigenous Peoples in OT education, clinical practice, and research. Session description. An explanation of grounding principles of the rights and sovereignty of Indigenous Peoples and how they relate to Competency C and OT TRC Commitment Statement (Valavaara & Phenix, 2023). Small group discussions will follow to identify actions to transfer power and resources to Indigenous clients, occupational therapy students, and clinicians. Lastly, a large group discussion to share key learnings and provide further action ideas that inform education, research and practice. Practice implications. Competency C identifies the need to address the dominant ideologies and assumptions in the profession of OT as a minimum standard of practice. The purpose of this session is to identify action points to dismantle systems they engage in. Conclusion. Transferring power to Indigenous voices is a minimum requirement in OT education, research and practice to address the underpinnings of oppression in OT, with the aim of providing safer care to Indigenous peoples and communities.

**Key words | Mots clés :** Equity & Justice, Occupational justice
National Occupational Therapy Certification Examination (NOTCE) & Membership Session:
CAOT – your career partner for life
Friday: 10:30 AM-11:30 AM Room | Location: C1
CAOT Sponsored Session: |
CAOT Staff

Join the CAOT membership & NOTCE departments as they host a live session about important information and steps that new grads are required to complete prior to writing the NOTCE. Also learn how CAOT can support you as you pursue provisional and/or full licensing on your road to becoming a practicing OT. The live session will be presented in English. If you’re not able to attend, a recording of the English and French presentations will be made available on CAOT’s website.

The outline of session is as follows:

CAOT Membership: How and why become a provisional associate?
Insurance for provisional licensing
New practitioner member discounts
NOTCE: Dates and deadlines
Responsibilities of each: NOTCE department, Measure Learning, Exam Writer (you) Steps overview Exam day Q & A

Please note, the session will not cover the content and outline of the NOTCE.

Migration Rights: Our role in resisting the causes of forced migration and supporting those experiencing it
Friday: 10:30 AM-11:30 AM Room | Location: 101
Conversations that matter: Community/Population | Advocacy/Leadership
Sara Abdo sara.abdo@dal.ca, Setareh Ghahari setareh.ghahari@queensu.ca, Suzanne Huot suzanne.huot@ubc.ca (Occupational Justice for Newcomers Network)

This dialogic session will bring together occupational therapists, occupational scientists and students interested in migration as a form of mobility. Participants will discuss the rights of people to move, as well as the right to stay, amidst precarious social and political contexts. Using current research and practice experiences, this dialogic session will:

1. Describe and critique current discourses in occupational therapy and occupational science on migration rights.
2. Identify the practical and political potential of occupational therapy and occupational science within migration rights.

This session will challenge the profession’s current understandings of its role within forced migration contexts. In so doing, it will also explore its potential influence on who and how migration is governed within Canada.

Guidelines for curriculum renewal in Canadian occupational therapy university programs
Friday: 11:05 AM-11:30 AM Room | Location: 106
Introduction: While all occupational therapy university programs in Canada engage in curriculum renewal, with an appreciation of accreditation standards, there are no national guidelines for how to implement or support the process. The need for such guidelines is especially timely given the recent publication of the Canadian Occupational Therapy Competencies (COTC) (2021) and the requirement for all occupational therapy university programs to align with the COTC. Objectives: To identify and describe nationally developed practical guidelines for occupational therapy curriculum renewal in Canadian university programs. Approach: Members of a national occupational therapy education committee with representation from the 14 Canadian occupational therapy university programs reviewed, appraised, and integrated best practice literature, expertise, and experiential knowledge recommended for curriculum renewal. Findings: Guidelines for curriculum renewal in occupational therapy university programs in Canada were developed through a detailed written description and an accompanying infographic. The guidelines provide clarity regarding the pragmatic need for (1) a systematic renewal process situated in the university programs’ context, strengths and desire for change, (2) a central commitment of funding with resource allocation toward a curriculum renewal team, administrative support, curriculum mapping tools and training, and (3) intentional and ongoing practices to support course alignment and responsiveness to change in the renewed curriculum. Conclusions: The guidelines provide Canadian occupational therapy university programs with process and direction for carrying out curriculum renewal, whilst offering adequate flexibility to be relevant across Canada’s unique and diverse programs.

Key words | Mots clés : Evaluation, Teaching/education

A parent’s positive touch program enhances preterm infants’ developmental outcomes
Friday: 11:05 AM-11:30 AM Room | Location: 107

Paper presentation: Children and youth | Primary care/Primary healthcare
Sandra Fucile (Queen’s University, Kingston) sandra.fucile@queensu.ca Laurie Snider (McGill University) Laurie.Snider@mcgill.ca Karel O’Brien (University of Toronto) karel.Obrien@sinaihealth.ca Kimberly Dow (Queen’s University) DowK@queensu.ca

Introduction: Early experiences in the neonatal intensive care unit (NICU) can influence developmental outcomes in infants born preterm1. Substantial evidence supports the benefits of clinician-administered sensorimotor interventions on improving developmental outcomes2. There remains a significant gap in the literature on the efficacy of parent-delivered sensorimotor interventions, referred to as a parent’s positive touch program3. Objective: To assess the efficacy of a parent’s positive touch program on infant’s developmental outcome. Methods: A randomized trial was conducted in a level II-III NICU. Ninety-four infants born ≤ 33 weeks gestation were enrolled. After consent was obtained, infants were randomized into an experimental (n=46) or control (n=48) group. Infants in the experimental group received a 15-minute intervention consisting of three components including tactile input to the oral structures, trunk and limbs, and non-nutritive sucking. Parents administered the program 24 hours after...
discontinuation of continuous positive airway pressure. Infants in the control group received standard care. The outcomes were attainment to full independent oral feeds (days), occurrence of direct breastfeeding, and motor function (Test of Infant Motor Performances). Results: Infants in the experimental group attained independent oral feeds sooner than those in the control group (p=0.038). A greater number of infants in the experimental group received direct breastfeeding compared to controls (p=0.023). Both groups had similar mean motor function scores. Conclusion: These findings support the notion that a parent’s positive touch program can enhance infant’s developmental outcome and highlights the need for more advocacy of parent-delivered interventions in all NICUs.

**Key words | Mots clés**: Acute care, Evaluation

**Occupational therapists’ perceptions of using smartwatches to detect falls**
*Friday: 11:05 AM-11:30 AM*  
**Room | Location**: 108

**Paper presentation**: Older Adult | Technology  
*Madison Denney (Bond University, Gold Coast) madison.denney@student.bond.edu.au*  
*Susan Brandis (Bond University) sbrandis@bond.edu.au*

Introduction: There are several strategies and assistive technologies that can be used to prevent and detect falls for the older population, however, these are not fully understood. The latest advancement in fall detection technologies offers automatic falls detection and is a form of wrist-worn technology commonly referred to as a smartwatch. Objectives: This research explored the potential clinical application of smartwatches to occupational therapy practice and aims to understand occupational therapists’ perceptions of using smartwatches to detect falls in adults over 60. Methods: An exploratory quantitative study using an online self-administered survey was used. There were three sections to the survey which included: 1) multiple choice questions to collect demographic data, 2) Likert scale questions using the Technology Acceptance Model to understand occupational therapists’ perceptions, and 3) open-ended questions to explore facilitators and barriers to using smartwatches to detect falls. Results: A total of 36 participants fully complete the survey. The results showed that occupational therapists are open to prescribing smartwatches for fall detection purposes. Personal, environmental, and occupational facilitators and barriers to utilising smartwatches for fall detection were identified. Conclusion: Occupational therapists perceive smartwatches to be useful as a form of fall detection technology, however, several facilitators and barriers were identified in prescribing smartwatches to detect falls in adults over 60. Results were themed into three main categories: person, environment, and occupation. The findings of this study provide key insights for occupational therapists and smartwatch manufacturers on how to increase access to smartwatch technology for falls detection and enhanced participation.

**Key words | Mots clés**: Falls, Technology

**Primary care occupational therapists to coordinate mental health-related sick leaves**
*Friday: 11:05 AM-11:30 AM*  
**Room | Location**: 109

**Paper presentation**: Adult | Primary care/Primary healthcare  
*Justine Labourot (Université de Montréal, Montréal) justine.labourot@umontreal.ca*  
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Introduction: Practice guidelines for the recovery and return to work (RTW) of people with common mental disorders (CMDs) recommend access to interprofessional and intersectoral interventions. In Canada, family physicians are responsible for managing the sick leave, but they tend to work in silos and lack knowledge and time to effectively manage patients’ occupational health. Coupled with income disparities and insurance coverage variations, this leads to highly variable care trajectories, creating inequity. Little is known about the impact it really has on patient's recovery. Objectives: Describe patients’ perspectives of factors that influenced their mental health-related sick leave trajectories and their access to primary care mental health and RTW services. Methods: A descriptive qualitative research design was used. Semi-structured individual interviews of approximately 60 minutes were conducted with 14 participants on a videoconference platform. Transcriptions were analyzed using conventional content analysis. Results: Our results highlight how the difficulties of family physicians to appropriately manage patients’ recovery and RTW process create a burden on the patient, hindering their recovery process. As a result, participants express the need for a care coordinator who uses a patient and recovery-oriented approach and who ensures close collaboration with all stakeholders. In our participant’s trajectory, only the occupational therapists played such a role. Conclusion: Our findings support the implementation of occupational therapists in primary care settings to help both the patient and their family physician in managing the services required to ensure recovery in a timely manner regardless of their insurance coverage or financial resources.

Key words | Mots clés: Mental health, return-to-work

Shared-decision making processes within telerehabilitation in rural South India

Friday: 11:05 AM-11:30 AM Room | Location: Poster 1
Poster presentation: Child | Primary care/Primary healthcare
Caroline Eagles (University of Toronto) Vanessa Yim (University of Toronto) Tim Bressmann (University of Toronto) Dinesh Krishna (ASSA), Navamani Venkatachalapathy (ASSA) Marie Brien (ASSA), Franzina Coutinho (ASSA), Sylvia Langlois (University of Toronto)

Introduction: In shared decision making (SDM), the health care team partners with the clients to jointly consider available treatment options based on their respective values and preferences, with the goal of collaboratively determining the best care plan (Smalley et al., 2014). Objectives: The study explores whether SDM is being effectively implemented within telerehabilitation services, provided by Occupational Therapists and Speech Language Pathologists, to children with neurodevelopmental disabilities and their families who live in rural South India. Methods: The study will utilize a concurrent triangulation mixed-method design. Participants (N=24) will be parents of children with neurodevelopmental disabilities, recruited from a pool of current telerehabilitation services recipients. Quantitative data will be collected using the revised 4-item SDM measure developed by Smalley and colleagues (2014). Qualitative data will be collected in focus groups about the implementation of SDM, and submitted to thematic analysis to explore key themes (Onwuegbuzie & Combs, 2011). Results: The results will show whether an SDM approach is effectively implemented and increased use of SDM in the past 12 months makes parents feel more involved in their child’s care and the work of the rehabilitation team. Practice Implications: Through gaining a deeper understanding of the SDM process, the study will provide insights on ways to shape future telerehabilitation service provision to rural areas that is client-
centred and enhances effectiveness. This learning can inform the design of telerehabilitation services aiming to increase the accessibility of care for under-resourced, rural communities in Canada.

**Key words | Mote clés :** Evidence-based practice, Program evaluation

### How to raise awareness of diversity using musical activities?

**Friday: 11:05 AM-11:30 AM | Room: Poster 2 | Location:** Poster 2

**Poster presentation:** Children and youth | Equity & Justice

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**Introduction:** People with intellectual disability (ID) often face social exclusion and discrimination due to prejudices and stereotypes. A priority proposed by Quebec’s government targets the improvement of children’s knowledge and skills about people with disabilities. With the aim of reducing stereotypes among students in elementary school, a project between occupational therapists and a music teacher was deployed to allow students in the fifth and sixth grades to participate in a musical activity in the company of people with ID. **Objective:** The aim of this project is to explore the outcomes of this musical project to raise awareness of the diversity from the students’ perspective. **Methods:** Students were invited to complete a short questionnaire about learning made from the activity, the benefits of their participation, and the strategies that helped them the most to prepare for this experience. The questionnaires were analyzed by two analysts. **Results:** Students’ level of comfort and respect with people with ID as well as their open-mindedness evolved positively through the activity. Students greatly appreciated the presentation on ID made by the school occupational therapist. Despite the stress felt by most of the students before the activity, they would finally like to do more activities with people with ID. **Conclusion:** There are very few studies that have obtained the perspective of students regarding their open-mindedness for people with disabilities. This project supports the relevance of initiatives aimed at raising awareness for diversity of abilities among youth as well as informing about the role of occupational therapists in such an initiative.

**Key words | Mots clés :** Equity & Justice, Occupational justice

### Developing a standardized winter mobility wheelchair evaluation course

**Friday: 11:05 AM-11:30 AM | Room: Poster 4 | Location:** Poster 4

**Poster presentation:** Non-specific | Technology

*Jacquie Ripat* (University of Manitoba, Winnipeg) jacquie.ripat@umanitoba.ca  
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*Kara-Lyn Harrison* harris78@myumanitoba.ca

**Rationale:** Winter weather conditions negatively impact mobility and participation experiences of individuals who use manual wheelchairs (MWCs) and appropriate technology innovation and strategy training is limited. **Objectives:** To create a safe, ecologically valid outdoor environment encompassing a comprehensive range of winter-specific obstacles and to standardize procedures for fabrication and replication of course components. **Methods:** Phase 1 used ethnographic “go-along” interviews to document specific winter challenges encountered by MWC users and adaptive strategies they
employed. Phase 2 used a 4-step co-design framework with key informants (MWC users, caregivers, professionals, and policymakers) to design and validate the Standardized Navigation Of Winter Mobility & Accessibility Network (SNOWMAN) course. Phase 3 involved an iterative process of obstacle fabrication and phase 4 entailed creation of a standardized protocol for course replication and measurement of obstacle component and ambient weather conditions. Results: The final SNOWMAN course was constructed in a sheltered outdoor location. It consisted of nine winter conditions that included variation in snow depth and density; vertical and side sloping obstacles; and gradations of dry, slushy, and icy composition. Key informants affirmed the course was comprehensive and ecologically valid. A structured protocol enabled replication and maintenance of obstacles closely resembling real-world winter conditions and ensured practical implementation of the course. Practice Implications: The development of the SNOWMAN course addressed a critical void. It can serve as a clinical tool for training MWC users in winter mobility strategies/skills and in research/development to innovate, evaluate, and compare assistive technologies specific to winter weather conditions.

Key words | Mots clés : Seating, Technology

EMPIRe2–MS: virtual health delivery of a fatigue management intervention
Friday: 11:05 AM-11:30 AM Room | Location: Poster 5
Poster presentation: Adult | Chronic conditions
Justin Ng ng999@student.ubc.ca Marisa Lin marisali@student.ubc.ca Denise Kendrick Denise.Kendrick@vch.ca susan.forwell@ubc.ca

Introduction: 80% of people with multiple sclerosis (MS) experience fatigue, which has been described as among the most disabling of symptoms. MS fatigue reduces an individual’s ability to participate in activities of daily living and leisure, social participation, as well as maintain employment. Objectives: The EMPIRe2-MS is a 6-session, occupational therapy-delivered fatigue management program. The aim of this study is to assess the virtual delivery of the EMPIRe2-MS, with the following objectives: (1) to describe participants’ MS fatigue experience, (2) to determine change in MS fatigue impact, severity and self-efficacy after program completion and (3) to collect general feedback on program content and format. Methods: An existing dataset will be expanded upon with quarterly recruitment through a local MS clinic. Self-reported outcome measures including the Fatigue Severity Scale, the Modified Fatigue Impact Scale and the MS Fatigue Self-Efficacy will be completed at four time points. The Comprehensive Fatigue Assessment Battery will be used to collect demographic information and characterize fatigue. A feedback questionnaire will be completed after completion of the program. Descriptive statistics and ANOVA tests will be applied to the quantitative data, while content analysis will be applied to the text data. Results: We anticipate that participation in the EMPIRe2-MS program will result in reduced fatigue impact and severity and improved fatigue self-efficacy. Conclusion: Findings obtained from the virtual EMPIRe2-MS program will help determine whether a virtually administered fatigue management program is an effective program to reduce fatigue-related symptoms in people with MS, leading to increased occupational engagement.

Key words | Mots clés : Community care, Multiple sclerosis

Occupational therapists’ journeys towards culturally safer care: A narrative inquiry
Friday: 11:05 AM-11:30 AM Room | Location: Poster 6
Poster presentation: Not applicable | Equity & Justice
Rationale: Indigenous communities have identified cultural safety training for healthcare providers as one important approach to address racism and health inequities experienced by Indigenous people in Canada. Cultural safety is not achieved through single educational events; it requires ongoing critical reflexivity and engagement by the healthcare provider. Intentional, co-created learning spaces such as Communities of Practice (CoPs) may support the ongoing reflexivity and learning needed to strengthen culturally safer practices among occupational therapists. Objectives: Explore the: 1) impact of participation in a cultural safety CoP on the self-perceived clinical practices of pediatric occupational therapists, 2) value of CoPs as a model for Indigenous cultural safety training (ICST). Methods: Participants (n=5) engaged in six facilitated CoP sessions. CoP content was co-created with participants based on expressed learning needs and ICST best practices. Data collection includes individual, semi-structured interviews before and after the CoP series and group reflections gathered during the CoP sessions. Directed content analysis, based on the Cultural Safety Framework (Horrill et al., 2021), will guide initial coding. Using narrative inquiry methodology, themes of participants’ journeys towards culturally safer care will be explored, reorganized, and combined to highlight common and disparate experiences. Results: Presented as one/more re-storied narratives describing participants’ journeys towards culturally safer care (including successes and challenges), this study will describe the CoPs impact on participants’ attitudes and behaviours, informing if and how CoPs may support future ICST. Conclusion: Ongoing and reflective engagement with ICST to prompt theory into practice is critical to advancing health equity within Canada.

Key words | Mots clés : Advocacy, Equity & Justice

Unlocking Your Writing Potential: A Guide to Publishing in Occupational Therapy Now
Friday: 11:45 AM-12:45 PM Room | Location: 106
Lunch and learn
Elizabeth Pooley, Managing Editor, Occupational Therapy Now, Nicola Schaan, Topic editor: Private Practice Insights, Occupational Therapy Now, Kristin Harold, Director of Communications, Canadian Association of Occupational Therapists

Do you have compelling article ideas or valuable insights for fellow occupational therapists? Imagine workshopping your ideas, working with mentors, or sharing your conference presentation with a wider audience. Join us for an informative lunch to learn to explore the authorship experience with OT Now. Gain insights into the process, contemplate your potential contribution, and brainstorm ideas for articles you’d love to see in the magazine.

Community Occupational Therapy: Increasing capacity for student placements
Friday: 1:00 PM-1:25 PM Room | Location: 106
Paper presentation: Non-specific | Fieldwork/Education
Jaime Wong (University of British Columbia, Vancouver) jaiwong@student.ubc.ca Amanda Wright (University of British Columbia) awriight@student.ubc.ca Lauren Laing (Island Health)
**Introduction:** During the 2022-2023 academic year, Community Health Services (CHS) in one health authority accounted for 8% of student placement offers for a Master of Occupational Therapy (MOT) program (Drynan & Gardner, 2023). With student placements contributing towards the overall advancement of occupational therapy (OT) (AOTA, 2022), it is important to explore ways to increase capacity for student placements from the perspective of community based occupational therapists (OTs). Objectives: To investigate the barriers and facilitators for increasing capacity to accept OT students for placement in CHS. Methods: A link to a web-based survey will be sent to 95 OTs working in CHS via email. The survey consists of closed-ended questions (yes/no, Likert scale questions) and open-ended questions about the perceived barriers and facilitators to increasing capacity for student placements. Descriptive analysis of measuring for central tendency and variability will be used. The text data will be analyzed using content analysis method. Results: We anticipate lack of time, preparedness, workload, and financial compensation as well as burnout to be the major barriers for Island Health CHS OTs and the main facilitator being increased support from CHS and university personnel. Conclusion: The results gleaned from this study will provide direction on the areas to target to reduce the impact of barriers and to work to augment facilitators. This study will be pivotal in building the OT fieldwork program in CHS to support the current and growing need for increased OT student placements.

**Key words | Mots clés:** Community development, Fieldwork

**Action Based Cognitive Remediation: Improving cognition in individuals with psychosis**
Friday: 1:00 PM-2:00 PM  Room | Location: 107
**Extended discussion:** Adult | Mental health
*Laurie Kitamura (Interior Health, Kamloops) laurie.kitamura@interiorhealth.ca Jen Sheeley (Interior Health) jen.sheeley@interiorhealth.ca*

Introduction: Cognitive impairment is a hallmark feature of psychotic disorders, affecting attention, working memory, verbal learning and memory, and executive functioning (Bowie & Harvey, 2006). Aside from atypical antipsychotic medications and compensatory strategies, mental health clinicians often lack tools designed to improve cognitive outcomes. Action Based Cognitive Remediation (ABCR), a group intervention developed by Dr. Chris Bowie, combines cognitive behavioural principles with cognitive training. ABCR teaches and practises specific strategies using computerized cognitive exercises, real-world simulations, and facilitated discussions, leading to improved functional outcomes for individuals with both cognitive impairment and psychosis. Objectives: By the end of this presentation, the audience will learn introductory information on an ABCR group’s format, pre and post measures, the role of individual goal setting and common functional outcomes. The learning experience will include demonstration of specific computer exercises and an example of a real-world simulation. Participants will learn of occupational therapy’s emerging role as a key provider for this intervention. Practice Implications: Interest and evidence in cognitive remediation is growing, and opportunities for occupational therapists to obtain training in ABCR are available. Occupational therapists are also receiving support and funding to initiate programs in community mental health, substance use, and tertiary mental health settings in British Columbia. Based on the authors’ training and experience facilitating six ABCR cohorts, functional improvements are the norm and not the exception. Clients who have attended ABCR groups have experienced overall improved cognition, a return to work or volunteering, enhanced sense of connection to others, an increase of independent living skills, and
increases in self-efficacy and confidence. Conclusion: A B C R is an effective group intervention aimed to reduce cognitive dysfunction in individuals with a psychotic disorder. A B C R bridges computer training to real-world examples, resulting in meaningful outcomes for the client.

**Key words | Mots clés**: Mental health, Technology

**Impact de la COVID-19 sur les proches aidants 2 ans après**

vendredi: 1:00 PM-1:25 PM Room | Location: 108

**Présentation orale (exposé)**: Les adultes plus âgés | Les conditions chroniques

Jacinthe Savard (Université d'Ottawa, Ottawa) jsavard@uottawa.ca Sébastien Savard (Université d'Ottawa) Patrick Duong (Université d'Ottawa) Josée Benoît (Université d'Ottawa) Danielle de Moissac (Université de Saint-Boniface) Suzanne Dupuis-Blanchard (Université de Moncton) Annie Robitaille (Université d'Ottawa) Nelly Oriane Hatungimana (Université d'Ottawa)

Introduction: Pour soutenir les proches aidants dans les occupations reliées à ce rôle, les ergothérapeutes doivent en saisir les différents aspects. Des études publiées pendant la pandémie COVID-19 (2020-2021) soulignent que le confinement a mené à une diminution de services, une augmentation des tâches des proches et davantage d’isolement. Mais quels ont été les impacts à plus long terme? Objectif: Documenter les changements dans l’expérience des proches aidants de personnes aînées, l’assistance offerte à leur proche, le soutien reçu et leur bien-être psychologique pendant la seconde année suivant le début de la pandémie. Méthode: 83 aidants provenant de 4 provinces canadiennes ont rempli un questionnaire en ligne entre octobre 2021 et février 2022, puis à nouveau 6 mois plus tard (avril à août 2022). De plus, 8 proches aidants ont participé à une entrevue qualitative. Résultats: La majorité des services de soutien à domicile aux aînées ont été maintenu pendant la pandémie, à l’exception des services de répit et de transport, mais certains avec un personnel restreint. L’aide offerte par les proches aidants s’est accrue pendant le confinement, surtout pour la gestion des soins, les soins personnels, la préparation de repas, le soutien psychologique et le transport, et ce niveau plus élevé est maintenu en 2022. Les participants rapportent un fardeau élevé et un impact négatif de la pandémie sur leur santé et sur celle du proche aîné. Implication pour la pratique: Ces résultats suscitent la réflexion sur l’aide que ergothérapeutes peuvent apporter aux proches aidants dont l’équilibre occupationnel est bouleversé par une situation de crise.

**Key words | Mots clés**: Soins à base communautaire, Soins de longue durée

**A balancing act: Occupational balance among mature graduate students**

Friday: 1:00 PM-1:25 PM Room | Location: Poster 1

**OS Poster presentation**: Adult | Health and well-being

Brittany Bhatnagar (Dalhousie University, Halifax) b.bhatnagar@dal.ca Heidi Lauckner (Dalhousie University) heidi.lauckner@dal.ca Karen Gallant (Dalhousie University) karen.gallant@dal.ca

Introduction: Occupational balance is a multidimensional concept that describes everyday doing in terms of balancing obligatory and chosen activities that can impact wellbeing (Eakman, 2016). While thoroughly explored among working adults (Wagman et al., 2011), little is known about the experiences of mature graduate students, who often juggle school with other life obligations. Objectives: This research explored the lived experiences of occupational balance among mature graduate students during the writing stages of their Master’s theses. Methods: Informed by phenomenological approaches, this research involved 8 semi-structured interviews with full-time Master’s students who were also
involved in another commitment (e.g., paid work). Data were analyzed using Interpretative Phenomenological Analysis (IPA; Smith et al., 2022). Findings: Participants described feelings of overwhelm and loss of control within the unique context of graduate studies, which included demands on their time beyond their thesis work, lack of structure within graduate studies, and high academic expectations. Participants also described negotiating conflicted feelings between various responsibilities and their desire to pursue restorative activities. Participants used a variety of strategies to achieve what they described as a sense of balance including: creating their own structures, engaging in concurrent occupations that met multiple needs to save time, and, for some, considering balance over the long term. Conclusion: Experiences of occupational imbalance are common among mature graduate students manifesting as feelings of overwhelm, stress, and pressure. Students’ strategies can inform academic supports and advance theoretical understandings of occupational balance.

Key words | Mots clés: Occupational science, Teaching/education

In the spirit of ᐃᑲᔪᖅᑎᒌᓐᓂᖅ - Piliriqatigiinniq/Ikajuqtigiinniq- Learning ways to integrate services impacting early childhood mental health

Friday: 1:00 PM-1:25 PM Room | Location: Poster 3
Poster presentation: Children and youth | Health and well-being
Kaitlynn Dewhirst (Queen's University, Yellowknife) k.dewhirst@queensu.ca Kendall Aknavigak (Kitikmeot Friendship Society) Charles Zikalala (Kitikmeot Friendship Society) Eva Kakolak (Elder)

Introduction: Based in Cambridge Bay, Nunavut (NU), the Kitikmeot Friendship Society is developing early childhood mental health programs and services to support the health and wellness of children and families. Systemic barriers, such as racism, colonization, and medical models of service delivery that have resulted in siloed and fragmented systems compound health challenges for children and families in Cambridge Bay. While evidence indicates that integrated systems improve health and wellness outcomes; there is a gap in knowledge regarding how to transform complex systems from siloed or nodular forms to integrated structures. Purpose: To co-create with knowledge holders a shared awareness of current early childhood mental health services and programs and, learn how early childhood mental health services should be improved or integrated in Cambridge Bay, Nunavut.
Methods: The research study is based theoretically within a framework of postcolonial theory and guided by community based participatory action research principles. The collaborative decision-making framework will guide the interpretive descriptive qualitative study method, including individual interview and focus groups. Data collected will be analysed through qualitative thematic analysis. Conclusion: This study will go some way to establishing a common understanding of services impacting early childhood mental health in Cambridge Bay and co-create with knowledge holders, ways to integrate these supports.

Key words | Mots clés: Community development, Mental health

Therapy protocols for an upper limb stroke rehabilitation wearable

Friday: 1:00 PM-1:25 PM Room | Location: Poster 4
Poster presentation: Adult | Technology
Nichelle Hughes (University of Toronto, Toronto) nichelle.hughes@mail.utoronto.ca Nicole Nagy (University of Toronto) Zhangfeng Zhou (University of Toronto) Xinyu Liu (University of Toronto) Rosalie Wang (University of Toronto)
Introduction: Stroke is a leading cause of disability, with many stroke survivors experiencing long-term upper limb (UL) deficits. Canada’s health care system is strained, with many stroke survivors not having access to the rehabilitation they need to regain physical function. New ultrasoft bottlebrush elastomer (BBE)-based rehabilitation wearable technology with an integrated chip (IC) could increase the ability for clients to engage in effective rehabilitation from home without direct clinician supervision. Objectives: To apply practice and evidence-based knowledge to create and analyze three case personas of clients who could benefit from upper limb rehabilitation to inform development of these technologies and associated occupational therapy protocols. Approach: While the first prototype of the wearable is currently in the laboratory testing phase, this next step will analyze three case personas of fictitious stroke survivors created based on real stories of stroke survivors with UL deficits. A team comprised of clinicians experienced in post-stroke rehabilitation, engineers, and stroke survivors with UL deficits will conduct the analyses to derive technology design requirements and incorporate evidence-informed occupational therapy protocol components needed for a useful intervention. Findings: Creating a new stroke rehabilitation intervention using technology requires co-design and clinician team expert analysis to support usability and feasibility of the intervention. The study findings will outline protocols for use of the technology in occupational therapy. Conclusion: The burden of stroke recovery on the Canadian health care systems is high, but this burden could be lessened by a UL wearable to aid in at-home rehabilitation.

Key words | Mots clés : Stroke, Technology

Deepening our understand of belonging as a dimension of occupation

Friday: 1:00 PM-1:25 PM Room | Location: Poster 5

OS Poster presentation: Community/Population | Professional issues/Practice

Anne-Cécile Delaisse (The University of British Columbia, Vancouver) adelaisss@student.ubc.ca Suzanne Huot (The University of British Columbia) suzanne.huot@ubc.ca

Introduction: While doing, being, becoming and belonging are considered as dimensions of occupation (Wilcock, 2007); belonging has received less attention from occupational scientists. Moreover, the occupation-based literature tends to equate belonging to connectedness and to take a sedentarist approach in which mobility is considered as a challenge for occupational engagement and belonging. Objectives: to critically examine belonging as a dimension of occupation and to consider its constructed, dynamic and multifaceted nature (Healy, 2019) in the context of migration. Methods: Cross-national comparative ethnography in Canada, France and Vietnam, including 22 observations in Vancouver’s and Paris’ Vietnamese communities as well as 86 interviews with 64 participants (international students and recent migrants in Paris and Vancouver; returnees from France and Canada in Vietnam). Findings: Participants’ belonging is addressed with regards to 1) routines, familiarity and family, 2) mobility and immobility, 3) structure and agency. Conclusions: The study challenges static notions of occupation and belonging in occupational science and advances understanding of how both are shaped by normative discourses. Firstly, we highlight that occupation and belonging are situated within, but not bounded to a specific location. For instance, a sense of home can be cultivated through routine occupations performed in various locations. Secondly, belonging through occupations is influenced by discourses that define certain occupations as criteria for belonging (e.g., engaging in occupation with or like locals in the receiving country). Finally, migrants’ agentively perform belonging through occupations in a way that can challenge or perpetuate these discourses to achieve certain gains.

Key words | Mots clés : Occupational science, Theory
Professional identity: A lever for negotiating interprofessional roles.
Friday: 1:00 PM-1:25 PM Room | Location: Poster 6

Introduction: Occupational therapists are increasingly being asked to exercise leadership and influence to optimise their contribution, improve access to their services, and advocate for occupational rights for individuals and communities. However, they continue to report variable awareness and recognition of their roles, and difficulties in positioning themselves effectively in interprofessional teams and acting in accordance with their professional identity. It is essential to better understand the influence of the practice context and relationships within interprofessional teams on the construction of occupational therapists’ professional identity and the enactment of their roles. Objectives: To explore how occupational therapists construct their professional identity in interprofessional teams in different contexts and its impact on their role optimisation. Methods: A case study of occupational therapists in Quebec is being conducted with practitioners in public and private practice settings using observation of interprofessional meetings and individual interviews. Findings: Contextual influences on the formation of occupational therapists’ professional identity and agency are falling into two categories: distal contextual variables (issues at the level of the profession: status and professionalization, legislation), and proximal contextual variables (organizational rules, types of professionals, nature of the relationship, communication between professionals). The therapists have variable perceptions of their professional identity (e.g., vision of occupational therapy, values), which are significantly influenced by their experiences. Conclusion: It is important for occupational therapists to be aware of the various influences, including their practice context, that shape their professional identity in order to negotiate their role more effectively.

Key words | Mots clés : Advocacy, Interprofessional

Defying the deficit: Shifting understandings of transgender experiences of occupation
Friday: 1:00 PM-2:00 PM Room | Location: 102

Introduction: Within occupational science and occupational therapy (OS and OT) contexts, there remains a largely deficit-based positioning of the experiences of transgender and gender diverse (TGD) populations with respect to occupational engagement. The absence of joyful, strengths-based experiences of this community is directly informed by larger social discourses that pathologize TGD populations. There remains a limited scope of understanding of the influence occupation has in facilitating joyful experiences for TGD populations, as the focus to this point has been solely on occupational disruptions and challenges. A nuanced and critically reflexive approach to understanding occupational experiences of TGD populations is one that intersects occupation, joy and gender euphoria.

Session Objectives: 1) Explore the unique intersectional factors influencing occupational experiences of TGD populations; 2) Define and describe trans joy, euphoria and intersections with occupation as concepts required for adopting a strengths-based approach to working with TGD communities. Session Description: The first 20 minutes will include a presentation by co-authors with lived experience to define and describe the role that occupation can and does play in facilitating joyful experiences for TGD populations.
populations. Small group discussions will follow (15 minutes) focused on dialogue about the intersection of TGD experiences and occupational engagement. Large group discussion will follow (20 minutes), providing attendees opportunities to reflect on strategies, outcomes and barriers to applying the concepts learned. The authors’ positionalities inform the complexities of this conversation and provide unique perspectives on the topic. Practice Implications: This session will enact a shift in the way that TGD populations are positioned within OS and OT contexts. This session will also provide a more nuanced understanding of the intersection of trans identities, joy and occupation, which supports those in OS and OT contexts to recognize, incorporate, and build upon the strengths of TGD clients.

Conclusion: Transitioning from a deficit-focused approach towards a perspective that recognizes occupation as a fundamental component of gender euphoria and trans joy is integral to gaining a more nuanced understanding of the occupational experiences of TGD populations. This shift is a vital step towards allyship between the TGD and OS and OT communities.

Key words | Mots clés : Advocacy, Equity & Justice

Occupational Therapy Statement of Commitment to Indigenous Peoples in Canada
Friday: 1:00 PM-2:00 PM Room | Location: 103
CAOT Sponsored Session:

On September 30, 2023, National Day for Truth and Reconciliation, the Occupational Therapy TRC Task Force released the Occupational Therapy Statement of Commitment to Indigenous Peoples in Canada. The document was developed with leadership from the OT TRC Task Force’s co-chairs and Métis occupational therapists, Angie Phenix and Kaarina Valavaara, along with invited allies and representatives from CAOT’s Boards of Directors, the Canadian Occupational Therapy Foundation (COTF), the Alliance of Canadian Occupational Therapy Professional Associations (ACOTPA), the Association of Canadian Occupational Therapy Regulatory Organizations (ACOTRO), and the Association of Canadian Occupational Therapy University Programs (ACOTUP).

The Statement of Commitment is intended to guide the reconciliation efforts of occupational therapy leadership organizations and to increase accountability to advance the Truth and Reconciliation Commission (TRC) of Canada Calls to Action and the Final Report on the National Inquiry into the Missing and Murdered Indigenous Women and Girls (MMIWG) Calls to Justice and support the implementation of the United Declaration on the Rights of Indigenous Peoples (UNDRIP) within the occupational therapy profession. Responding to the Calls to Action and recommendations, individually and collectively, is the responsibility of the occupational therapy profession at all levels and presents an opportunity to translate principles and values, human and occupational rights, and socially transformative approaches into practice.

The session will introduce the Statement of Commitment and review the current progress and plans of the occupational therapy leadership organizations in Canada. Session attendees will be invited to provide feedback and ask questions about each organization’s commitment to Truth and Reconciliation within their respective mandates.

Climate Change- The Role of Occupational Therapists and Health Professionals
Friday: 1:00 PM-2:00 PM Room | Location: 104
Extended discussion: Non-specific | Environment
Giovanna Boniface (OT-CAN (Occupational Therapy Climate Action Network), Royal Architectural Institute of Canada, Vancouver) bonifacegiovanna@gmail.com Myles Sergeant (Canadian Coalition for...
Introduction: Climate change is arguably the most significant threat to this planet and humankind. According to the World Health Organization (WHO), climate change is the biggest health threat facing humanity (WHO, 2021). Although there is a high focus of media attention and coverage on climate change, primarily with a narrative full of doom and gloom (Arnold & Shorenstein, 2018), there is also hope. In 2015, The Lancet Commission on Health and Climate Change posits that “tackling climate change could be the greatest global health opportunity of the century” (Watts et al., 2015 p. 1861). 

Practice problem: Health professionals are in a position to be part of the solution, but there are gaps in how they perceive climate change and their role in climate action (Hathaway & Maibach, 2018).

Reflections: Occupational therapists have a role to play to combat climate change and can take a lead as a profession to actively engage in climate action in day-to-day practice (Garcia Diaz & Richardson, 2021). 

In 2018, the World Federation of Occupational Therapists published guidelines on how occupational therapists can work towards a more sustainable occupational therapy practice, including guiding principles with reflective questions focused on reducing carbon footprint, but how has this call to action been received? Learning objectives: This extended session will expand knowledge and resources as it relates to climate mitigation, adaptation and resilience as well as share resources and tools that can be implemented for a more sustainable future. 

Practice implications: To broaden opportunities for occupational therapists to build capacity, knowledge, awareness and understand opportunities for engagement and action.

Key words | Mots clés : Equity & Justice, Evidence-based practice

Connecting the dOTs - Occupational Therapy, Occupational Science, and Promoting Healing, Health, and Wellbeing
Friday: 1:00 PM-2:00 PM Room | Location: 101

Conversations that matter: Adult | Health and well-being
Anna Braunizer abraunizer@cbihealth.ca, Michelle Ferguson mferguson.ot@gmail.com (Occupations in Practice & Mental Health and Substance Use Practice Networks)

Connecting with occupational science as we strengthen our unique role in promoting mental health and wellbeing across occupational therapies.

Road to independence: Adapted commentary driving for multi-clientele
Friday: 1:00 PM-2:35 PM Room | Location: 109

Hands-on learning session: Adult | Professional issues/Practice
Natasha Dumont-Carey (Lethbridge-Layton-Mackay Rehabilitation Centre, Montreal) n.dumont-carey.clethb@ssss.gouv.qc.ca Minh-Thy Truong (Lethbridge-Layton-Mackay Rehabilitation Centre) minhthy.truong@ssss.gouv.qc.ca Isabelle Gélinas (McGill University) isabelle.gelinas@mcgill.ca

Background: Driving is a significant contributor to personal independence (Marottoli et al, 1997), to support reintegration in the community (Novack et al., 2010) and to enhance the quality of life and personal identify of persons with a disability (Stepney et al., 2018). For those affected by medical conditions such as stroke and traumatic brain injury, resuming driving can be challenging. Practice problem: Occupational therapists hold a pivotal role in the rehabilitation of driving skills. Many interventions and tools are used to remediate for deficits in visual attention, memory, visual processing...
speed and scanning however there is little evidence on their impact in improving driving performance. Simulators and on-road training provide an interesting avenue since they offer a more realistic practice, require less generalization ability from the client and could generate a better outcome (Devos et al., 2012). However, these interventions are not accessible to all therapists. Approach: Adapted commentary driving is a novel intervention for driver rehabilitation where the person seating in the front passenger seat verbally described what is happening on the road. The approach has been developed to enhance visual exploration, scanning skills, enhance rapid analysis and quick response to stimuli, especially beneficial for clients with visual and perceptual difficulties who want to return to driving. Learning objectives: This workshop will introduce participants to this new intervention approach. Participants will be able to describe the four phases of the adapted commentary driving approach. (20 min). They will also understand how the approach can be applied into their clinical practice. (20 min). The instructional method includes the use of case studies and videos of real-life driving scenarios and exchange with the participants. Practice implication: The adapted commentary driving approach offers a promising intervention that can complement other types of driving retraining interventions. It is an innovative approach that can be applied with various clienteles. Therapists can adjust the approach to meet the demands of their practice and the needs of their clients. It's time to hit the gas and navigate the road to recovery with driving approaches!

**Key words | Mots clés** : Brain injury, Stroke

**Post COVID-19 pandemic restrictions: Shifting academic and fieldwork curricular landscapes**
Friday: 1:35 PM-2:00 PM | Room | Location: 106

**Paper presentation:** Not applicable | Fieldwork/Education

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Introduction: COVID-19 pandemic restrictions necessitated reflection on approaches to the education of students worldwide (UNESCO, 2020; Sahu, 2020), which resulted in changes to the educational delivery landscape. In Canadian occupational therapy education, curricular modifications made in response to pandemic restrictions consisted of shifting from in-person to online delivery, resequencing or deferring in-person academic and fieldwork components, and limited adoption of simulation (MacKenzie et al., 2023). Further reflection on and documentation of these evolving changes and their perceived impact on student learning and outcomes is critical. Objectives: The purpose of this follow-up study is to document and compare reported curricula changes (both academic and fieldwork) reported during restricted and post-restricted delivery periods. Elements examined include instruction and assessment methods as well as faculties’ perceived continued impact on student learning and outcomes.

Methods: An online survey was sent to key representatives from administration, curriculum, and fieldwork at all 14 accredited occupational therapy university programs in Canada. Results: Overall, curricula changes shifted back toward pre-pandemic delivery methods. Some measures (e.g., online lectures) were maintained for reasons of accessibility, pedagogy, with perceived limited adverse impact on learning. Both in person and virtual learning was perceived as important for changing practice. Fieldwork placement recruitment remained a challenge, with some programs increasing the use of simulation. Concerns regarding interpersonal competency development and assessment method integrity were more visible and of concern. Conclusions: Results provide an updated historical
foundation from which to track pedagogical changes, student outcomes, and, ultimately, impact on occupational therapy service delivery.

Key words | Mots clés : Fieldwork, Teaching/education

Friday: 1:35 PM-2:00 PM Room | Location: 107
Paper presentation:

Cohérence cardiaque: un outil simple pour les stresseurs d'aujourd'hui.

vendredi: 1:35 PM-2:00 PM Room | Location: 108
Présentation orale (exposé): Les adultes | La santé et le bien-être
Krystel Parenteau (Ergo autonomie, Magog) info@ergoautonomie.com

Introduction : Saviez-vous que le rythme respiratoire a le pouvoir de générer un état de panique, de repos ou d’apesanteur émotionnel ? En effet, la respiration, souvent négligée malgré son ubiquité, se révèle un outil essentiel pour la gestion du stress et s’inscrit à merveille dans la pratique ergothérapique en s’agénant aux occupations du quotidien. Afin de briser le cycle de l’apnée de l’écran, l’induction respiratoire générant un état de cohérence cardiaque émerge comme une méthode validée influençant positivement le système nerveux et la variabilité cardiaque, un marqueur de santé de haute importance. Objectifs : Expliquer les effets de la cohérence cardiaque ; fournir des stratégies pour maximiser ses bienfaits ; détailler à qui s’adresse cette pratique et comment l’implanter dans ses interventions ergothérapiques. Méthodes : Revue brève de la littérature expliquant la physiologie sous-jacente, mettant en lumière son impact sur le système nerveux, la gestion du stress et l'adaptabilité ; démonstration de la pertinence pour les ergothérapeutes ; présentation de diverses méthodes permettant de l’intégrer dans sa routine quotidienne. Résultats : Proposer des protocoles adaptés ayant un impact direct sur le système nerveux afin de réduire le stress et favoriser l'engagement occupationnel. Conclusion : La pratique de la cohérence cardiaque est une habitude universelle de choix pour la gestion du stress et l’ergothérapeute est l’expert ayant le pouvoir de promouvoir cet état afin de contribuer à la santé collective de la société actuelle et future.

Key words | Mots clés : Interprofessionnel, Science de l’occupation

Adapter une intervention fondée sur l’occupation pour gérer la douleur.

vendredi: 1:35 PM-2:00 PM Room | Location: Poster 1
Présentations par affiches: Les adultes | Les conditions chroniques
Julie Masse (Université de Montréal, Montréal, Québec) j.masse@umontreal.ca Svetlana Nielsen (University of Southern Denmark) Jeanette Christensen (University of Southern Denmark) Søren Skou (University of Southern Denmark) José Côté (Université de Montréal) Sara Saunders (McGill University) Émilie Lagueux (Université de Sherbrooke) Aline Boulanger (Université de Montréal) Jordi Perez (McGill University) Gabrielle Pagé (Université de Montréal) gabrielle.page@umontreal.ca

Introduction. Vivre avec la douleur chronique implique plusieurs défis au quotidien. Étonnamment, peu d’interventions ciblent spécifiquement les difficultés de fonctionnement de cette population. Redesign your Everyday Activities and Lifestyle with Occupational Therapy (REVEAL(OT)) (1) est une intervention développée et étudiée au Danemark au sein de cliniques de douleur multidisciplinaires spécialisées. Objectif. Cette étude vise à adapter REVEAL(OT) au système de santé canadien en partenariat avec des
patients, cliniciens, gestionnaires et auteurs de l’intervention. Méthodes. Cette recherche-action participative utilisera un devis multiméthodes au sein de 2 cliniques de douleur montréalaises. L’étude repose sur le modèle ORBIT (2). Phase 1 : première série de groupes de discussion avec les partenaires (n=86) et d’ateliers avec un comité aviseur afin de codévelopper la voie hypothétique décrivant les composantes de l’intervention et leurs mécanismes d’action potentiels, ainsi que la première version du manuel de l’intervention REVEAL(OT)/CA. Phase 2 : raffinement de l’intervention en explorant son acceptabilité, sa faisabilité et ses mécanismes d’action grâce à au moins 2 prestations dans les 2 cliniques ciblées (n≥60 patients) et de groupes de discussion ou entretiens individuels avec les patients et partenaires impliqués. Constatations. À la fin de cette étude, le manuel de l’intervention REVEAL(OT)/CA sera généré en français et en anglais et une stratégie sera établie afin d’implanter et de documenter les effets de l’intervention REVEAL(OT)/CA. Implications pour la pratique : Cette étude s’appuie sur une méthodologie rigoureuse pour favoriser le déploiement d’interventions orientées sur le style de vie en ergothérapie en complémentarité avec l’offre de soins actuelle.

**Key words | Mots clés :** Pratique fondée sur les faits scientifiques, Science de l’occupation

**Improving community transition for people with spinal cord injury**

**Friday: 1:35 PM-2:00 PM Room | Location: Poster 2**

**Poster presentation:** Adult | Acute conditions

Ivneet Lidder (University of British Columbia, Vancouver) ivneetl@student.ubc.ca Olivia Vezza (University of British Columbia) ovezza@student.ubc.ca Rachel Abel Julie Deveau Murveena Jeawon mu-ru@live.com Chih-ting Tsai Jeanne Yiu Anousha Jackson Kaylah Kozma Samantha Kang

Introduction: Transitioning to the community from hospital following rehabilitation can be challenging for patients with spinal cord injuries (SCI). Many struggle to manage heightened physical demands of daily activities and social participation. Most research predates the Coronavirus Disease 2019 pandemic, with limited recent studies identifying barriers that individuals with spinal cord injuries encounter during this transition and its impact on occupational performance. Objectives: To explore patient perspectives regarding their life after discharge into the community and to identify gaps in occupational therapy service during inpatient rehabilitation. Methods: This cross-sectional study utilizes an online survey to collect information on participants’ current unmet needs and lived experience of a spinal cord injury after discharge from rehabilitation. Participants are people who sustained an SCI and have been discharged from our local inpatient rehabilitation centre between 6 months to 5 years. The survey collects respondents’ demographic information and data on their life satisfaction, difficulties they may have faced in the community, and how occupational therapists can better facilitate this transition. Content analysis will be used to analyze open-ended questions to determine common themes or concepts, while descriptive statistics will be used to characterize the study sample. Results: Thus far, 17 participants have consented to being contacted for this study, 3 participants have been contacted, and 1 participant has completed a survey. We anticipate patient feedback will inform inpatient services and support future transitions into community after discharge. Conclusion: Findings may help inform changes to clinical practice in occupational therapy at our local rehabilitation facility and others across Canada.

**Key words | Mots clés :** Clinical reasoning, Program evaluation

**Pedaling towards inclusion: Understanding the impact of adaptive biking**

**Friday: 1:35 PM-2:00 PM Room | Location: Poster 3**
**Poster presentation:** Children and youth | Health and well-being  
Jacquie Ripat (University of Manitoba, Winnipeg) jacquie.ripat@umanitoba.ca  
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**Introduction:** Children and adults with neuromuscular conditions have fewer opportunities to participate in physical activities known to improve health and well-being. Adapted bicycles can be used by children and adults with neuromuscular conditions to participate in biking, a common and lifelong leisure activity that promotes physical activity. However, the potential therapeutic benefits of using adapted bikes remain relatively unknown. Objectives: 1) To identify changes in physical, psychosocial, and functional status that clinicians attribute to adaptive biking; 2) To gain an understanding of the effects of adapted biking on children’s self-perceived social participation, physical status, and quality of life; and 3) To identify environmental barriers that impact access and opportunity to bike regularly. 

**Methods:** Employing a mixed-methods, qualitative descriptive approach, we conducted three focus groups, each with 3-6 Canadian occupational therapists or physiotherapists experienced with recommending adapted bikes. We also conducted semi-structured interviews with four dyads consisting of an experienced child rider and their guardian. Our analysis used an inductive approach, integrating data from children, guardians, and clinicians. 

**Findings:** Preliminary analysis resulted in the overarching theme: Adapted Bikes Support Inclusion. We also identified two sub-themes: Facilitators, including benefits, supports, and adaptations; and Restrictors, addressing challenges, environmental barriers, and safety considerations. 

**Conclusions:** Ongoing research with children, families, and clinicians will inform the development and application of appropriate outcome measures, assessments, and clinical practice guidelines. Ultimately, we aim to expand access to adaptive biking for more children and adults with neuromuscular conditions so they can engage in this vital occupation.

**Key words | Mots clés:** Assistive devices, Evidence-based practice

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**Brainbot, a post-concussion self-management app: A study protocol investigating efficacy**  
Friday: 1:35 PM-2:00 PM | Room: Poster 4  
**Poster presentation:** Adult | Technology  
Brenna Schmitt (University of Toronto, Toronto, ON) brenna.schmitt@mail.utoronto.ca  
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**Introduction:** Individuals recovering from concussion often experience post-concussive symptoms (PCS), including headaches, fatigue, and cognitive difficulties, that can impact occupational performance, quality of life, and re-engagement in meaningful activities (Cicerone & Azulay, 2007; Radomski et al., 2016). Many rehabilitative interventions have been used with individuals experiencing PCS, including mobile health applications and self-management programs. Brainbot is an AI-powered, mobile health app that integrates symptom and activity tracking, comprehensive data analytics, and AI-generated insights to offer personalized guidance for enhancing symptom management and occupational performance for individuals experiencing PCS. Recent literature has demonstrated Brainbot’s usability with this population, but its efficacy has not yet been established (Ma et al., 2023). Objectives: The protocol aims to explore whether Brainbot supports changes in perceived self-efficacy of symptom management, occupational performance, symptoms, and quality of life. 

**Methods:** A single-case...
Experimental design using multiple baselines across participants (N=3) will be employed over 9 weeks. Participants will alternate through phases of non-app use (A) and app use (B) in an A-B-follow-up design. Measures of perceived self-efficacy, occupational performance, symptoms and quality of life will be administered weekly. Results: Following protocol implementation, a positive trend is expected during the intervention phase (B) for occupational performance, self-efficacy, and quality of life, while a negative trend is expected for symptoms. Conclusion: The protocol may support identification of preliminary evidence about Brainbot’s impacts in supporting individuals in concussion recovery. Once evidence is established, occupational therapists may consider use of Brainbot as an intervention to facilitate activity engagement, independence, and occupational performance with individuals experiencing PCS.

**Key words | Mots clés**: Brain injury, Technology

**Accessible housing needs and priorities of people with physical disabilities**
Friday: 1:35 PM-2:00 PM **Room | Location**: Poster 5

**Poster presentation**: Non-specific | Advocacy/Leadership

*Farah Bacchus-Misol, Siobhan Galeazzi-Stirling, Kirstin Yuzwa, Eva Cohen, Sander Hitzig*

**Rationale**: Many people with physical disabilities (PwPDs) experience unmet needs related to acquiring, building, or modifying accessible homes (Gibson et al., 2012). Importantly, there needs to be more qualitative research that considers the lived experiences of PwPDs, as well as the perspectives of housing professionals who design, build, and provide housing and related services. **Objective**: The proposed research aims to synthesize the perspectives of PwPDs and housing professionals (e.g., developers, builders, engineers, etc) to describe needs and priorities related to accessible housing in Canada. **Methods**: An inductive qualitative design was used because it can be practically applied to healthcare practice and policy without relying heavily on existing frameworks and theories (Vears & Gillam, 2022). Semi-structured interviews and focus groups with PwPDs and housing professionals (n=59) were completed to gain perspectives on the needs and priorities for accessible housing. **Braun and Clarke’s (2006) process for thematic analysis will be used to identify key patterns and themes.**

**Results**: Preliminary results will describe accessible housing needs and their practical applications, to inform the development of future strategies and improve accessible housing availability and legislation in Ontario. **Practice implications**: Occupational therapists (OTs) play a key role in adapting the built environment to promote occupational engagement for PwPDs. These findings offer an opportunity for OTs to identify key areas for advocacy, capacity building, and policy changes related to housing development and can serve to guide assessment considerations when supporting clients in acquiring or modifying their home environment.

**Key words | Mots clés**: Advocacy, Home modification

**Essential skills for new occupational therapists practicing rurally**
Friday: 1:35 PM-2:00 PM **Room | Location**: Poster 6

**Poster presentation**: Not applicable | Professional issues/Practice

*Katie Wingerter (University of British Columbia, Vancouver) katiejw@student.ubc.ca Miranda Doerksen (University of British Columbia) mdoerk19@student.ubc.ca Jay Macdonald (University of British Columbia) jay.macdonald@ubc.ca*
Introduction: This exploratory study seeks to determine essential practice skills for new graduate OTs working in rural locations. The findings will inform curriculum development, prepare new graduates for rural OT practice, and help inform the inter-professional team role of occupational therapy. Objectives: The purpose of this research is to explore the experience of being a new graduate OT in rural practice; experiences of working in rural practice; and to produce a list of practical skills that OTs working in rural locations consider essential for newly graduated OTs. Methods: Semi-structured interviews will be conducted with OTs working in rural locations. Topics of discussion will include perceived essential practical skills, experiences working rurally, and experiences working as a new graduate. Content analysis will be performed to generate a list of essential practical skills, and thematic analysis to understand how their new graduate and rural work experiences contribute to the perceived essential practical skills. Results: It is anticipated that our findings will show a diverse range of skills that are required for effective OT practice in rural areas. It is anticipated that some OT skills that are currently being used by OTs in rural settings have not been acknowledged in current research evidence or university curricula. Practice implications: Understanding essential practical skills for rural practice can help inform educators on what skills to teach students for entry level practice and prepare OTs to practice in rural settings. This research also highlights the unique skills and abilities of OTs working in rural settings and their contribution to interdisciplinary teams.

Key words | Mots clés: Interprofessional, Teaching/education

Syndrome de l'imposteur : Incarner les valeurs de l’ergothérapie dans les milieux contraignants
Friday: 2:10 PM-3:10 PM Room | Location: 101
Conversations that matter: Non-specific | Advocacy
Soëla Bandaly ACE-Qc sbandaly@caot.ca

Une opportunité d’explorer les barrières contextuelles rencontrées par les ergothérapeutes dans une variété de milieux professionnels, entravant ainsi leur capacité à promouvoir les valeurs fondamentales de la profession, à déployer leur vaste éventail de compétences et à adopter une approche holistique centrée sur les meilleurs intérêts des clients. Vous aurez l’occasion d’échanger sur des stratégies visant à surmonter ces obstacles et à s’épanouir dans notre domaine, même lorsque les environnements sont parfois réducteurs.

Key words | Mots clés: Advocacy

Occupational therapy simulations: student satisfaction and perceptions of debrief feedback
Friday: 2:10 PM-2:35 PM Room | Location: 106
Paper presentation: Non-specific | Fieldwork/Education
Kaitlin Sibbald (Dalhousie University, Halifax) kaitlin.sibbald@dal.ca Diane MacKenzie (Dalhousie University) diane.mackenzie@dal.ca

Introduction: Simulation is used in occupational therapy education to develop practice competency and facilitate clinical reasoning. However, occupational therapy student satisfaction with simulation, perceptions of debrief feedback, and implications of this feedback are unknown. Objectives: The objectives of this study were to i) examine student satisfaction with a new sequential simulation design, ii) explore the types of simulation debrief feedback students perceive as useful, and iii) explore the relationship between types of feedback and self-reports of increased clinical reasoning, improved client care, and planned implementation in future practice. Methods: This study employed a concurrent,
embedded, mixed-method cohort design using secondary data analysis. Following each of six simulations, students completed the Satisfaction with Simulation Education Scale (SSES) and provided qualitative feedback on their experience. Thematic analysis was used for the feedback comments and an exploratory factor analysis (EFA) was completed on the SSES data. Results: EFA revealed three factors captured by the SSES: clinical reasoning and ability, facilitator feedback, and reflection. Students valued a variety of types of feedback. Reported use of the advocacy inquiry model of debriefing increased the likelihood by 4.7 times that students reported the debrief facilitated clinical reasoning. When advocacy inquiry was used in conjunction with providing feedback on specific skills, students were 5.3 times more likely to report planned implementation of the feedback in practice. Conclusion: Students perceive debrief feedback provided using the advocacy inquiry model as useful for facilitating clinical reasoning. Including feedback on specific skills with this model increases planned implementation of feedback in future practice.

**Key words | Mots clés**: Fieldwork, Teaching/education

**Identifying barriers occupational therapists face addressing depression: evaluating learning solutions**

Friday: 2:10 PM-2:35 PM **Room | Location**: 107

**Paper presentation**: Non-specific | Mental health

*Martin Anderson (Alberta Health Services, Peace River)* martin.anderson@ahs.ca *Jan Davis (Kansas University Medical Centre)*

Background: Occupational therapists identified depression as a priority for provincial occupational therapy educational development. Practice Problem: Occupational therapists working in physical medicine may encounter clients who experience depression and may not feel confident to address this as part of the occupational therapy process. These same clients may not have the resources necessary to access mental health services, or, may be triaged as low risk when access to mental health resources is prioritized. Approach: Occupational therapy clinical education opportunities focused on depression management were developed and piloted with 27 clinicians. The training included four sections: 1. a rationale for the training and possible barriers to practice change. 2. the therapeutic alliance. 3. screening and assessment. 4. two interventions. The participants evaluated the training and participated in a focus group regarding barriers that they experienced when addressing depression within their clinical practice context. Learning objectives: To understand barriers to addressing depression and to have practical ideas for addressing depression within occupational therapy practice. Practice Implications: The training was well received, and feedback provided was used to guide refining the learning materials for future training. The barriers that were anticipated by participants when addressing depression were compiled and provided important information to the educational development team. This list of barriers will support the development of practice supports and policy necessary for practice change. Hopefully dissemination of this information will stimulate conversations amongst the broader community of practitioners regarding mental health needs in physical medicine practice.

**Key words | Mots clés**: Mental health, Teaching/education

**Utilisation de la télésanté en ergothérapie pour vieillir en santé**

Friday: 2:10 PM-2:35 PM **Room | Location**: 108

**Paper presentation**: Older Adult | Technology
Bien que les interventions de télésanté aient le potentiel d'améliorer l'accès aux soins et de réduire le fardeau des patients (Monaghesh & Hajizadeh, 2020), leur utilisation en ergothérapie pour les personnes âgées est moins fréquente, avec peu d'informations sur leur contexte. Objectifs. Présenter les résultats d'une étude de portée sur les interventions de télésanté en ergothérapie pour les personnes âgées (Chagnon et al., 2023). Méthodes. Selon les directives PRISMA-ScR (Tricco et al., 2018), six bases de données ont été consultées pour identifier les interventions d'ergothérapie en télésanté chez les personnes âgées. L'extraction et l'analyse des données ont suivi les taxonomies de Tulu (2007), McColl et Law (2013) ainsi que le modèle canadien de performance et d'engagement occupationnel (Townsend & Polatajko, 2013). Résultats. 23 études sur les interventions d'ergothérapie en télésanté pour les personnes âgées ont été identifiées, principalement des essais cliniques randomisés (n = 9 ; 39,1 %). Les participants, majoritairement atteints d'un problème de santé comme un accident vasculaire cérébral (n = 9 ; 39,1 %), étaient ciblés par des interventions axées sur l'éducation à la gestion des symptômes (n=12 ; 52,2%) via vidéoconférence (n=14 ; 60,7%). Elles étaient réalisées de manière synchrone (n=19 ; 82,6 %), souvent du centre de soins vers le domicile de la personne âgée (n=18 ; 78,3 %). Conclusion. Cette présentation offre une vue d'ensemble de l'utilisation et des connaissances actuelles sur les interventions d'ergothérapie en télésanté, soulignant la limitation de la portée actuelle et suggérant des possibilités d'élargissement, notamment dans le développement occupationnel.

Key words | Mots clés : Occupational science, Technology

Defining occupational therapy's role in musicians' health: A scoping review

Friday: 2:10 PM-2:35 PM Room | Location: Poster 1

Poster presentation: Adult | Work and return to work

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Introduction: Recent literature has indicated occupational therapy (OT) may be beneficial for musicians who are at an increased risk for health conditions. However, the work of occupational therapists (OTs) is not always clearly defined in the literature. No rigorous reviews of the scholarly literature have been published to examine the current and potential roles of OT in musicians’ health. Objectives: This presentation will outline a scoping review of the literature on OT’s role in working with musicians. Current roles for OTs working with musicians will be discussed using the Canadian Model of Occupational Performance and Engagement (CMOP-E) to suggest potential roles. Methods: The review followed the Joanna Briggs Institute (JBI) and the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) extension for scoping reviews. Data was extracted and analyzed using Arksey and O’Malley’s (2005) framework, an iterative thematic analysis, and the Canadian Model of Occupational Performance and Engagement (CMOP-E) (Townsend & Polatajko, 2013). Findings: Forty-four articles met inclusion criteria. Thirty-two articles referenced OTs providing services within CMOP-E components. Five major roles were identified for OTs working with musicians: interventions; prevention, management, and education; occupational analysis; addressing occupations outside of music-making; holistic and client-centered approaches. Practice Implications: OTs have multiple roles in addressing musicians’ health, and therapists should advocate for their full scope of practice, including preventive
and holistic approaches that are not always discussed. Future research should define clear guidelines for therapists working with musicians and investigate more holistic approaches.

**Key words | Mots clés** : Hand therapy, Occupational science

**How occupational therapists promote recovery following motor vehicle accident injury**

Friday: 2:10 PM-2:35 PM  
**Room | Location:** Poster 2

**Poster presentation:** Adult | Acute conditions  
Katelyn Bridge (Queen's University, Kingston) 14kb22@queensu.ca  
Dorothy Kessler (Queen's University)  
Tricia Morrison (University of Ottawa) Michel Lacerte (Western University)

Introduction: Injuries resulting from motor vehicle accidents (MVAs) are a primary cause of disability. Persistent impairments following an MVA can have adverse impacts on health-related quality of life, work ability, and psychological wellbeing. MVA-related injuries also have broad implications for healthcare utilization costs, legal costs, and workforce disruptions. Recovery from an MVA may be understood differently by healthcare professionals, insurers, and injured individuals which creates challenges in supporting injury recovery. Few studies have examined how occupational therapists promote recovery post-MVA. Understanding post-MVA recovery from the perspectives of occupational therapists is needed to inform more effective service delivery and clinical decision making. Objectives: This study addressed the following questions: 1) What factors are identified as influencing recovery following a non-catastrophic injury sustained in an MVA; and 2) How do occupational therapists currently address these factors? Methods: A qualitative interpretive descriptive study design was used. Data was collected through semi-structured interviews with 10 occupational therapists who provide treatment through auto-insurance funding to clients with non-catastrophic injuries. Interview transcripts were analysed using constant comparative analysis. Findings: Social support, acceptance, navigating the insurance system, physical symptoms, and financial stress were the most prominent factors identified by occupational therapists as influencing recovery post-MVA. Occupational therapists address these factors through promoting symptom management, advocating for client needs, using a team approach, and acting as case managers to assist with navigating insurance processes. Practice Implications: Study findings will begin to provide an understanding of how occupational therapists currently address MVA-recovery-related factors in their practice and inform areas for future practice development.

**Key words | Mots clés** : Clinical reasoning, Private practice

**Early literacy is a team effort**

Friday: 2:10 PM-2:35 PM  
**Room | Location:** Poster 3

**Poster presentation:** Children and youth | Health and well-being  
Loralie Clark (Rural Northwest Saskatchewan) loralie.clark.lc@gmail.com  
Mona Brass (Chief Ahtahkakohp School) mona.brass@tsec.ca

Background: Indigenous children are at higher risk for lags in literacy development (Saskatchewan Ministry of Education, 2023). Data collected in a rural Indigenous community school identified a 2 year lag prior to the pandemic. Direct instruction programs for Grades 1 to 9 are in place within this school in an attempt to reduce the literacy gap as reading is essential to all future occupations an individual pursues. Practice problem: The passage of time is perceived to be the greatest enemy for children with reading challenges. Early identification of preschool aged Indigenous children who show early signs of literacy delays is a team effort to improve literacy outcomes and future success of all children into adult
life. The journey began from this conversation among professionals. Approach: An interprofessional school team (comprised of an occupational therapist, teachers, speech-language pathologist, and social worker) reviewed literature, data from the community, standardized assessments, and experiential learning models. With this information, the team has developed a checklist with an emphasis on physical skills, creativity, and emotional regulation as foundations identified to promote early literacy success.

Learning objectives: This session will highlight a rural interprofessional team approach to early literacy success and future directions. Practice implications: The early years checklist is anticipated to be used to identify and inform individualized early literacy programming for all children prior to their entry into a rural Indigenous community school. With early identification, growth in literacy will support success in future occupational pursuits for individuals.

Key words | Mots clés : Interprofessional, School health

How Occupational Therapists can use 3D printing for Microstomia Orthoses
Friday: 2:10 PM-2:35 PM Room | Location: Poster 4

Poster presentation: Non-specific | Technology
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Background: Microstomia, often observed following facial burn injuries, can hinder functional activities such as eating, speaking, dental care, and medical procedures such as intubation. Thus, microstomia orthoses (MO) are used to increase mouth opening and function. MOs are quite expensive, difficult to obtain and need to be constantly tailored to each individual’s needs and progression, which is not always possible with prefabricated MOs. Innovation: The first report of an inexpensive, 3D printed MO was presented at the 2023 American Burn Association conference. The authors modified this design to generate additional sizes and address issues of comfort and material rigidity. The modified 3D MO was then trialed with 3 patients at different rehabilitation stages and their outcomes documented. Findings: The mouth impairment and disability assessment (MIDA), including measures of horizontal and vertical mouth opening, was completed before and 4 months after the use of the 3D MO. All participants had previously reached a plateau on these measures after using commercially available MOs before starting the 3D MO. The 4-month post 3D MO wear MIDs improved by 15 and 4 points for 2/3 patients (one is ongoing). One patient was able to avoid having reconstructive surgery. All patients improved their mouth opening measures. Learning objectives: By the end of the session, attendees will know how to find printing files for this MO and further resources to aid with 3D printing. Practice implications: Occupational therapists’ use of 3D printing for the treatment of microstomia will improve functional outcomes and patient satisfaction.

Key words | Mots clés : Orthotics, Technology

Occupational therapy and dentistry: An evidence-based approach to care
Friday: 2:10 PM-2:35 PM Room | Location: Poster 5

Poster presentation: Children and youth | Primary care/Primary healthcare
Elisabeth Thompson (University Pediatric Dentistry, Buffalo) ethompson@updowny.com Leah Stein Duker (USC Chan Division of Occupational Science and Occupational Therapy) lstein@chan.usc.edu Jan Tona (University at Buffalo) tona@buffalo.edu

Introduction: Occupational therapy (OT) has begun to expand into the emerging practice setting of primary care, including dentistry, to provide interprofessional support for people with special healthcare needs (PSHCNs), including those with intellectual and developmental disabilities. Many PSHCNs experience poor oral health and oral care challenges, linked to sensory sensitivities and a lack of provider education and experience. These difficulties may lead to distressing dental experiences, dissuade consumers from ensuring proper oral care, and discourage dental professionals from treating PSHCNs. Objectives: Identify the unique skills that OT practitioners possess in evaluating the oral health environment. Discuss the sensory adapted dental environment (SADE) and the physiological changes that result. Discuss clinical cases using SADEs for PSHCNs. Methods: This presentation will examine the evidence supporting interprofessional collaboration among dentists, dental hygienists, and occupational therapists as well as the unique contributions of OT to the field of dentistry in the clinical environment. Patient cases will be presented showcasing the benefits of a sensory adapted dental environment. Results: Occupational therapists are at the forefront of healthcare professionals who can assist in oral healthcare due to their background in sensory adaptation. Conclusion: By applying the Person-Environment-Occupation model to the dental clinic and PSHCNs, participants will understand the value of OT collaborating with dental medicine to address oral health.

Key words | Mots clés : Evidence-based practice, Sensory integration

Occupational Therapists' Perspectives on Restraints and Seclusion in Schools
Friday: 2:10 PM-2:35 PM Room | Location: Poster 6
Poster presentation: Children and youth | Professional issues/Practice
Geneviève Rochon (Université du Québec à Trois-Rivières, Trois-Rivières) genevieve.rochon@uqtr.ca
Noémi Cantin (Université du Québec à Trois-Rivières) noemi.cantin@uqtr.ca

Introduction: Several studies document unjustified and abusive use of restraints and seclusion in school settings (Bartlett & Floyd Ellis, 2020; Scheuermann & al., 2016). In Quebec, occupational therapists are among the professionals authorized to decide on the use of restraints in schools. However, occupational therapists are not yet mandatory professionals in Quebec schools, which may compromise access to services. Given this context, it is important to consider the perceptions of occupational therapists regarding the practices in their school environments. Objectives: To describe the impact of the school practice context on the clinical process of occupational therapists leading to the decision to use restraints. Methods: A qualitative descriptive study using semi-structured interviews with six occupational therapists took place during the 2022-2023 school year. The presented results are part of a larger research project. Results: Preliminary results suggest that occupational therapists observe a lack of knowledge among various stakeholders in schools. As a result, they advocate for the need for clear policies surrounding the use of restraints and seclusion. When involved in the decision to use restraints, occupational therapists describe encountering challenges related to time constraints and pressures to apply restraints. Conclusions: School-based occupational therapists' perceptions indicate that practice changes are necessary within their practice context to comply with current legislative frameworks. Beyond legal compliance, the most important aspect is to ensure the protection of students by emphasizing the essential role of occupational therapists.
Introduction: Nature-based OT is a quickly growing niche in pediatric private practices in the USA, but less so in Canada. In a time where almost every aspect of life involves technology, getting back to the fun of climbing trees or playing hide and seek are making a comeback. Running a nature-based OT group or treating individual clients in nature can have far-reaching benefits for many of our most common pediatric clients. Success/innovation: Support is needed for Canadian OT’s to understand the vast benefits of taking their practice outside. Due to the pandemic, our practice decided to shift our work outdoors rather than close down, and we were surprised when we observed progress speeding up and goals being met faster! Approach/findings/reflection: A deep dive into the literature and research showed that these improvements our clients were showing were not by coincidence. Nature-based therapy creates real world opportunities for increasing sensory-motor coordination, confidence and caring with peers, and is the ideal environment for supporting self-regulation. Case studies, literature reviews, and multimedia resources of Full Circle OT’s nature-based practice will demonstrate the ease and surprising efficacy of shifting from a clinic to a nature-based practice, as well as the supportive community of nature-based therapists that already exists to help an OT do just that. Learning objectives: Therapists will be able to demonstrate an understanding of the unique benefits that nature-based OT groups can provide, as well as an understanding of which clients nature-based OT groups are most therapeutic for. Attendees will also be able to demonstrate an understanding of some of the unique treatment strategies that are used in nature-based groups. Practice implications: Participants will leave the session with an understanding of the challenges and benefits to running a nature-based OT practice, as well as resources to guide them in starting their own nature-based practice. Personal evidence will also be shared in hopes of creating optimism for a solution to the increasing problem of OT’s experiencing burnout that could be more realistically avoided when a mindful nature-based practice can be adapted to support the therapist’s mental health as well!
session will (1) Introduce the 2024 joint position statement (2) Describe social accountability and evidence-informed elements of a socially accountable approach (3) Discuss recommendations and commitments (4) Introduce supporting documents and resources. Session Description: The session will introduce the JPS, review concepts, and examine recommendations to support the development of commitment statements and provide time for small group discussion. As this living document is shared with occupational therapists, we welcome your ideas for knowledge translation and questions about its use. Practice Implications: The JPS aims to serve as a social accountability framework to foster conditions that shift normative and dominant cultures, dismantle systemic barriers, repair harms, support healing, eradicate discrimination, and aspire to co-create spaces that allow us to promote justice more equitably within the scope of occupational therapy practice. Conclusion: Occupational therapy practitioners, assistants, researchers, managers, and students in Canada are invited to enact an occupational therapy practice rooted in and committed to justice, equity, and inclusion.

**Key words | Mots clés :** Equity & Justice

**Technology as a bridge to age-in-place**
Friday: 2:10 PM-3:10 PM  
**Room | Location:** 103

**Extended discussion:** Older Adult | Health and well-being

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Introduction: Many older adults encounter difficulties related to social isolation, communicating with friends and family, access to care and support, community participation, risks of falling, medication management, and independence (Chung et al., 2016; Chabot et al., 2017; Yusif et al., 2016). Issues like these have the potential to negatively impact one's overall sense of well-being, daily functioning, and safety. This study looks at a program developed by occupational therapists (OT) to teach older adults how to use smart home technology (SHT) and demonstrate its potential impact on their lives. Session Objectives: Attendees will be able to discuss 3 concerns facing older adults that SHT can address. Attendees will be able to describe 3 areas of technology that can be included in an education series to support daily participation. Attendees will be able to identify 2 benefits from taking a hands-on SHT class. Session Description: A 20-minute presentation will be followed by hands-on stations. The hands-on learning will be facilitated by the research team. Practice implications or results: The research results showed that education provided by Occupational Therapists to help older adults learn about and accept SHT was beneficial in helping them to understand and choose appropriate technology to meet their occupational needs in terms of health and safety. Therapists should ensure that SHT is always considered as a part of home assessments and environmental modifications. Introduction in a group setting had benefits but there is a need for individualized intervention and training to optimize use. The results also highlighted the barrier of cost to technology and lack of funding. Occupational therapists need to advocate for funding programs for the technology that will allow more older adults to age in place. Conclusion: Occupational Therapists have expertise in appropriate selection and training to help maximize occupational performance and safety. As a profession it is important to contribute to the growing body of research on using assistive technology and in particular smart home technology to...
maximize the function of our clients. The feedback from participants showed that education and hands on training on device use is important for acceptance and purchases of technology.

**Key words | Mots clés**: Teaching/education, Technology

**Practicing social occupational therapy in Canada**
Friday: 2:10 PM-3:10 PM  Room | Location: 104

**Extended discussion**: Non-specific | Professional issues/Practice

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Keri Chambers *(Newfoundland and Labrador Health Services)* keri.chambers@easternhealth.ca 
Carmel O’Keefe *(Dalhousie University)* c.okeefe@dal.ca

Introduction: The role of occupational therapy in Canada has shifted markedly from one of ‘enablement’ (Townsend, & Polatajko, 2007) to one of ‘participation’ (Egan, & Restall, 2022). Occupations are understood as political; they can be oppressive, emancipatory, and/or resistive (Laliberte-Rudman, et al., 2022). The concept of social occupational therapy, developed in Brazil, emphasizes the social question as the centre of the discussion to promote professional actions. The link of micro and macro dimensions emphasizes social life contexts (Lopes & Malfitano, 2021). Objectives: To examine ways in which occupational therapy practices in Canada can and/or do seek to influence social and systems level changes to promote social participation. Session Description: This session will open with a panel discussion facilitated by Niki Kiepek. Ana Malfitano is Brazilian, writing on social occupational therapy and its enactment in Brazilian contexts. Keri Chambers is an occupational therapist in St. John’s, Newfoundland whose practice with unhoused populations focuses on social determinants of health and survival occupations. Carmel O’Keefe is an occupational therapist working with the Dalhousie Social Work Clinic, embedded in anti-oppressive, social justice frameworks to support people who live in poverty to access services and resources required to participate in their community. Discussants will share their understandings about how their practices align with social occupational therapy (15 min). Small groups will examine the scope of occupation beyond health outcomes and to be inclusive of systems level changes within their professional practices. The role of occupational therapists to promote social participation and inclusion will be explored with respect to what currently exists and what possibilities can be envisioned (25 min). A full group discussion will bring together the ideas discussed in small groups (15 min). Practice implications: Attendees are invited to share ideas about how to integrate systems level approaches into contemporary occupational therapy settings and to envision opportunities to expand roles and practices. Conclusion: The concept of social occupational therapy can provide a vocabulary to name and legitimize practices that extend beyond individual, health-based inventions. Drawing on successes of social occupational therapy in Brazil and globally, the social conditions of Canadians can become more equitable.

**Key words | Mots clés**: Community care, Equity & Justice

**Does previous anatomy coursework influence student OT learning outcomes?**
Friday: 2:45 PM-3:10 PM  Room | Location: 106

**Paper presentation**: Not applicable | Fieldwork/Education

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Introduction: As some Occupational Therapy programs do not require anatomy prerequisite courses, educators need to develop curricula that address the needs of learners from diverse educational backgrounds. Objective: This study evaluates the learning outcomes of student occupational therapists (OTs) with and without previous anatomy coursework while being taught using a blended learning approach. Methods: An observational cohort study was conducted of students who received anatomy education that included online anatomy lectures, self-guided anatomy modules with video-based prosection instruction, student-led discussion forums, and clinical skills labs. Course assessments and Kember’s Critical Self-reflection Questionnaire were used to measure learning outcomes. Results: Of the 97 (78% response rate) students in the study, 67 (69%) had completed previous anatomy coursework. During the term, students with anatomy coursework fared better than those without on the initial quizzes; the whole cohort fared similarly on the quizzes taken at the end of term. At the end of the term, assessment on the practical exam did not differ between students with and without anatomy coursework. All students had difficulty with higher Bloom’s learning level (analysis and application) assessments. The Kember Questionnaire demonstrated that students largely engaged in understanding (lower Bloom’s level) anatomy when learning through video-based prosection instruction. Conclusions: Students with and without previous anatomy coursework achieved similar learning outcomes; however, those without anatomy coursework experienced a catch-up period. Overall, students primarily focused on understanding anatomy and needed support applying anatomy knowledge.

Key words | Mots clés: Teaching/education

Validation of the Canadian psychosocial rehabilitation competency document: A Delphi study
Friday: 2:45 PM-3:10 PM Room | Location: 107
Paper presentation: Non-specific | Mental health
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Regina Casey Micheal Lee

Introduction: The recovery-orientated framework focuses on supporting a person with mental health issues to live a satisfying, optimized life, even with mental health symptoms. It has become the central framework for mental health services around the world, and psychosocial rehabilitation is a practical approach to apply the values of recovery. Objectives: In partnership with Psychosocial Rehabilitation (PSR) Canada, this project aims to develop an evidence-based competency framework for PSR practitioners in Canada. The existing framework, written in 2017, is the only one in Canada, and needs continued refinement and validation to reflect the changing priorities of Canadians. Methods: This project employs a Delphi method, which involves focus groups and multiple rounds of questionnaires with a diverse group of knowledge holders, with the goal of reaching a high level of agreement on the competency statements. These experts come from diverse groups, including service users, family members, peer support workers, and healthcare and academic stakeholders. Findings: So far, we have gathered data from 26 people through online focus groups, including 18 people with lived experience and 8 service providers. Five themes have emerged- 1. Format of the document 2. Need for Indigenous cultural safety 3. Emphasis on harm reduction 4. Emphasis on PSR values, and 5. Involvement of family members for people with serious mental illness. Practice Implications: Once completed, this validated competency document will better reflect the needs and values of service users and family members. The document will also contribute to the improvement of PSR services in Canada.

Key words | Mots clés: Mental health, Models
Accessing Services for Developmental Coordination Disorder in Canada: Parent Perspectives

Friday: 2:45 PM-3:10 PM Room | Location: 108

Paper presentation: Children and youth | Chronic conditions

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Rationale: Despite Developmental Coordination Disorder (DCD) being a lifelong condition affecting 5-6% of school-aged children, national and international research indicates that families of children with DCD face barriers in accessing services and supports. With limited research exploring the Canadian-specific parent perspective, this study aims to understand the supports and challenges that Canadian parents of children with DCD face when attempting to access services for their children. Objectives: To explore the parent perspectives of children with confirmed or suspected DCD on the barriers and facilitators to accessing school and community-based services across Canada. Methods: An online cross-sectional survey was circulated to families of children with suspected or confirmed DCD across Canada from November 2021 to June 2022, using convenience, purposive, and snowball sampling. Results: A total of 488 parents/caregivers representing all 13 provinces and territories responded to the survey. Data analysis will include descriptive and inferential statistics to examine the following: (1) access to services; (2) availability and quality of therapy services; and (3) parent-identified barriers and facilitators to accessing services and supports. Differences between provinces will be explored. Preliminary data indicates that families are not engaging in therapy services due to costs and lack of funding available. School-related support is also identified as creating barriers in the quality of service due to difficulties accessing classroom and curriculum accommodations. Conclusions: Appropriate therapy and services can help mitigate the physical, social, and emotional challenges that children with DCD face. The findings will identify which areas in Canada lack appropriate occupational therapy access.

Key words | Mots clés : Developmental coordination disorder, Equity & Justice

To do or not to do a home appointment

Friday: 2:45 PM-3:10 PM Room | Location: 109

Paper presentation: Adult | Professional issues/Practice

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Background: The COVID-19 pandemic restrictions closed Veterans Affairs Canada (VAC) offices shifting service delivery practices. Prior to the pandemic, there was an expectation all clients received a home visit from their case manager since they were hailed as a “gold standard” for building engagement and assessing client needs. Practice Problem: During the pandemic, VAC case managers met these core functions without the benefit of home visits. When COVID restrictions lifted, VAC reviewed the home visit practice to recognize and respond to evolutions in case management. Approach: Using an evidence-based approach, VAC initiated a research phase including a literature review, an environmental scan and staff focus groups. Results indicated home visits had value, and virtual or phone appointments were additional options to meet client needs. Results also highlighted staff safety concerns related to home visits. Learning Objectives: This presentation introduces a tool developed by VAC to help identify indicators as to whether a home appointment would meet client needs and evaluates potential safety risks related to the home appointment. Practice Implications: While the focus is on Case Managers, this tool has practice implications for any health professional, such as Occupational Therapists, conducting
home appointments, or Managers who supervise staff who conduct home appointments. The tool encourages critical analysis thinking to guide staff on decisions whether to proceed or not with a home appointment and to assess safety risks. Updated home appointment guidelines and training also supported the tool and practice shifts. These will also be introduced during the presentation.

**Key words | Mots clés:** Community care, Technology

**Remodeler sa vie : Les effets du programme expliqués**

vendredi: 2:45 PM-3:10 PM Room | Location: Poster 1

**Présentations par affiches:** Les adultes plus âgés | La santé et le bien-être

*Marie-Hélène Lévesque (Université de Sherbrooke et Centre de recherche sur le vieillissement, et CIUSSS de l’Estrie-CHUS, Sherbrooke) Marie.Helene.Leveque@USherbrooke.ca Mélanie Levasseur (Université de Sherbrooke et Centre de recherche sur le vieillissement, et CIUSSS de l’Estrie-CHUS) Mélanie.Levasseur@USherbrooke.ca

Introduction. Le vieillissement de la population soulève d'importantes questions de sociétés, notamment quant à la façon de promouvoir le vieillissement en santé. Puisqu’il favorise le développement d’un mode de vie sain et signifiant, le programme Remodeler sa vie représente une avenue novatrice pour une santé durable et équitable. Malgré des résultats probants (Lévesque et al., 2019), on connaîtra peu comment le programme fonctionne. Objectifs. Cette présentation vise à expliquer le fonctionnement du programme Remodeler sa vie, notamment en révélant les circonstances et les mécanismes responsables de ses effets. Méthodes. Une étude de cas multiples ancrée dans une approche réaliste et comportant une phase d’implantation clinique est réalisée dans trois milieux cliniques québécois (cas) recrutés par choix raisonné et incluant respectivement une ergothérapeute, son supérieur immédiat ainsi que 7 à 9 âné.es. Une théorie de programme a été élaborée et testée en contexte réel, puis est raffinée selon la perspective de divers acteurs lors de dix groupes de discussion. Les effets à court terme du programme ont été documentés à l’aide de mesures pré et post-intervention. Résultats. Cette étude met en évidence des valeurs (ex. relations non hiérarchiques) des circonstances (pandémie de Covid-19), des motivations à agir (intérêt à apprendre) ainsi que des effets adverses potentiels du programme (ex. stress liés aux devoirs à la maison). Conclusion. En contribuant au développement de preuves scientifiques allant au-delà de réponses simples, de liens causaux directs et de modèles linéaires pour expliquer le fonctionnement d'interventions complexes en promotion de la santé, cette présentation contribuera à une implantation réussie et contextualisée du programme.

**Key words | Mots clés:** Pratique fondée sur les faits scientifiques, Évaluation du programme

**Delirium management using a multi-sensory approach in occupational therapy**

Friday: 2:45 PM-3:10 PM Room | Location: Poster 2

**Poster presentation:** Adult | Acute conditions

*Allen Romero Espelita (University Medical Center of Southern Nevada, Las Vegas, Nevada) arespelita@gmail.com

Introduction: Delirium is an acute disturbance in attention and awareness with other disorders in cognition. The COVID-19 pandemic brought a catastrophic reduction in delirium monitoring, pre-prevention, and patient care due to organizational issues, lack of personnel, increased use of benzodiazepines, and restricted family visitation. Objectives: In the burn intensive care unit (ICU), patients suffer from delirium, often detected in acute illness and related to severe cognitive dysfunction.
Evaluation and intervention necessitate a limited period and determination. Occupational Therapists have a vital role in addressing the condition. Methods: Suitable sedation practices can supplement a multi-sensory approach, enabling non-pharmacologic therapeutic procedures and comfort that can be augmented by balanced pharmacological interventions when necessary. A multi-sensory model, namely tactile, auditory, olfactory, gustatory, visual, vestibular, and proprioception, can facilitate healing that reduces stressors and aids in delirium prevention and management. Findings: Using a multi-sensory approach, a case study provides a better understanding of how patients transition using the Richmond Agitation Sedation Scale (RASS). The patient was evaluated from -5 (no response to voice or physical stimulation) to +2 (frequent non-purposeful movement, not aggressive or vigorous) to 0 (spontaneously paying attention to caregiver). Conclusion: The multi-sensory approach in the context of delirium identification and management correlates with improved results, incorporating more delirium-free days, which could be deemed a dose-response relation. Thus, the A–F bundle could be regarded as effective in delirium prevention and reducing the delirium burden.

Key words | Mots clés: Acute care, Clinical reasoning

Exploring the relationship of babywearing on parent-child health and wellness
Friday: 2:45 PM-3:10 PM Room | Location: Poster 3

Poster presentation: Children and youth | Health and well-being
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Introduction: Babywearing is a global practice where parents use carriers to carry infants, influencing child development and enhancing parent-child relationships. Given the range of caregiving activities involved, occupational therapists are well-suited to address babywearing needs. Objectives: This scoping review explores the impact of babywearing on dyadic health and wellness, examining outcomes for parents and infants. It aims to identify the impacts of babywearing and examine gaps in existing literature. Methods: This scoping review followed Arksey and O'Malley's (2005) framework: identifying research question, relevant studies, study selection, charting, data summarization, and consulting with field experts. A peer-reviewed comprehensive search was conducted across ten electronic databases. Relevant grey literature was added. Included studies focused on parents and caregivers as the population, compared babywearing to alternative carrying methods, and examined any outcome. Results: Findings indicate babywearing has numerous implications on infants and caregivers: 1) Neurological and musculoskeletal impacts, 2) Parent-child bonding and emotional well-being, 3) Cultural transmission and parental empowerment in daily occupations. Additionally, concerns for babywearing include caregiver fatigue, discomfort, gait changes, and safety risks for the infant. This practice is also heavily influenced by cultural climate and societal changes over time. Practice Implications: The valuable insights into considerations for babywearing may inform occupation therapy practice for dyadic health and wellness. Understanding this occupation holistically can help highlight potential physical, emotional, and cultural impacts for parents and infants. Occupational therapists can further emphasize safe and ergonomic practices. Future research to help guide clinical interventions includes exploring diversity and longitudinal impacts of babywearing.

Key words | Mots clés: Assistive devices, Community care
Evaluating cognition in everyday occupation for persons with MS program

Friday: 2:45 PM-3:10 PM Room | Location: Poster 4

Poster presentation: Adult | Chronic conditions

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Introduction: Up to 60% of individuals with MS experience decreased cognitive speed, verbal fluency, visuospatial function, and executive function (Sumowski et al., 2018) impacting school, work, driving, and socializing, among other occupations. Cognitive rehabilitation, despite the lack of treatment options, aims to improve cognitive function and teach compensatory skills to improve quality of life (QoL) (Governover, 2018). The Cognition in Everyday Occupation for Persons with Multiple Sclerosis (CEO-MS) is a 6-session program with manual, developed to provide a new treatment option by using a group-based cognitive occupation-focused program. Objectives: This study aims to evaluate CEO-MS, delivered using a virtual platform, to understand participants' knowledge and ability to self-manage cognitive symptoms to enable participation in daily activities. Methods: A pre and post quantitative study design is used to assess awareness of changes in cognitive functions, knowledge/implementation of coping strategies, and the ability to navigate challenging cognitive situations. Participants are recruited through a local MS clinic to participate in CEO-MS and complete a questionnaire before and after the program. Content of the questionnaires includes demographics, elements of cognitive dysfunction, and a modified version of the Cognitive Self-Efficacy Questionnaire II. Data will be analyzed using descriptive statistics and content analysis. Results: It is anticipated that participation in CEO-MS program will increase knowledge and ability to self-manage cognitive symptoms of MS, increasing participation in daily activities. Practice Implications: The CEO-MS program can support therapists to provide cognitive occupation-based interventions by increasing the treatment options available. "Governover, Y. (2018). Cognition and activities of daily living in multiple sclerosis. In J. DeLuca & B. Sandroff (Eds.), Cognition and Behavior in Multiple Sclerosis (pp. 171–190). American Psychological Association.

Key words | Mots clés : Evidence-based practice, Multiple sclerosis

Outcomes of an innovative student program: recruitment, retention, client care

Friday: 2:45 PM-3:10 PM Room | Location: Poster 5

Poster presentation: Older Adult | Fieldwork/Education

Alison M. McLean (Vancouver Coastal Health, Vancouver) almclean@mail.ubc.ca Desiree Betz (Vancouver Coastal Health) Darien Merrick (Vancouver Coastal Health) Kristy Inouye (Vancouver Coastal Health)

Background: One health authority experienced critical shortages of occupational therapists (OTs) in long-term care (LTC). Recruitment is challenging including new graduates. Retention of OTs is also difficult: high vacancies lead to unmanageable workloads, high stress and low morale, leading to OTs moving to other practice areas. Learning Objectives: We will present one solution for recruitment and retention – and ultimately client care – the LTC Student Therapist Enhanced Program (LTC-STEP); and share outcomes of a pilot project, lessons learned, and expansion. Innovation: LTC-STEP started as a one-year pilot. An OT Clinical Instructor took two students for each of five practicums during the year. Short-term outcomes include the student learning environment, changes in student confidence in clinical skills and interest in working in LTC, and student contribution to resident care. Long-term
outcomes are recruitment, retention, and ultimately enhanced resident/client care. Findings: The pilot demonstrated success in all short-term outcomes. There were also early achievements in long-term outcomes: two of four new graduates accepted jobs in LTC; the Instructor reported increased job satisfaction; and when a second care home implemented LTC-STEP, the Instructor role enticed an experienced OT to return to LTC. By year’s end, STEP was established in two care homes and starting in community (home health). Practice Implications: LTC-STEP contributes to recruitment and retention of OTs and improved client care. Requirements include partnerships within the health authority and with the university, and strong supports and flexibility to meet ongoing needs of the OT Clinical Instructors, their teams, students, and clients.

Key words | Mots clés : Long term care, Program evaluation

Northern reflections: Recruitment and retention advice for student occupational therapists
Friday: 2:45 PM-3:10 PM Room | Location: Poster 6
Poster presentation: Not applicable | Fieldwork/Education
Emma McDougall (Queen’s University, Kingston) Laura Toth (Queen’s University) Richard Kellowan (Kingston Health Sciences Centre) Richard.Kellowan@Kingstonhsc.ca

Introduction: Northern practice settings have unique work conditions that influence recruitment and retention for occupational therapists (OTs). Two student OTs sought to explore these conditions in preparation for their return or relocation to northern settings upon graduation. Innovation: A five-step process occurred. First, a literature review (n=8) identified recruitment and retention factors for Canadian OTs in urban and northern settings. Second, the Competency-Based Fieldwork Evaluation manual was reviewed to outline clinical competencies for student OTs. Third, a semi-structured, 21-item interview guide was curated to examine how OT work conditions, clinical competencies, and recruitment and retention factors may affect new graduates entering practice in northern settings. Fourth, OTs working in northern settings across Canada were recruited for sixty-minute virtual interviews or Google Forms surveys through snowball sampling with local professional networks, including CAOT-North. Fifth, interview results were integrated with literature review findings to derive advice for new graduates entering northern settings. Findings: Six (6) virtual interviews and five (5) surveys occurred. Respondents described work in northern settings according to: resources; isolation; scope of practice; institutional and social supports; job identity; and education opportunities. Pandemic practice conditions identified contemporary recruitment challenges (geography, clinical experiences, cost of living) and highlighted retention factors (continuing education, supports, resources, caseload, role recognition). Practice Implications: A “Cycle of Recruitment and Retention” discussed the impact of these work conditions on clinical outcomes, burnout, and attrition. Adaptive strategies for retention were shared: practice support; contextual education; continual reflection; and creative service delivery. Learning Objectives: Attendees will obtain advice on preparing for entry into northern practice settings.

Key words | Mots clés : Fieldwork, Teaching/education

Political Advocacy: the school is not the end of the story
Friday: 2:45 PM-3:15 PM Room | Location: 101
Conversations that matter: Advocacy/Leadership
Christine Fleming cfleming@caotsk.ca (CAOT-SK)
Across SK, OTs have been engaging in political advocacy to inform government about the need for a local program. An approved OT school in SK is not the only end goal nor the only outcome that can be achieved through advocacy. More OT positions are required not only for student fieldwork opportunities, but also to serve all the needs of the residents of the province and reduce existing significant waitlists. This discussion will explore advocacy happening across the country that advances the presence, value, and recognition of OTs from sea to sea to sea.

**Jordan's Principle and Inuit Child First Initiative: Maximizing impact**

Friday: 3:30 PM-3:55 PM  
**Room | Location:** 102

**Paper presentation:** Children and youth | Equity & Justice

*Stefanie Wiens (University of Manitoba, Winnipeg) Stefanie.Wiens@umanitoba.ca*

Background: The spring 2017 Canadian Human Rights Tribunal ruling requiring the federal government to fully fund, and clarifying and expanding the definition of, Jordan’s Principle was a game changing moment for First Nations children with complex medical and developmental needs. The Inuit Child First Initiative (ICFI), announced in summer of 2018, created similar funding access to Inuit children. Subsequent CHRT rulings have expanded Jordan’s Principle’s/ICFI potential reach to include even more children than it initially did. Unfortunately, the reality is access to this funding is very uneven across the country, and access barriers are preventing many families from receiving the help they need.

Innovation: In Manitoba, Jordan’s Principle funding has been provided on a community/program basis from the beginning: each First Nation has a local case manager and other staff, and contracts with consulting clinicians including occupational therapists. Not surprisingly, more than one third of Jordan’s Principle funding has been spent in Manitoba to date. Reflection: By leveraging knowledge acquired from working in Manitoba, more ICFI/Jordan’s Principle funded opportunities can be created for and with families and communities in other provinces and territories. Learning Objectives: To provide important background information for occupational therapists on Jordan’s Principle and ICFI, and increase attendee’s knowledge about the range of opportunities, resources and services that can be funded, as well as strategies to confront common obstacles. Practice Implications: By increasing our understanding of Jordan’s Principle and ICFI, occupational therapists across the country can become better advocates for, and collaborators with, our First Nations and Inuit pediatric clients, families and communities.

**Key words | Mots clés :** Advocacy, Equity & Justice

**Occupational therapists help people live, not only to stay alive**

Friday: 3:30 PM-3:55 PM  
**Room | Location:** 103

**Paper presentation:** Non-specific | Advocacy /Leadership

*Kim Hewitt-McVicker hewittkm@mcmaster.ca Mansi Patel mansi_patel@outlook.com*

Background/Introduction: With suicide being one of the top 10 causes of death in Canada (Mental Health Commission of Canada [MHCC], 2019), it is imperative that occupational therapy professionals are equipped and engaged in suicide prevention efforts. At the 2014 CAOT conference professional issue forum on suicide and occupational therapy, CAOT delegates resoundingly highlighted the need for guidance on how to serve people with suicidal ideation. Practice problem/issue or innovation/success: Ten years later the CAOT Network: Addressing Suicide in OT Practice shares a critical, professional
specific advocacy document, the CAOT Position Statement: Occupational Therapy to Prevent and Support Recovery from Suicide. Approach: This session will walk delegates through the position statement’s development process, theory, structure, 5 calls to action and knowledge transfer efforts.
Learning objectives: Increase awareness of why and how the position statement was created. Increase awareness of with whom and when to apply the position statement. Increase awareness of community and support in collective application. Practice Implications: While occupational therapists and occupational therapy assistants have a role to play in suicide prevention their contributions are often under-utilized if not altogether absent, anticipating heightened systems costs and poorer individual and community outcomes (Hewitt, Hébert, Vrbanac and Canadian Association of Occupational Therapists, 2019). With increased awareness and understanding of the position statement’s development and purpose, occupational therapy professionals will be more supported to apply the position statement in their area of practice.

Key words | Mots clés : Advocacy, Equity & Justice

Optimizing kitchens to support aging in place: Ergonomic design solutions
Friday: 3:30 PM-3:55 PM Room | Location: 104
Paper presentation: Older Adult | Environment
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Introduction: Canada has a growing aging population, with many older adults choosing to remain in their own homes as they age, a concept known as "aging in place." Home environments that accommodate the physical and functional changes that occur with aging allow for the safe execution of activities of daily living. This includes the design of kitchens that cater to the needs and capabilities of those who wish to age in place. Objective: To identify kitchen design recommendations that support individuals to age in place. Methods: Thirteen older female adults, average age of 74 years (±7 years), participated in two experimental sessions: one in their own home and one in a research kitchen with adjustable-height surfaces. In each session, we recorded participants cooking a standardized recipe and later assessed the recording for ergonomic risk exposure. Participants completed a semi-structured interview after each test session. We conducted a paired-sample t-test to analyze ergonomic risk during various kitchen tasks and performed a qualitative analysis on the interviews. Results: We found significant differences in ergonomic risk when using the sink and during chopping between their home and the research kitchen. Qualitative analysis revealed four key themes that relate to the impact of aging on kitchen design: lifestyle, social connections, safety considerations, and accessibility requirements. Conclusion: Designing kitchens that address the needs of individuals aging in place is a multifaceted process. Kitchen designers and occupational therapists should consider ways to create a suitable kitchen environment that promotes safe and comfortable aging in place.

Key words | Mots clés : Home modification, Interprofessional

Enhancing student support services: Welcome to occupational therapy!
Friday: 3:30 PM-3:55 PM Room | Location: 106
Paper presentation: Community/Population | Fieldwork/Education
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Background Mental health problems like anxiety, depression, and alcohol dependence, limit students’ from fully participating in university life. Practical problem The growing demand for mental health support has strained existing student support services. Innovative approaches are needed to promote mental health for students with diverse support needs. Although occupational therapy (OT) for student mental health is an emerging practice area, Eichler and Keptner (2023) identified barriers, like lack of funding, and role confusion. Approach An innovative mental health placement initiative involved eight final-year OT students placed at the Centre for Student Support and Development (CSCD) as part of their clinical training. They provided services such as weekly support groups, individual sessions, mental health campaigns on campus, and promoting OT services through a weekly newsletter. This is the first time the CSCD has included OT in its services. Our approach aligns with international practices (Eichler and Keptner, 2023) and addresses common student challenges like time management, study skills, social skills, and leisure time (Schindler, 2019). Practical Implications This approach highlights the benefits of interdisciplinary working to promote student mental health and maximizing opportunities for learning within our own institution. There is great potential for OT to contribute to student life at university at individual, faculty, and institutional levels. OT delivered by final year students at the CSCD has strengthened the services and increased access to mental health promotion. Our experience serves as a model for other faculties whose students need to engage in service learning as part of their degree programs.

Key words | Mots clés : Fieldwork, Mental health

De la perception de l’occupation aux troubles perceptuels
vendredi: 3:30 PM-3:55 PM Room | Location: 107
Présentation orale (exposé): Les adultes | La santé mentale
Marie-Josée St-Pierre (Université du Québec à Trois-Rivières, Trois-Rivières) marie-josee.st-pierre@uqtr.ca Johana Monthuy-Blanc Pierre-Yves Therriault

The complex everyday practices involved in managing Lyme disease

Friday: 3:30 PM-3:55 PM Room | Location: 108

Paper presentation: Adult | Health and well-being

Janet Parsons (University of Toronto, Toronto) j.parsons@utoronto.ca Lisa Dias (Unity Health Toronto) Twylla Bird-Gayson Jennifer Kelly Billie-Jo Hardy (University of Toronto) Clara Juando-Prats (University of Toronto and Unity Health Toronto) Ariane Quintal

Introduction: Lyme disease (LD) is spread by bites from infected ticks. Driven by climate change, tick populations are expanding across Canada, increasing the risk of LD exposure. Regional variations in tick populations, infection prevalence, healthcare access, and familiarity with LD has led to diverse experiences in terms of prevention, diagnosis, and treatment. Delayed diagnosis and treatment can result in chronic sequelae, including fatigue, pain, neurological and cognitive changes. Given this evolving health threat, it is important to improve understanding of illness burden experienced by people living with LD (PWLD). Objectives: To explore the experiences and perspectives of PWLD and their families, and the practices engaged in to manage their health and navigate the healthcare system.

Methods: Theoretically informed by narrative inquiry and intersectionality, we conducted 21 qualitative interviews with PWLD (n=17) and family caregivers (n=4) recruited from Eastern, Central and Western Canada. Narrative analysis was used to identify storylines, themes, and patterns. Findings: We identified four major storylines. 1) Participants described profound impacts of LD illness on occupation, including their relationships, work, and identities. 2) Lack of recognition of LD illness within healthcare was portrayed as harmful and compounded suffering. 3) Participants recounted the complex work entailed in maintaining their health, acquiring knowledge, and self-advocacy. 4) Finally, they told stories of structural challenges and barriers encountered, particularly in navigating the healthcare system.

Conclusion: Participants’ stories highlight important issues related to social justice, occupational inequities, and the complex practices engaged in to manage their health - with implications for systemic improvements in LD care.

Key words | Mots clés : Equity & Justice, Occupational science

Teens, sex, and neuromuscular conditions: A practical guide for clinicians

Friday: 3:30 PM-3:55 PM Room | Location: 109

Paper presentation: Non-specific | Health and well-being

Charise MacDonald (Holland Bloorview Kids Rehab Hospital, Toronto) charise.macdonald@hollandbloorview.ca Amanda Landry (Holland Bloorview Kids Rehab Hospital) alandry@hollandbloorview.ca

Introduction: Sexuality is an underexplored topic between healthcare professionals (HCPs) and young people with disabilities and/or chronic conditions. HCPs report a lack of adequate resources to explore sexuality with clients, leaving them feeling unprepared to engage in these discussions. Given the progressive nature of many neuromuscular disorders (NMD) there is a need for ongoing discussion about sexual expression as individuals experience changes impacting their participation. Innovation: A guidebook was created to support Canadian HCPs address client goals related to sexual expression and sexual health for youth with NMD. This resource includes client-facing handouts to support the translation of this information into practice. Approach: Literature reviews and consultation with relevant stakeholders informed the scope and content of the project. Clinicians, youth and young adults with...
NMDs and their parents provided feedback on the resources at various points throughout its development. Learning objectives: A clinician guidebook and accompanying client-facing handouts are now available electronically. This resource aims to provide practical information and strategies to increase clinicians’ comfort when addressing sexuality in the neuromuscular population. The guidebook includes topics: friendships & relationships, energy conservation, supportive positioning, and toys & tools. Practice implications: Given the importance of sexuality to young people’s mental and physical health, and a lack of resources described by HCPs, a practical resource was created for neuromuscular populations. Addressing sexual expression will improve the quality of care for teens with NMD, and allow for more holistic approaches to their care. Strategies included in this resource may be generalized to other populations with physical disabilities.

Key words | Mots clés: Interprofessional, Occupational justice

Participants’ perceptions of immigrant employment in the platform economy
Friday: 3:30 PM-3:55 PM Room | Location: Poster 1
Poster presentation: Community/Population | Work and return to work
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Introduction: Immigration is a circumstance that brings many occupational transitions to one’s life as they integrate into a new country. In Canada, integration into the traditional labour force can be especially challenging for immigrants. As a result, immigrants tend to be overrepresented in forms of platform-based gig work that have fewer barriers to access. Although settlement agencies offer employment services for immigrants, there is a lack of evidence that demonstrates best practices for supporting them in seeking employment in the platform economy. Objectives: This project explores participants’ perceptions of the platform economy to understand how immigrants undertaking forms of gig work can be better supported. Methods: Nine key informants, including employment and settlement service providers, completed an in-depth semi-structured interview. Verbatim transcripts were thematically analysed to identify current perceptions and future directions. Results: Findings demonstrate that participants perceive the platform economy as an inevitable avenue for immigrants seeking employment despite the challenges associated with gig work. Participants recognize the need for enhanced support targeting gig workers, such as providing education on rights and advocating for the government to redefine sustainable employment to prevent risk of immigrant exploitation. Conclusion: Immigrants’ occupational identities are being restricted as they are redirected to readily accessible yet precarious jobs in the platform economy. Findings should empower policy makers to enhance regulatory efforts, funding, and protection for immigrants engaged in gig work, as well as service providers to offer more comprehensive support, fostering a secure pathway to employment in the platform economy.

Key words | Mots clés: Occupational justice, Occupational science

Fostering well-being: Digital tool for occupational and mindful scheduling
Friday: 3:30 PM-3:55 PM Room | Location: Poster 2
Poster presentation: Adult | Health and well-being
Anne-Pascale Menard (Boucherville) anne@cedulify.com
Background: In a rapidly changing world where anxiety and burnout are on the rise, innovative approaches to occupational scheduling empower Occupational Therapists (OTs) to help clients find balance and meaning in their activities, addressing mental health challenges in therapy and beyond. OTs frequently use occupational scheduling as a fundamental tool in mental health settings. However, the approach to teaching this tool can vary based on clinician experience, time constraints, and resource availability. Innovation: In response to the lack of timely access to Occupational therapy services, a strained healthcare system, and the need to foster engagement in meaningful activities, a mobile application was developed to streamline the implementation of occupational scheduling for occupational therapists, emphasizing self-awareness and intentional planning. Approach: Informed by the expertise of mental health OTs and the Canadian "Do-Live-Well" framework, which highlights the impact of experience and activity patterns on health (Moll et al., 2015), the tool underwent extensive testing by OTs, clients, and technology enthusiasts, leading to insights for advanced features in future iterations. Learning objectives: Attendees will: 1) gain insight into the intersection of OT frameworks and technology for population-level health promotion; 2) discern the goal-setting components and stress management elements within the digital tool conducive to behavior change; and 3) explore a therapist-client mindful occupational schedule guide introduction. Practice implications: To disseminate and share the clinical utility of a digital occupational schedule tool; provide a reference for clinicians to use during therapy sessions with their clients, encouraging their active engagement in rehabilitation; and advocate for occupational therapy at a population level.

Key words | Mots clés : Mental health, Technology

Exploring unpaid caregivers experiences of anticipatory grief: A meta-ethnography

Friday: 3:30 PM-3:55 PM Room | Location: Poster 3

Poster presentation: Adult | Health and well-being

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Introduction: Anticipatory grief encompasses the grieving process that occurs prior to loss and is sometimes referred to as preparatory grief. Unpaid caregivers make up a vital support system that is interdependent with the healthcare system. Anticipatory grief can be experienced by unpaid caregivers and impacts many aspects of their well-being, including mental health, relationships, and occupational participation. The complexity of this grieving process invites further exploration into how the experience of anticipatory grief influences the occupations of unpaid caregiving. Objective: The purpose of this study is to examine anticipatory grief from the lens of unpaid caregivers. Themes will emerge from qualitative accounts to address the question: what are the perspectives of unpaid caregivers experiencing anticipatory grief? Methods: Using Noblit and Hare’s (1988) seven phase framework, we will complete a meta-ethnography to examine the literature surrounding this subject. Databases we intend to use include CINAHL, Psycinfo, Medline, and Scopus. Results: We anticipate the results will amplify caregiver’s perspectives of anticipatory grief and highlight common themes associated with their experiences. Practice Implications: Centering on voices of unpaid caregivers can richly inform occupational therapists on how to better understand experiences of anticipatory grief related to the occupation of caregiving. This can support occupational therapists to better understand how the grieving process is experienced within a client’s circle of care. A holistic approach to therapeutic practices includes considering client support systems which are highlighted in this study.
Shifting sands: Safe use of artificial intelligence in occupational therapy

Introduction: The international explosion of artificial intelligence (AI) use in health and care in recent years may present the profession with challenges. Gaps in technology related guidance and standards for occupational therapy use of AI, means a lack of published evidence regarding robust, risk management practices. Citizens already using this technology and deploying products for health/care needs, require a workforce with specific competencies (Socha-Dietrich, 2021) equipped to support their decision making. Objectives: To review published evidence regarding safe use of AI based technologies in occupational therapy practice with older citizens living at home, and already using this form of technology via smart devices. To identify practice improvements to support safe use at home. Approach: A review of published international guidance, evidence, professional competencies, and regulation applicable to the safe use of AI by adults living at home. Literature from the past five years was reviewed in the context of the person-environment-occupation model (PEO) to provide a holistic view of the person (Law et al., 1996). The insights framed areas for improvement. Findings: The review highlighted the fluxing and fast paced changes AI is bringing and the gap in guidance for occupational therapists’ work with clients at home. It provided insights and ideas for potential improvements in practice. This baseline was used to develop a conceptual frame for future research. Practice implications: The insights provided a first step towards a frame for occupational therapy practice improvements, and safety assessments in the rapidly developing field of AI technology use at home.

Key words | Mots clés : Mental health, Palliative care

Qualités métrologiques d’un instrument novateur : protocole de recherche.


Key words | Mots clés : Évaluation, Pratique fondée sur les faits scientifiques

**Fitness-to-drive decisions across practice contexts: Focus groups with occupational therapists**
Friday: 3:30 PM-3:55 PM Room | Location: Poster 6

**Poster presentation:** Older Adult | Professional issues/Practice
*Tavleen Deol (University of Toronto, Mississauga) tavleen.deol@mail.utoronto.ca*  
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Introduction: In 2018, Ontario’s occupational therapists were granted the authority to provide a discretionary report regarding a client’s fitness-to-drive. It remains unclear how these regulations have been differentially implemented across diverse practice settings where driving is addressed. An evidence-informed guide, the Clinical Guide to Discretionary Reporting for Occupational Therapists in Ontario, was drafted to supplement the current regulatory guidance regarding discretionary reporting. The applicability of this Guide across practice settings has yet to be assessed. Objective: This study examines occupational therapists’ experiences of discretionary reporting to-date, and their perspectives on the Guide. Methods: A qualitative exploratory design is being used to explore the perspectives of 5-8 occupational therapists’ from each of the following five practice settings: acute care, inpatient rehabilitation, outpatient rehabilitation, community-based practice, and family health teams/community health centres. Virtual semi-structured focus group interviews are ongoing. Themes will be identified using semantic thematic analysis. Anticipated results: Preliminary analyses indicate variability in the Guide’s utility based on experience as an occupational therapist, type of additional information required to navigate ethically challenging clinical scenarios, and practice scope and role determining reporting responsibilities. Study findings will inform further development of the Guide to enhance its clinical utility across practice settings. Conclusions: This study will contribute to the development of a comprehensive evidence and user-informed clinical decision-making tool for reporting fitness to drive, that can serve as a provincial and national template, augmenting available resources for clinicians.

Key words | Mots clés : Clinical reasoning, Older drivers

**Closing Ceremonies**
Friday: 4:10 PM-4:30 PM Room | Location: C1

**Special event | Évènements spéciaux**
*Phillip Wendt, Hélène Sabourin*

After 2+ days of learning, networking and being inspired by your fellow occupational therapists, join us for the Closing Ceremonies and hear The Plenary Panel: Can we achieve collaborative relationship-focused occupational therapy with artificial intelligence (AI)? given by Rosalie Wang and Miini Teng.
Can we achieve collaborative relationship-focused occupational therapy with artificial intelligence (AI)?
Friday: 4:30 PM-5:30 PM Room | Location: C1
Special event | Évènements spéciaux
Miini Teng, Rosalie Wang

Artificial Intelligence (AI) is becoming increasingly integrated into our daily lives. Indeed, AI has the potential to transform the nature of our occupations, our occupational participation, and occupational therapy practice. Following a brief review of the current opinions and perspectives of Canadian Occupational Therapists on AI, we then examine AI’s role in collaborative relationship-focused occupational therapy. We explore ways in which AI may be incorporated as a tool within occupational therapy practice, and how AI may actively participate as an actor within collaborative relationships. In delving into these scenarios, we analyze the potential impact of AI on occupational therapy outcomes, individual or collective participation, as well as the evolving roles and participation of occupational therapists in the presence of AI.

Dr. Rosalie Wang, PhD, OT Reg. (Ont.) is Associate Professor, Department of Occupational Science and Occupational Therapy, Faculty Affiliate, Schwartz Reisman Institute for Technology and Society, Affiliated Member, Robotics Institute, University of Toronto, and Affiliate Scientist, KITE Research Institute, Toronto Rehabilitation Institute – University Health Network. Dr. Wang’s research focuses on developing and implementing technology to enable daily activity participation and social inclusion of persons living with disabilities and older adults. She is leading research in technology for post-stroke rehabilitation, the implications of AI-enabled care technologies on social and health care ecosystems of older adults and caregivers, and the potential for assistive technology bundles as a service delivery approach in the management of dementia. As an AGE-WELL investigator she co-led the most comprehensive project on enhancing equitable access to assistive technologies in Canada.

Miini Teng, MD Candidate 2024, OT Reg. (B.C.) is Clinical Instructor, Department of Occupational Science and Occupational Therapy, Data Science and Health (DASH) Cluster, Data Science for Social Good Fellow, University of British Columbia, and HQP with AGE-WELL. Miini has experience applying data science and artificial intelligence (AI) to predict wildfire smoke trajectories with the BC Centre for Disease Control, developing human-centred cognitive screening tools with the UBC CANARY team, and assisting with the delivery of AI workshops for medical students. She is interested in the intersections among data science/AI, public health, planetary health, and occupational science/therapy.

Disabled clinicians’ experiences in practice: The effects of ableism
Pre-recorded: Community/Population | Equity & Justice
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Introduction: While the healthcare field is working towards increasing the representation of people with diverse backgrounds, disabled people’s experiences as clinicians are often overlooked in research. Despite the unique competencies disabled clinicians can provide in a clinical setting, past research has highlighted the ableism that disabled clinicians face in practice. Objectives: This qualitative study aims to bridge the knowledge gap by examining works in the public domain that were written or produced by healthcare practitioners, including occupational therapists, who identify as disabled, having a disability,
chronically ill or neurodivergent. This study examines the impact of ableism on the experiences of disabled clinicians as they provide care. Methods: This is a qualitative study involving analysis of media in the public domain (e.g., blogs) that were written by disabled healthcare practitioners. Data selection methods included searches of public search engines and snowball sampling. Reflexive journaling was used throughout data collection and data analysis. Data analysis involved line-by-line coding to consider implicit and explicit messaging found in the media. Findings: Ableism was experienced by disabled clinicians throughout their training and practice. Ableism carried implications for their wellbeing, identities, and style/provision of care. Conclusion: This study serves to open a conversation about disabled healthcare practitioners’ lived experiences. These findings contribute to broader conversation of promoting accessibility, equity, and justice within occupational therapy practice. This research also serves as a stepping stone for further research on the experiences of disabled occupational therapists.

Key words | Mots clés : Equity & Justice, Occupational justice

Belonging pathways for young adults with disabilities through sport

Pre-recorded: Adult | Health and well-being
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Introduction: Recent research emphasizes a sense of belonging as essential for meaningful community engagement for young adults with intellectual/developmental disabilities (hereafter, young adults). Research has also linked sport participation to experiencing belonging for young adults. However, how young adults find a sense of belonging remains largely unexamined. Objectives: This narrative inquiry study aimed to examine the processes through which belonging happens (or not) for young adults who participate in sport through Special Olympics Ontario (SOO). Methods: In the context of individual, semi-structured, audio-recorded interviews (60 – 90 minutes), 20 young adult athletes (18-35 years old) who were actively involved in SOO for more than one year shared their perspectives on how they found a sense of belonging through sport participation. Thematic analysis of their transcribed interview data included constant comparison within and across interviews and several levels of iterative coding to generate three overarching conceptual themes. Several strategies for trustworthiness were also employed. Results: The three major themes, each with associated sub-themes, identified by the analysis were: support from allies when participating in sports; being part of the team; and opportunities to discover and develop own interests. Examples and verbatim quotes from the data are presented to support these findings. Conclusion: Findings concerning the processes through which young adults find belonging (or not) through sport participation contribute new knowledge which can inform: (a) future occupational science research on how participation in sport occupations shapes belonging, and (b) development/enrichment of policies and occupational therapy programs aimed at fostering/supporting belonging for young adults.

Key words | Mots clés : Interprofessional, Occupational science

Soutien au développement sain des enfants inuit en milieu urbain

Pre-recorded: Les enfants et les jeunes | Les soins primaires/les soins de santé primaires
Introduction : Les enfants inuit canadiens présentent davantage de vulnérabilités développementales que les autres enfants. Il apparaît donc essentiel de mieux soutenir le développement de ces enfants, notamment dans les milieux urbains où la population inuit est en croissance. Toutefois, peu de services répondant aux besoins de cette population n’ont été développés jusqu’à présent dans ces milieux.

Objectif : Le but de la présentation est de résumer les résultats d’une étude qui visait à mieux comprendre la perspective des parents inuit vivant en milieu urbain par rapport à leurs besoins en matière de soutien au développement de leurs enfants. Méthode : Une étude qualitative descriptive a été réalisée. Des entrevues semi-structurées ont été conduites auprès de 13 parents s’identifiant comme Inuk, vivant en milieu urbain et ayant un ou des enfants âgés entre 0 et 18 ans. Résultats : Les principaux besoins des parents ressortant de cette étude sont le soutien à la santé, à l’éducation et à la socialisation de leurs enfants, à la réponse aux besoins de base de leur famille, à la mise en place d’un environnement familial sécuritaire, à la transmission du patrimoine culturel et linguistique inuit ainsi qu’à l’accès à un environnement social culturellement sécuritaire. Conclusion : Cette étude a permis de mettre en lumière que les besoins des parents en matière de soutien au développement des enfants vont bien au-delà du soutien à l’acquisition d’habiletés dans les différentes sphères développementales. Il apparaît donc essentiel que les organisations des secteurs communautaires, privés et publics adaptent leurs services en conséquence.

Key words | Mots clés : Soins à base communautaire, Équité et justice

Understanding user experiences of virtual acquired brain injury support programs

Pre-recorded: Adult | Technology

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Introduction: Reintegrating in the community and engaging in meaningful occupations is a common goal for people with acquired brain injury (ABI). To support occupational participation after ABI, community support programs aim to provide psychosocial support. Due to the COVID-19 pandemic, many ABI community support programs adopted virtual program delivery. Yet, the experiences of individuals with ABI and facilitators who participate in virtual support programs are not yet explored. Objective: Our aim was to explore and describe the experiences of individuals with ABI and program facilitators who are respectively attending and facilitating virtual support programs. Methods: Semi-structured interviews were conducted with 16 participants with ABI who attended virtual support programs. Among these participants, three were also program facilitators and two were program facilitators without ABI (rehabilitation professionals). Themes were developed using inductive thematic analysis. Results: The following three themes were identified. First, the perceived benefits of joining virtual ABI support programs were forming peer connections and gaining enhanced access to support programs. Second, participants perceived challenges of virtual ABI support programs, which included interpersonal (e.g., communication barriers), intrapersonal (e.g., physical symptoms), and environmental and contextual (e.g., privacy concerns) challenges. Third, participants described how to improve participation in these programs by creating a safe and respectful environment, managing challenging situations, and...
enhancing inclusivity and accessibility. Practical Implications: These findings may help occupational therapists deliver virtual ABI support programs that are safe, accessible, and engaging.

Key words | Mots clés : Brain injury, Technology

Exploring brain activity during buttoning in healthy adults using fNIRS

Pre-recorded: Adult | Technology

Niloufar Benam (University of British Columbia, Vancouver) Courtney Pollock (University of British Columbia) Jill Zwicker (University of British Columbia) Shannon Lim (University of British Columbia) Julia Schmidt (University of British Columbia)

Introduction: The ability to complete activities of daily living (ADLs) is an important part of daily life and can promote well-being and independence. Occupational therapists facilitate independence in ADLs, such as dressing. However, there is currently limited knowledge on brain activity during dressing tasks. Previous studies explored brain activity during dressing using fMRI, however the supine position during fMRI neuroimaging is not a natural dressing posture and may impact findings. Functional near-infrared spectroscopy (fNIRS) is a promising method of data collection as it can investigate brain activity in a natural state (sitting) during dressing. Objectives: To understand brain activity during buttoning in healthy adults using fNIRS. Methods: Participants completed an upper extremity task of buttoning in three 20-second repetitions with 15 seconds rest in between each activity block. Brain activation patterns were recorded using fNIRS over the prefrontal cortex, premotor cortex, supplementary motor area, sensorimotor cortex, and posterior parietal cortex. Results: Twenty healthy participants (25-65 years) were recruited from the community. Significantly higher activation in the prefrontal cortex, premotor cortex, supplementary motor area, and sensorimotor cortex was observed during buttoning compared to the resting state. No statistically significant change in brain activity was observed in the posterior parietal cortex during the buttoning task compared to the rest period. Conclusions: Knowledge of brain activity in healthy adults during dressing is a critical first-step to better understanding brain activation in clinical populations, such as clients with brain injury. This knowledge has the potential to inform future occupational therapy intervention.

Key words | Mots clés : Brain injury, Technology

Reducing community wait times: The rapid access occupational therapy model

Pre-recorded: Older Adult | Health and well-being

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Background: Homecare occupational therapists (OTs) reduce the burden on acute care centers, enable aging in place and support safe hospital to home transitions. Unfortunately, a low OT per capita ratio and high OT turnover, have contributed to increased wait times in the community, which has negative implications for patients and their families. Innovation: The Rapid Access Occupational Therapy (RAOT) model was developed to support timely OT service. The RAOT model adopts an employee model where the OT has paid vacation and benefits, as opposed to the traditional self-employed model. The RAOT also has integrated support from a rehab program assistant, who is responsible for screening and scheduling the first visit for RAOT clients based on patient availability and urgency. Findings: The RAOT model reduced wait times by 41% and decreased the average number of days waiting for an initial OT visit by 28%. In addition, there was a 22% decrease in the OT waitlist, and a 92% reduction in missed
care. Finally, staff reported high satisfaction, and patients reported positive feedback. Learning Objectives: By demonstrating the impact of the RAOT model, the authors hope to encourage other homecare organizations to consider adopting aspects of the model to improve patient outcomes in the community. Practice Implications: The RAOT model is an effective model for homecare OT service delivery, which can be used to reduce the risks associated with longer wait times in the community. The RAOT model is an innovative solution to address the growing need for homecare OT service.

**Key words | Mots clés:** Community care, Program evaluation

**Navigating healthcare among Canadians with ASD during transitions to adulthood**

*Pre-recorded: Child | Mental health*

*Parisa Ghanouni Paige Kavanaugh*

Introduction: The transition to adulthood presents specific challenges for individuals with Autism Spectrum Disorder (ASD) and their parents, involving adjustments in healthcare and routines. Navigating the healthcare system is a major challenge during this transition, as parents shift from managing their child’s healthcare to supporting their independence. Understanding healthcare system navigation is crucial for a successful transition, but this knowledge is often lacking. Despite existing research on the barriers faced by individuals with ASD during the transition to adulthood, there is limited information on healthcare navigation. Objectives: This study aims to explore the experiences of youth with ASD, their parents, and service providers to gain a comprehensive understanding and identify crucial components for successfully transitioning through healthcare systems. Methods: 21 interviews were conducted including: 8 youth with ASD, 7 parents of youth with ASD, and 6 service providers working with individuals with ASD across Canadian provinces. Results: Thematic analysis revealed three main themes essential to navigating the healthcare system: (a) information sharing, (b) community-based programs, and (c) transitional supports. Conclusion: This study contributes to the existing literature on the transition to adulthood for individuals with ASD. Recognizing elements that can improve healthcare system navigation is vital due to its impact on youth and families. This study highlights the importance of accessing navigational services to facilitate a successful transition of healthcare systems. The findings from the current study can inform navigational support to make the transition to the adult healthcare system more efficient for youth with ASD.

**Key words | Mots clés:** Autism, Mental health

**Accessing services: ASD transition to adulthood experiences and insights**

*Pre-recorded: Children and youth | Health and well-being*

*Parisa Ghanouni Paige Kavanaugh*

Introduction: The transition into adulthood presents distinctive barriers for those with Autism Spectrum Disorder (ASD) and their caregivers. There is a notable scarcity of services related to ASD, encompassing educational and support services. This lack of resources heightens the risk of making decisions without all necessary information, potentially leading to the misallocation of time and effort toward less suitable avenues of care. The improvement of high-quality services is essential to adequate care for all individuals. Objectives: This study aims to delve into the experiences of youth with ASD and their parents to gain a comprehensive understanding of the barriers and facilitators to accessing healthcare services during the transition to adulthood. Methods: Interviews were conducted with 18 youth with ASD aged 15-20, and their parents in Nova Scotia to explore their experiences to access to services.
during transitions. Results: Thematic analysis revealed three main themes: (a) enhancing the availability of services, (b) facilitating funded services, and (c) appointing a transitional coordinator. Conclusion: This study contributes to existing literature on the transition to adulthood for individuals with ASD. Accumulating information on the barriers and facilitators to accessing services is pivotal to enhance the care received by those with ASD. This study highlights the importance of developing resources and knowledge translation. The findings from this study can inform transitional services to promote a successful transition to adulthood for youth with ASD.

**Key words | Mots clés :** Autism, Community care

**Improving services related to sexuality and intimacy in stroke rehabilitation**

**Pre-recorded:** Adult | Advocacy /Leadership  
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Background: More than 50% of post-stroke individuals experience sexual difficulties. According to best practice guidelines, people should be given the opportunity to discuss intimacy and sexuality following their stroke. Practice problem: Unfortunately, few people receive the opportunity to discuss sexuality during their post-stroke rehabilitation and few occupational therapists address sexuality. Learning objectives: Attendees will learn about one inpatient rehabilitation hospital’s implementation of new services and clinical tools related to sexuality after stroke. Approach: An interdisciplinary committee of patients, clinicians, managers and researchers developed and implemented various tools and services for inpatient stroke rehabilitation. These included an adapted version of the Sexuality Interview Guide (SIG), an informative pamphlet and a group education session about sexuality and intimacy following a stroke. A six-month pilot study took place during which the SIG was completed with 40/48 stroke patients, of which 8/40 wanted to further address sexuality during their rehabilitation. During 11 months of implementation, the SIG was completed with 73/104 patients, of which 19/73 wanted to further address sexuality during their rehabilitation. Practice implications: This study showed that it was feasible to implement new services and tools related to sexuality following a stroke, and that implementing them could support this rehabilitation hospital in following the best practice guidelines related to sexuality after stroke. These tools and services are important to include in occupational therapy practice to fulfill our professional responsibilities and optimize our holistic approach. Future studies should further explore the specific contribution of occupational therapists in the provision of sexual rehabilitation services and interventions with post-stroke individuals.

**Key words | Mots clés :** Stroke

**Pediatric eating, feeding and swallowing: improving quality and service delivery**

**Pre-recorded:** Children and youth | Professional issues/Practice  
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Background: Pediatric eating, feeding, and swallowing (EF&S) is a multifaceted interprofessional practice area with significant implications for the child and family. This project aimed to create resources to benefit families and clinicians working with children experiencing challenges with EF&S across Alberta.

Practice problem: The need to enhance care across service delivery models for children with EF&S concerns was flagged by families, interdisciplinary health professionals and operational leadership.

Approach: This quality improvement initiative enhanced safety, access, and excellence. Patient and family centered care and collaborative care approaches guided the initiative and resource development. Partnership engagement included patient and family advisors, EF&S interdisciplinary subject matter experts, executive sponsorship, operational leadership, and quality improvement specialists. Learning objectives: We will share the variety of extensive evidence-based resources which are freely available to families and providers. We will also highlight tools that are of particular benefit to Occupational Therapy practice in delivering quality EF&S services to families. Practice implications: Enhanced EF&S knowledge and consistency in interdisciplinary practice results in improved safety, access, and quality of care for children and families experiencing EF&S challenges.

**Key words | Mots clés**: Dysphagia, Interprofessional

**Breaking the cycle of avoidance and perfectionism: An OT approach**

**Pre-recorded**: Adult | Mental health

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Background: Academic distress is a significant source of mental health concern for post-secondary students, leading to a call for increased resilience skills-building to help students manage school stress, improve mental health, and optimize academic success (Lisnyj et. al, 2021). A group academic resilience program was designed by two occupational therapists (OTs) to bridge the gap between mental health and academics. It was piloted for students experiencing mental health concerns at a Canadian university in 2022/23. Innovation: The program combines an occupational therapy lens with evidence-based approaches from a variety of fields such as neuroscience, psychology, cognitive science and education. The vision is to help students move forward with academics while bolstering their mental health, seeing their gifts more clearly, and equipping them with tangible tools to bounce back from academic adversity. The program provides students with a safe and supportive community where they can recognize that they are not alone in their struggles and that anxiety, perfectionism, and procrastination are not signs that they are broken, they are signs that they are human. It takes practice and support to shift entrenched habits so study hall and one-to-one drop-in is built into the program. Findings: Mixed methods research on the program found that many participants became more flexible in the face of setbacks, less avoidant and perfectionistic, more self-compassionate, and more accepting of difficult emotions. These changes culminated in an improved ability to approach schoolwork, persevere through challenges and manage mental health symptoms. Learning objectives: This extended discussion will share research outcomes and stories, introduce participants to a sample group session and explore ways that OTs can translate this material to clients who are experiencing debilitating perfectionism, procrastination and shame. Practice implications: This discussion will help OTs 1) understand some of the root causes of perfectionism and procrastination in order to help clients more effectively 2) consider the impact of shame on learning and the healing power of community, 3) think about motivation and avoidance from a new lens to help clients get unstuck and 4) find inspiration to innovate in their place of work.
Key words | Mots clés: Evidence-based practice, Mental health